KEY CORPORATE RISK MATRIX   OCTOBER 2022

KCR 1	Financial Sustainability		Previous	Current
Risk Owner: CEO		**Risk Type: Financial**	🟥	⬆ 🟥

Risk of failing to maintain a sustainable financial position due to the Council facing ongoing financial pressures with multiple causes; Government funding cuts, the impact and subsequent recovery from Covid-19, and the macroeconomic situation which is driving increases in both demand for services and costs to deliver services, as well as increasing borrowing costs across the financial plan period.

Q3 rationale for change: Whilst the Council has robust financial controls in place, external market conditions, specifically the inflationary environment, is resulting in above budget cost increases for directly purchased materials / services and those contracted through third parties. Capital programme review is ongoing in light of increased borrowing costs. The cost of living crisis is increasing the demand for services and impacting on residents / businesses ability to service payments due. The risk therefore remains rated as high and is increasing.

Sources of risk Mitigating controls / actions		Responsible Officer	Previous	Current
1.1	**Failure to achieve the budget impacts more generally on the councils finances with the necessity for unintended savings from elsewhere to ensure financial stability**	**Director of Finance**	**4x5=20**	**4x5=20**
1.1.1	Established governance arrangements are in place to achieve planned outcomes at Cabinet and officer level including quarterly reporting to Cabinet / ET and escalation processes as required	Embedded		
1.1.2	Agreed 5 year plan including both capital and revenue spend was agreed in Q1 2022.			
1.1.3	Forecasts reviewed and updated on a monthly basis with updated year end position	Ongoing affordability review of Capital Plan		
1.1.4	Ongoing budget monitoring takes place in conjunction with budget holders			
1.1.5	Regular meetings and ongoing engagement as required between Service Directors and Finance			
1.1.6	Internal Finance business meetings to share knowledge and best practice take place fortnightly			
1.1.7	Virements are used where appropriate to ensure budgets and spend are aligned accurately			
1.1.8	Where appropriate reserves can be released to balance the budget			
1.1.9	Separate process for HRA business plan setting, monitoring and updating however subject to same robust controls			
1.2	**Inflationary pressures are resulting in cost increases, which impact on the council directly, and on the ability of contractors to deliver activities of the specified quality at the agreed price**	**Head of Finance / Procurement / Contract Managers**	**4x4=16**	**5x4=20**
1.2.1	Ongoing and effective communication with service providers and suppliers about likely impact on prices (e.g., 5-year expectation of cost increases by one quarter on construction projects)			
1.2.2	Contract procedure rules followed, investigate where opportunity exists to renegotiate or retender contracts			

1.2.3	Ensure that budgets anticipate likely cost impacts with reasonable allowances built into budget costings to cover inflation risk. Recognise that even where inflation linked cost impacts are permitted contractually, they may not be acceptable politically / reputationally (eg. Rental increase of CPI+1% for HRA allowable) Government consultation on rental cap at 5%. HRA.			
1.2.4	Regular review of priorities and available resources, informed by ongoing monitoring of expenditure and updated forecast position			
1.2.5	Ongoing review of project business cases to consider how changes to assumed costs (borrowing / raw materials / contractor) impact overall viability. Similarly, to revisit benefits case where project outcomes deliver reduced energy consumption.	Head of Commercial Services		
1.3	**The council has significant financial risks related to increasing (above budget) demand for services: currently felt most acutely across Complex Adult Care, Childrens Care Service and Educational High Need Provision**	**Head of Finance**	**4x5 = 20**	**4x5=20**
1.3.1	Dedicated Finance Managers for each service area and dedicated income management teams			
1.3.2	Maximisation of available income sources – ensuring accuracy in charging and collection processes			
1.3.3	There are regular links to performance meetings, monitoring KPIs and contract compliance			
1.3.4	Investment in technology or operational delivery arrangements also helps mitigate cost pressures or new legislative requirements.			
1.3.5	Responsibility for budgetary control aligned to Strategic and Service Directors.			
1.3.6	Examine alternative strategies or amend policies where possible to mitigate growth in demand or reduce costs			
1.3.7	Seek to recover additional costs where budgets held by other parties or partners			
1.3.8	Utilise supplementary resources to cushion impact of cuts and invest to save			
1.3.9	Assess grant related risks and seek to mitigate (with the grant regime)			
1.4	**The risk of a reduction in expected income as both tenants, residents and businesses are struggling with the 'cost of living' and unable to meet financial commitments resulting in a failure to meet budgeted income targets for Council Tax, Business Rates and other payments.**	**Head of Welfare and Exchequer**	**3x4=12**	**4x4=16**
1.4.1	Continue to migrate customers to cheaper, more effective methods of payment (e.g. Direct Debit).			
1.4.2	Process work in timely manner ensuring that correct bills are issued to customers as soon as possible.			
1.4.3	Timely payment of benefit – ensure benefit workloads are managed effectively and kept to a minimum.			
1.4.4	Adhere to the recovery timetable for issuing reminders and summonses.			
1.4.5	Continue to drive 'digital by design' improvement of business processes to reduce waste and deliver improved processing times			
1.4.6	Increase workforce flexibility to ensure resourcing and demand are aligned			
1.5	**Making inappropriate choices in relation to lending or and borrowing decisions, leads to financial losses.**	**Head of Accountancy**	**2x4= 8**	**2x4=8**
1.5.1	Treasury management policy which sets out the policies and objectives of its treasury management activities and treasury management practices, how those policies and objectives will be achieved and how treasury management will be managed and controlled.			
1.5.2	Treasury management strategy and plan recommended to and approved by the Corporate Governance & Audit Committee and Cabinet			

