Worcestershire County Council Corporate Risk Register

The identification and categorisation of risks is based on the assessment of the Probability (likelihood) and Consequences (impact) of the potential risk using the criteria listed below.

The **Likelihood** is assessed on a continuum ranging from **Almost Impossible** to **Very High** dependant on the degree of probability.

Likelihood and Impact Matrix

Likelihood

	Negligible	Substantial	Critical	Extreme
Very High	9	19	21	24
High	8	12	20	23
Medium	4	11	15	22
Low	3	10	14	18
Very Low	2	6	13	17
Almost Impossible	1	5	7	16

Impact

High 19 – 24	Unacceptable Risk: Immediate control/improvement required
Medium 8 – 18	Acceptable Risk: Close monitoring and cost effective control improvements sought.
Low 1 –7	Acceptable Risk: Need periodic review, low cost control improvements sought if possible.

The **Impact** should the risk occur can be assessed by using the consequence criteria below. It should be noted that this is a guide only and other considerations may be necessary.

Negligible	Substantial	Critical	Extreme
No injuries beyond 'first aid' level	Medical treatment required - long-term injury	Extensive, permanent injuries, long-term sick	Death
No significant disruption to service capability	Short-term loss disruption of service capability	Short-term loss of service capability	Medium term loss of service capability
Unlikely to cause any adverse publicity	Needs careful public relations	Adverse national/local publicity	Adverse national publicity
No more than 3 people involved	No more than 10 people involved	Up to 50 people involved	More than 50 people involved/affected
			Litigation almost certain and difficult to defend
Unlikely to cause complaint/litigation	High potential for complaint, litigation possible	Litigation to be excepted	Breaches of law punishable with imprisonment
Breaches of local procedures/standards	Breaches of regulations/standards	Breaches of the law punishable by fines only	

Risk Appetite

A Risk Appetite will set the levels of risk the organisation is prepared to accept in pursuit of its business objectives using the Risk Appetite Levels. The scale of Low to High refers to a willingness to accept risks.

The Risk Appetite will help to determine the organisation's risk tolerance to individual initiatives, projects or programmes.

Risk Heat Map

The risks listed in this register have been assessed based on the Likelihood and Impact Matrix. All risks based on their assessment **with controls in place** are included in the following Heat Map to provide a graphical overview of the risk levels and to support priority setting where necessary.

Low Risk	Medium Risk	High Risk

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Appetite Levels	Description
Averse (Low)	Avoidance of risk and uncertainty is a key objective
Minimalist (Medium Low)	Preference for ultra safe options that have a low degree of **inherent risk** and only have a potential for limited reward
Cautious (Medium)	Preference for safe options that have a low degree of **residual risk** and may only have limited potential for reward
Open (Medium High)	Willing to consider all options and choose the one that is most likely to result in successful delivery while also providing an acceptable level of reward
Hungry (High)	Eager to be innovative and to choose options based on potential higher rewards (despite greater inherent risk)
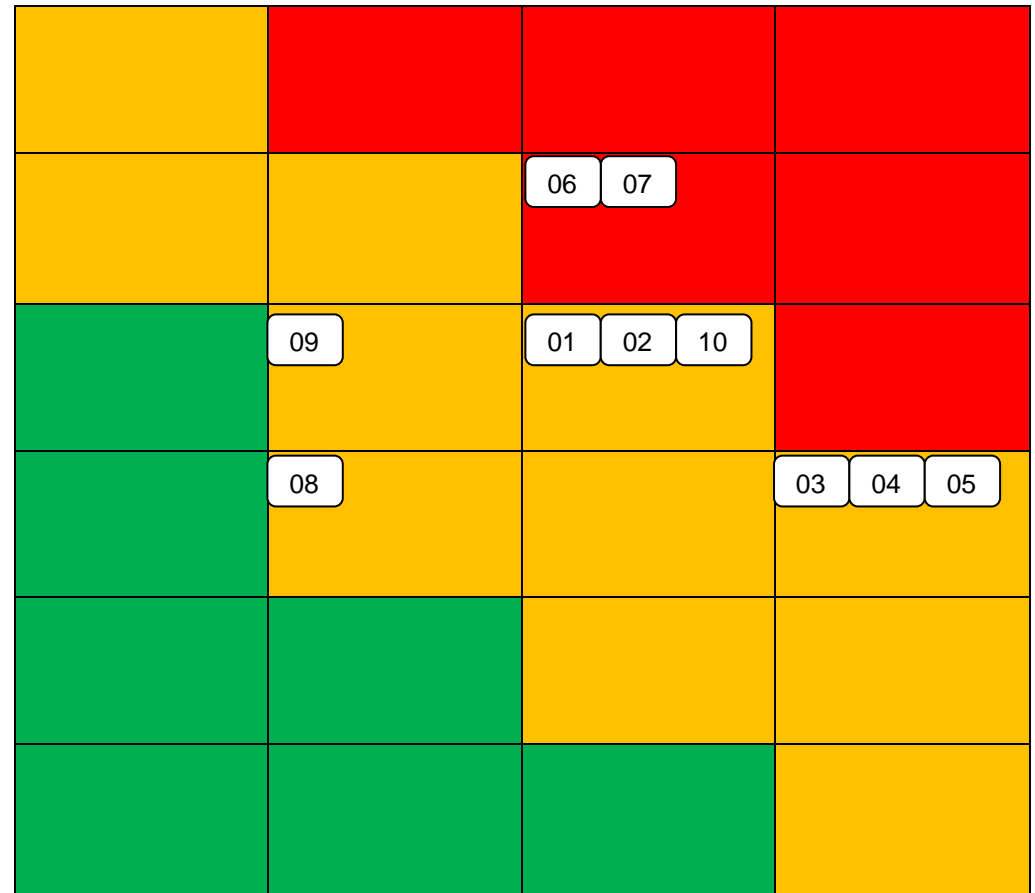
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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
JOINT CORPORATE AND TRANSFORMATION RISKS								

[1] Use Colours – Red, Amber or Green – with associated numbers 1 to 24from Likelihood & Impact Matrix

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
CR 01 TR 01	Failure to maintain business as usual / appropriate levels of service at the same time as transformation (Gail Quinton)	• Transformational programmes include processes to ensure the right staff with the right knowledge, skills and competencies are in place and retained for delivery of BAU and effective transformation • Appropriate level of staffing within individual projects in place to sustain bau and to deliver transformation • Where possible, individual projects ensure that we have services up and running before we decommission others • Effective commissioning of high quality services • Robust contract management processes and procedures in place with further development of commercial skills planned • Service performance	**Common Activity** • SRD and 1-1 processes used as a mechanism for managing performance and identifying any skills/competency gaps. SRD completion monitored through Balanced Score Card: WCC. 95.19%. • 'Golden Handcuff' arrangements in some areas of organisation. • All Directorates monitor commissioning projects at least monthly and timescales whilst ensuring that bau and FTE numbers/skills remain appropriate. Exception reporting from HoS and Senior managers in place. • All Directorates have business plans in place. Some are structured to cover both "business as usual" objectives and transformational objectives. **BEC** • HoS review completed, units working to a temporary structure until final post filled, interviews set for late November 2014. **ChS** • Recruitment of Transformation Manager for the Adoption Service and interim Head of Provider Services and Transformation to increase capacity in transformation and support BAU. • We have set up a Social Work Workforce Board to work cross Council to address the issue of the social work recruitment and retention strategy. We have a number of social workers who are in the process of joining the service and this should help us to achieve the December 2014 target of 85% permanently employed. • Each of the 3 key workstreams within ChS has its own dedicated project manager, who is managed by the Programme Manager for ChS. Each workstream project manager is part of the relevant DMT and works with the HoS on tracking both transformational change and business as usual risks	**Open** (Medium High)	Uncontrolled	High	Critical	20
					Current (DASH)	Medium	Critical	15