1.5.3	Report to Council (via the Corporate Governance & Audit Committee and Cabinet) at least once in relation to treasury management activity during the year			
1.5.4	Keeping updated in relation to rate changes			
1.6	**Exposure to uninsured losses or significant unforeseen costs, leads to the necessity for unintended savings to balance the councils finances.**	**Head of Accountancy / Insurance Manager**	**2x4=8**	**2x4=8**
1.6.1	Ensure adequacy of financial revenue reserves to protect the council's financial exposure and maintain effective management to minimise impact on the council essential services.			
1.6.2	Actively consider the appropriate treatment for known risks, accepting that insurance provided by 3rd party may not always be the optimum solution.			
1.6.3	Maintain awareness of risk activity that the insurance market is unwilling to cover and developments of offerings in this area. Eg: Combustible composite panelling (cladding), Cyber attacks			
1a ER	**Unregulated Housing Providers**	**SD Adults & Health**	**Raised April 22**	
1b ER	**Safety Valve Commitments (Funding to support SEND transformation activity)**	**SD Children & Families**	**Raised July 22**	

KCR 2	Effective Governance		Previous	Current
Risk Owner: SD Corporate Strategy, Commissioning & Public Health	**Risk Type: Compliance / Legal / Reputational**			➡

Failure to effectively design, implement and maintain fit for purpose governance frameworks could lead to statutory breaches, poor allocation of resources and reputational damage for the Council. Given the breadth of activity and speed of delivery it is crucial that decision making and service delivery activity is well controlled to demonstrate value for money and be sufficiently agile to respond to resetting of priorities at a strategic or operational level.

Q3 update: There have been improvements in officer adherence to agreed governance processes / timescales, due to implementation of communication / training plan. New DPO is now post, with SARs backlog being actively managed and progress reported on a monthly basis to the ICO. Work on Cabinet / Committee structure is progressing in line with original plan. Previously flagged emerging risks are being well managed. Propose no change to previous rating.

Sources of risk and Mitigating controls / actions		Responsible Officer	Previous	Current
2.1	**The council's arrangements to effectively design, implement and monitor adherence to policies are inadequate, leading to the potential for failure, error, illegality or delay**	**Head of Governance**	**2x5 = 10**	**2x3=6**
2.1.1	Agenda planning process is embedded with regular reminders issued			
2.1.2	Scheme of delegations has been approved			
2.1.3	General online and bespoke training available on CPRs, FPRs, Working in a Political Environment and Decision Making			
2.1.4	Effective challenge (between officers, officers and members, and between member), with sufficient time for adequate consideration and scrutiny (e.g. timely publication of Key Decision Notices)			
2.1.5	Carefully following all rules and requirements, particularly those related to Financial Procedures Rules and Contract Procedure Rules			
2.1.6	Clear processes for recording officer decisions are in place, with an increase in the number of decisions that are being recorded			
2.1.7	Series of SLT briefings have taken place to ensure requirements are understood			
2.2	**Management of information from loss or inappropriate destruction or retention and the risk of failure to comply with the Council's obligations in relation to Data Protection, Freedom of Information legislation and the General Data Protection Regulations (GDPR) leading to reputational damage, rectification costs and fines.**	**Head of Governance**	**3x4=12**	**3x4=12**
2.2.1	Thorough, understandable information governance policy and supporting procedures that are clearly communicated to workforce and councillors			
2.2.2	IG Guides have been developed and are published on the Intranet. These cover topics such as DPIAs, privacy notices and information security			
2.2.3	Sharepoint site developed to host templates and provide additional guidance			
2.2.4	Development and maintenance of data retention schedules within operational areas			
2.2.5	Established process for recording and assessing potential data breaches, including process for reporting to ICO if required			
2.2.6	Council has a Senior Information Risk Owner (SIRO) officer and a Data Protection Officer (DPO) supported by an Information Governance Board			