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
		monitoring and management processes in place.	• CHS projects within the Future Fit Programme continue to be tracked monthly by Next Steps Programme Board. Risks are assessed and discussed at the Board, and RAG rated. Plans are in place to address the red and amber projects. • The following projects continue to have the potential for the greatest impact in terms of this risk - Commissioning of Learning and Achievement; Recruitment and Retention of social worker posts; Achievement of financial action plan within the LAC strategy and contract tendering opportunities within Transforming Early Help Services. Ensuring delivery of BAU is part of this process and is tracked through the Next Steps Programme Board **DASH** • Additional (temporary) staff recruited in line with resources identified to provide additional short term capacity. • The Directorate continues to monitor overall capacity within services both formally through metrics such as timeliness of work and informally, and is continuing to recruit to key vacancies. • Resources updated on a monthly basis. • Additional admin support put in place • Capacity increased by internal secondment and use of agency staff • Recruitment of project manager underway to support service redesign • Early identification of case requiring application to Court of Protection • Funding agreed for additional staff and additional advocacy **Resources** • Launch of Management Leadership Competencies and Our People Values (Investing in the Future) at October Management Conference • Workshops commenced on commissioning learning					

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			needs – additional course need identified • Delivery of Corporate Business Skills Portfolio • We are currently recruiting to a number of vacancies with mixed success • Partnership arrangements are continuing to be developed through a range of initiatives and services. • Discussion at SLT re staff morale, agreed to work through staff survey responses and agree appropriate action • DLTs considering Directorate specific action • Launch of					
CR 02 TR 02	Failure to deliver financial savings identified in MTFP (John Hobbs)	• Processes in place for identification of Future Fit savings • Governance arrangements in place to report and monitor realisation of savings through FFPB • Monitoring of existing budgets and identification of budget where savings will come from once progressed to DBC • Early warning of areas where identified savings may not be realised (either amount or on time), including unintended consequences.	**Common Activity** • Monthly review of financial savings at FFPB and reported through dashboard. • Directorate Leadership Teams monitor financial position monthly, identifying the projected year end position, an assessment of future pressures and other financial issues which may affect the year end outturn • Managers supported in monthly budget monitoring by Finance staff **BEC** • Future Fit Programme Plan reviewed at each BLT and savings target gap reviewed as necessary **ChS** • Financial information included within all monthly highlight reports & overall ChS summary reviewed by Next Steps Programme Board monthly • ChS savings tracker reviewed in real time via accountant liaison with Programme Manager and issues escalated where required. • The directorate receives monthly budget monitoring reports to the leadership team which identifies the projected year end position, an assessment of future pressures and other financial issues which may	**Cautious** (Medium)	Uncontrolled	Very High	Extreme	24
					Current (BEC)	Medium	Critical	15

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
		• Review of financial forecasts at MTFP and CSP • Effective project management to realise savings and ensure appropriate staffing levels within projects.	affect the year end outturn The directorate has a weekly update on the cost implications of starters and ceases that week • Report to Future Fit Programme Board for ChS indicates that there are no financial savings currently rated as red for 2104/15. Those rated as amber and red for future years are being monitored and tracked robustly. Outside the normal Future Fit monitoring (as it was a project with no savings attached in year) there are issues within the LAC strategy which has meant that an overspend continues to be reported for the end of 2014/15 with regular reviews being undertaken by cabinet members and the Chief Executive following the approval of a transformational fund investment of £1.5m over 2 years. **DASH** • Regular monitoring has identified that £4.4m has been delivered to date. £0.7m is currently rated 'at risk' or not yet identified. • Report taken to Cabinet in July outlining options for in-house services. **Resources** • MFS04 – procured EIS solution to assist in delivery of budget holder self-service					
CR 03 TR 03	Failure to deliver a major project leading to increased costs, reputational damage to the Council and/or failure to realise savings	• Project management processes and governance in place to ensure project delivery • Key risks identified and monitored for major projects	**Common Activity** • Risk registers maintained for all projects and reviewed monthly. • Monthly FFPB and FFSG review and development of focused corporate and transformational risk approach. • Project milestones tracked through Directorate programme management and fed into Future Fit Dashboard.	**Open** (Medium High)	Uncontrolled	Very High	Extreme	24
					Current (BEC)	Low	Extreme	18

Corporate Risk Register – November 2014

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
	(John Hobbs)	• Effective procurement and contracting processes in place • Effective governance and review mechanisms for Programmes and projects in place • The right staff with the right knowledge, skills and experience are in place to complete transformational projects.	**BEC** • Integrated Transport Programme Board approving and monitoring all Transport schemes. • Monitoring and review meetings in place for key projects, including Energy from waste project, Hartlebury Incinerator project, Waste Services contract monthly meetings, Highways & Fleet Maintenance • Highways & Fleet Maintenance progress meetings • Working towards a joint protocol with regards to securing appropriate developer contributions **ChS** • Risk register maintained for all projects and reviewed monthly with automatic update to directorate risk register where applicable • Projects monitored monthly through Next Steps Programme Board and through Next Steps Programme Manager. • Contract management processes in place, including Payment By Results. Active performance management of contracts is in place and the contracts staff from the JCU have now transferred back to ChS from 1st September. **DASH** • Currently 11 FL projects are rated as 'green', 4 'amber' and 1 'red' • Regular monitoring has identified that £4.4m has been delivered to date. £0.7m is currently rated 'at risk' or not yet identified. • Additional temporary staffing introduced to support the projects • Report taken to Cabinet in July outlining options for in-house services. • IT supplier for e-market portal selected and detailed work to build system commenced • Detailed work undertaken on new processes,					

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			pathways and required infrastructure including staffing. • Additional savings proposals worked up for Corporate Strategy week and supported by members. • Demographic pressures identified and paper presented to SLT. **Resources** • Risk Register maintained for all projects and reviewed monthly with automatic update to Directorate Risk Register where applicable • Project milestones tracked through Directorate programme management and fed into Future Fit Dashboard					
CR 04 TR 04	Serious harm or death due to a failure on the part of the Council (Richard Harling)	• Workforce appropriately trained to mitigate risk of injury • Statutory requirements are fulfilled and monitored • Effective engagement by Council in partnership working via WSCB and WSAB • Learning processes in place (e.g. from SCRs, complaints) • Processes in place for safeguarding adults and children and monitoring to	**Common Activity** • Relevant staff are DBVS checked **BEC** • Person specifications include relevant qualifications for the post and are reviewed as necessary **ChS** • Mandatory training to all ChS Social Care workforce. • Children's Social Care Workforce development Plan in place alongside CPD online database. • Staff health check and SRDs undertaken to highlight any training and development gaps • Learning from SCRs implemented and embedded. • Incremental appointment of social care staff is reducing use of agency staff leading to practice improvement. • Service development plan in place in place via Directorate business planning cycle • Performance management process in place via Children's Services Performance Board	**Cautious** (Medium)	Uncontrolled	Very High	Extreme	24
					Current (DASH)	Low	Extreme	18

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
		ensure processes are complied with.	• Robust review of performance information and case file audit to ensure that no child is at risk of significant harm **DASH** • Risk increased to Red due to lack of capacity of adult social care providers • Work to develop a more joined up commissioning strategy between NHS and DASH for care home provision • Monitoring of workforce availability as economic upturn is likely to see reduction in availability of workforce • DASH DLT action plan for domiciliary care agreed • External investigations commissioned into two complaints • Learning Event has been planned (identifying key themes and actions required) • New independent chair has been appointed to Worcestershire Safeguarding Adults Board • WCC have formally committed to the establishment of a Multi-Agency Safeguarding Hub (MASH) and funds have been committed for this • Health and Safety report considered at DLT in the period • Personal resilience and resourcefulness training sessions rolled out across the Council in June/July • Coaching programme continuing **Resources** • Adults social workers given free access to Children's safeguarding e-learning training • Tender for the provision of social care training is currently being advertised on the WCC portal					
			**Corporate Risks**					