2.2.7	GDPR training is included as part of induction training for all relevant roles				
2.2.8	Ongoing development and implementation of training programme(s) to meet the needs of officers and members to continue to embed processes and maintain awareness				
2.3	**Failure to administer elections (parish / local / parliamentary) in line with required legislation / guidance (eg. Elections Act 2022).**	**Head of Governance**	**NEW**	**3x4=12**	
2.3.1	Established elections team in place to assess requirements and implement necessary changes				
	Working collaboratively with other LAs to understand likely implications and to share approach				
2.3.2	Awaiting final [legislation] detailing changes that must be enacted prior to May 2023 election period. Draft [legislation] reviewed and planning underway. Will require significant communications strategy, changes to operational processes and therefore financial implications.				
	Initiating working groups to address specific strands of changes (eg IT working group for development of voter registration portal)				
2.4	**Failure to implement effective controls to prevent and identify fraudulent activity resulting in potential misuse of council resources leading to unfair outcomes for service users, poor value for money and reputational damage**	**Head of IA and Risk**	**NEW**	**3x4=12**	
2.4.1	Development and approval of revised Fraud Strategy				
2.4.2	Relaunch Fraud Risk Panel to provide cross service oversight of fraud risks and mitigants	First meeting Q1 2023			
2.5	**Insufficient visibility of the council-wide change delivery programme incorporating both transformation and project activity, concerns that the organisational capacity to deliver is insufficient to cope with the ambitious change agenda, coupled with challenging 'steady state' conditions.**	**SD Strategy & Innovation**	**NEW**	**3x3=9**	
2.5.1	Corporate Transformation priorities are required to follow agreed project methodology				
2.5.2.	Clear and effective governance models and reporting routes in place, for Corporate Transformation Priorities, to include • Individual Programme Board meetings, as appropriate • Corporate Transformation Priorities are considered at Monthly Modern Organisation Board and/or Bi-Monthly TPB meetings. Programme risks reviewed with opportunity to escalate specific high risks for consideration and discussion • Programme Assurance Sessions for corporate transformation led priorities, enabling opportunity for challenge and support on risk management • Corporate PMO to have oversight of Corporate Transformation Priorities performance and progress tracking				
2.5.3	Implementation of robust benefits realisation planning to ensure that both financial and non-financial outcomes are delivered in line with expectations, across all in-view programmes				
2a ER	**Project / Service handover**	**SD Growth & Regeneration**	**Raised: July 22**		

KCR 3	Statutory Obligations		Previous	Current
Risk Owner: Chief Executive		Risk Type: Legal / Compliance		➡

The risk that the Council, or their delivery partners, are unable to meet statutory obligations due to changes in funding models and / or changes external market conditions (difficulty in recruiting, increasing costs inc NMW) or the emergence of new, unfunded government burdens. Where statutory obligations are delivered by external bodies (eg. West Yorkshire Joint Services) the process for obtaining ongoing assurance must be agreed and monitored through robust governance frameworks.

Q3 update: Increasing uncertainty on the legislative agenda across the short to medium term. Widespread calls continue to extend the implementation timeline for the proposed reforms to adult social care (Care Act), currently October 2023. Expectation that the Elections Act will require amended processes for May 2023 and Protect Duty (PAL) will come into force in Summer 2023.