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
CR 05	Failure to comply with legislation and statutory duties (John Hobbs)	The following includes examples of cross-cutting legislation that affects all areas of the Council: • Appropriate H&S policy, procedures, guidance and standards in place and adhered to • Equality Duty – Overseen by FFPB to ensure Equality included in decision making process • Internal Audit processes and procedures to ensure effective financial management • Managers' responsibilities in relation to relevant legislation included in Job Descriptions • SRD/CPD/Training • Annual declaration of assurance statement • Best practice groups • Legal service • Insurance and claims	**Common Activity** • WCC discharges its statutory duty for H&S, E&D and other legislation with relevant internal policies and procedures in place. • E&D Board being established in all Directorates to ensure regular review of working practices and service provision comply with equality standards. Equality and Diversity considerations are built in to Directorate Plans, Business Cases, and Commissioning and Cabinet reports. • H&S Audits, inspections and surveys conducted and supported by monthly / quarterly directorate reports **BEC** • Directorate discharges its statuary duties to government as required by service provision **ChS** • ChS discharges its statutory duty for H&S, E&D and in relation to other cross-cutting legislation in line with WCC policy. • Scheme of Delegation also outlines managers' responsibilities in these areas • Equality and Diversity considerations are built in to Directorate Plans, Business Cases, Commissioning and Cabinet reports and reported to Next Steps Programme Board for governance purposes • ChS has plans in place to comply with statutory Ofsted Single Inspection Framework **DASH** • Additional admin support put in place • Capacity increased by internal secondment and use of agency staff • Recruitment of project manager underway to support service redesign • Early identification of case requiring application to Court of Protection	**Open** (Medium High)	Uncontrolled	High	Extreme	23
					Current (ChS)	Low	Extreme	18

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			• Funding agreed for additional staff and additional advocacy **Resources** • Potential changes in legislation are routinely monitored to ensure compliance. • Corporate Plan to be reviewed and refocused in line with vision of Leader • Joint action being taken by Legal Services and Directorates to prepare for substantial new legislation - Care Act (adult Social care) and Special Education regime. • Monitoring of payments to check expenditure is within expected annual pattern • Budget monitoring completed and financial position reported to SLT and Cabinet. • Legal and Democratic review of Cabinet reports and no successful Judicial review. • Monitoring of payments to check expenditure is within expected annual pattern					
CR 06	Failure to effectively store, manage and process information and maintain the security of the personal data we hold, (or our partner agencies and commissioned providers hold on our behalf). in compliance with the Data Protection Act (John Hobbs)	• Corporate Information Governance Group in place • Plans in place to respond to recommendations of ICO audit • Information Sharing Protocols in place • Staff training in relation to Data Protection and FOI • Appropriate technical and	**Common Activity** • Corporate Governance Board in place. • Action Plan to respond to recommendations of ICO audit report being developed **BEC** • Unit Managers to promote best practice through chain of command • Initial security sweep carried out at County Hall, to identify potential breaches of the Data protection Act. • A communications plan being implemented and follow up inspections carried out. **ChS** • Monitoring, investigation, and follow up of all	**Minimalist** (Medium Low)	Uncontrolled	Very High	Critical	20
					Current (DASH)	High	Critical	20

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
		organisational measures are in place to prevent the unauthorised or unlawful processing of personal data and to protect against accidental loss or destruction of personal data	potential data security incidents. • Quarterly summary report from the Corporate Information Governance Board. • A raft of actions have been undertaken within ChS to mitigate risk in this area, including: • Improved communication campaign • Training workshops • Further roll out of GCSX- over 110 accounts set up plus a number of team accounts • All Breaches are reviewed monthly with CIMU • There are no Breaches currently reported to the ICO. • Information Sharing: ChS have relevant Tier 3 Information Sharing Protocols in place to share data with commissioned services and partner agencies. • In the last quarter ChS have worked on creating data sharing agreements with Academies and Heath Visitors. **DASH** • DASH membership of Corporate Information Governance Board and Group, and contribution to work on action plan in response to ICO visit • Privacy Notices developed for adult social care, and built into existing documentation • Audit for email security in development • Data breaches reported and reviewed in DASH Information Governance group. Breaches followed through to identify learning for the service. Most have reflected errors in checking at the level of the individual. **Resources** • Roll out of Information Sweeps across Resources, information to be collated. • Registers maintained in Resources & BEC for breaches and "near-misses" • "Keep data safe" area on SiD launched					

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
CR 07	Demographic changes lead to changed demand for Services (Richard Harling)	• Forecasting work to identify and understand future pressures e.g. joint strategic needs analysis • Directorate level work to mitigate these pressures and look at internal allocation of resources • Council level work on overall allocation of resources e.g. through Corporate Strategy Week	**BEC** • Five Year renewal review for concessionary travel, age and disability, factoring in mortality rates. • Planning – South Worcestershire Plan, Wyre Forest and Bromsgrove-Redditch Strategic Plans reviewed. • Economic Development monitoring of statistics from the Intelligence Unit to adjust services as necessary • Waste Services used housing and population figures to adjust calculations for waste requirements **ChS** • ChS use Office of National Statistics population forecasts, pupil number forecasts and forecasts of key groups of service users (e.g. LAC) used to predict demand and to design and commission services, thus mitigating pressures. • All key needs assessments include forecasting element to ensure that future pressures are understood and planned for. • A monthly review of actual starters and leavers is used to adjust the LAC forecast which is in turn used to inform LAC Commissioning Strategy as well as the monthly financial forecast • The service is also now looking at average LAC days and average LAC costs per cohort of LAC to identify trends, analyse practice and where savings and efficiencies can be made and reporting to Children's Services Performance Board on a quarterly basis • A needs assessment has been approved by Next Steps Programme Board and FFPB , detailing requirements for updated Early Help needs assessment activity to be undertaken over the next 6 months **DASH** • Report taken to SLT on 10 Sep outlining issues and pressures • Proposals worked up for Corporate Strategy week and supported by members	**Open** (Medium High)	Uncontrolled	High	Critical	24
					Current (DASH)	Medium	Critical	20

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			• Revised proposals developed for Better Care Fund in line with new regime – agreement reached which ensures protection of social care spend. Sign off 19 Sep. • Continuing detailed work took place to understand the full potential financial implications of the Care Act • DLT reports were provided for budget monitoring and review of savings plans • Processes and timetable for 2015/16 budget planning were worked up. **Resources** • Workforce strategy function under development within the 'Modernising HR Services' transformation programme • Strategic advice given to support future demographic pressures for Social Care • Working towards Digital Strategy to increase self-service option.					
CR 08	Failure to effectively manage the Council's premises (John Hobbs)	• Policies and accommodation standards are in place • Facilities Management / Officer in Charge system • Building liaison meetings • Approved contractors lists • Asset management database • Help desk	**Common Activity** • Corporate Landlord Board in place attended by all Directorates, actively managing property and setting policy and standards. • Relevant officers undertake Fire Risk Assessments, Customer Surveys, Asbestos Surveys etc. **ChS** • ChS are an active member of the Corporate Landlord Board. **DASH** • Following July Cabinet report outlining future options for in-house social care provider services, detailed work is now underway. This will have a significant impact on property requirements • Audit of managers/officer in charge knowledge of policies completed. • Operational support staff with responsibility for property have transferred across to property services	**Open** (Medium High)	Uncontrolled	Very High	Substantial	19
					Current (ChS)	Low	Substantial	10

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No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			Resources • Development work being undertaken for the Joint Property Vehicle (JPV).					
CR 09	Ineffective Emergency Response arrangements (Richard Harling)	• Council's Emergency Response Framework in place and reviewed regularly (for Business Continuity see also CR 10) • Plans for Emergency Response and activation of Emergency Response Centre in place • West Mercia Local Resilience Forum (LRF) Joint Emergency Response Arrangements and Training and Exercising Strategy (Council contributes) • Training of Emergency Management Teams / Gold & Silver cadres / Exercising activity • WCC active participation in and contribution to	**BEC** • Pre-Seasonal review of Winter Maintenance Plan, snow clearance and gritting. • Highways Emergency Plan detailing inter agency response across the county and region. **ChS** • ChS Emergency Planning Group meets quarterly to ensure that appropriate arrangements are in place and any issues addressed. • Critical Incident SLA published for schools and academies. 210 (87%) schools/academies have signed up to the SLA. • First two training workshops with Schools took place on the 24th of June and 24th September. So far these have been attended by 37 people representing 29 schools, with positive feedback received. **DASH** • A revised corporate emergency plan based on the Council's new matrix operating model and functional service areas was adopted and agreed by the Wider Leadership team in September. An awareness training programme for all Council staff with an ERF response responsibility is scheduled for October / November • Arrangements are in place for the set up and mobilisation of the emergency response centre in the basement of county hall during an incident. These facilities are designed for an in house response and not a multi-agency response which will be set up elsewhere in the county. • WM LRF Joint Emergency Response Arrangements under review with completion due April 2015 • Training of council emergency response is ongoing	**Open** (Medium High)	Uncontrolled	High	Critical	20
					Current (DASH)	Medium	Substantial	11

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
		LRF business programme • EP Outsourcing Options Appraisal inc Needs Analysis	• WCC EP team continues to contribute fully to the LRF work programme. • Outsourcing of EP service procurement at PQQ stage. Process now formally stopped pending further LRF partner consultations.					
CR 10	Ineffective Business Continuity arrangements – Business Continuity arrangements need to keep pace with transformation and assurances in place for the arrangements of commissioned services (Lisa Peaty)	• Business Impact Analysis conducted across council to identify critical functions and prioritise planning needs • Business Continuity plans in place for critical functions • Business Continuity is integral to Council Emergency Response Arrangements (see also CR09) • Staff training in BC planning	**Common Activity** A Corporate Business Continuity Plan has been produced and is scheduled for sign-off by WLT on 25th November. **BEC** • Unit BCP's reviewed annually or sooner, if significant change occurs to procedure or service provision (Ongoing programme). **ChS** • All services are currently refreshing their BCPs with all managers receiving relevant documentation to support them in writing their plans. **DASH** • Agreement reached between ChS, DASH and SACA to fund additional server capacity for Fwi in part as a measure for ensuring business continuity - Procurement process has commenced. • Recent incidents at two Care Homes in the county indicate the need for understanding resilience required for maintaining an effective service. The revised Care Home contract (due to be rolled out soon) offers an opportunity to raise awareness of the need for Care Home establishments to have in place adequate BCM plans and for these to be tested and reviewed regularly. Moreover, as a high risk care home subject to river flooding, the Bushley Nursing Home to have in place an adequate BCP that is tested and reviewed regularly. **Resources**	**Open** (Medium High)	Uncontrolled Current (ChS)	High Medium	Critical Critical	20 15

No.	Risk Description (Accountable Officer)	Controls currently in place	Activity in the last quarter that demonstrates controls are effective	Risk Appetite	Assessment	Likelihood	Impact	Rank[1]
			• CFSG BCP plan reviewed and updated. • Disaster Recovery Plans are reviewed periodically in line with Directorate BCP and updated with changing service requirements - Review of DR plans completed and phased improvement initiated • Business critical applications and supporting infrastructure being prioritised with the business (so that the team can restore systems in the right sequence) • Improvements planned to certain high availability systems to improve resiliency e.g. FWi) as well as internet access • Further opportunities planned via the commissioning of ICT Infrastructure.					

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