Sources of risk and Mitigating controls / actions		Responsible Officer	Previous	Current
3.1	**Statutory obligations create additional resource requirements that are not covered by existing government / other funding allocations and impact on the councils current policies and strategies.**	CEO / ET	**4x3=12**	**4x3=12**
3.1.1	Horizon scanning and work to ensure that the local impacts of national legislation, or other changes are fully understood as soon as practical			
3.1.2	Strategic Leaders participate in regional and national forums. Joint responses to emerging issues are coordinated through these forums			
3.1.3	Continue to lobby, through appropriate mechanisms, for additional resources e.g., Local Government Association (LGA)			
3.1.4	Be aware of underlying issues through effective communication with citizens, partners, service providers and suppliers about likely impact on resources			
3.1.5	Understand, scenario plan and monitor financial implications so that budgets can anticipate likely impacts			
3.1.6	Lobby for appropriate shares of NI levies for local authorities- or similar funding.			
3.2	**Failure to complete adequate assurance where responsibility to deliver statutory obligation has been [transferred] to external organisations**	CEO / ET	**3x3=9**	**3x3=9**
3.2.1	Robust governance framework in place to monitor adherence to obligations that have been transferred eg. WYJS			
3a ER	**Sustainability of the Care market**	**SD Adults & Health**	**Raised: April 22**	

KCR 4	Third Party Relationship Management	Previous	Current
Risk Owner: Chief Executive	**Risk Type: Operational / Reputational / Financial**	NEW	➡️

Failure to develop and manage relationships with third parties (including grant awarding bodies and government agencies) to ensure council priorities are considered and outcomes delivered. Provision of services to residents and communities is no longer the sole preserve of 'the council', from the allocation of funding to end user delivery it is to be expected that there will be a multitude of third parties involved. These range from other public sector bodies, private suppliers / contractors, commercial partners to voluntary organisations. It is imperative that the Council nurture and maintain effective and influential working relationships with these third parties demonstrating robust governance and oversight.

Q3 Update: Continued strong engagement and representation with partner agencies. Collaborative approach with suppliers to work together to manage inflation driven cost increases. Consider if there is read across of high level findings from Internal Audit of KIHCP to other similar programmes.

Sources of risk and Mitigating controls / actions		Responsible Officer	Previous	Current
4.1	**Risk of low levels of interest from suppliers in renewing contracts / tendering for contracts resulting in reduced competition and potentially poor-quality service. Risk of contractor failure resulting in impacts on service**	Head of Procurement	**5x4=20**	**5x4=20**
4.1.1	Proactively encourage and stimulate interest in tendering for council contracts by developing and publishing market position statements and procurement pipeline opportunities, undertake regular dialogue with market.			
4.1.3	Ensure sufficient time is allocated to procurement activities to allow for pre-market engagement (where appropriate) and to allow time for potential suppliers to submit bids within timescales			
4.1.4	Recognise and mitigate for differing sources of risk such as reliance on single suppliers and contracting with firms that derive large proportions of their business from the public sector			
4.1.5	Commission effectively; ensuring specifications are fit fur purpose			
4.1.6	Instigate early consultation with existing suppliers about arrangements to be followed at the end of existing contractual arrangements			
4.1.7	Undertake robust contract management - ensuring suppliers are performing and delivering against any key performance indicators and plans in place to manage external pressures such as changes to NMW, recruitment / retention challenges, supply chain disruption			
4.1.8	Adhere to payment terms to maintain adequate cash flow for smaller contractors			
4.1.9	The new Kirklees Procurement Strategy 2022-2026 and Action Plan details how KC will become an attractive partner to do business with, whilst maximising the economic, social and environmental benefits through our approach to social value	In progress		
4.1.10	Adherence to procurement processes, including the agreed governance framework, to ensure the risks associated with approvals are documented and escalated appropriately			

4.2	**Risk that external agencies become increasingly influential and impose additional governance arrangements / policy and processes on to KC leading to protracted decision / delivery timelines, conflicting priorities, extra costs and political pressure, including but not limited to:** • **West Yorkshire Combined Authority (WYCA)/Leeds City Region Local Enterprise Partnership (LEP)** • **West Yorkshire Police and Crime Commissioner** • **WYJS** • **Government departments e.g. DLUHC, BEIS**	**CEO / ET**	**NEW**	**4x3=12**
4.2.1	Maintain senior officer engagement eg, Strategic Director currently Chair of 'Directors of Development' group,			
4.2.2	Ensure that Kirklees are represented on all relevant boards and relevant officer groups with appropriate briefing			
4.2.3	Ensure effective use of WY Chief Executives and WY Leaders groups to escalate issues / concerns			
4.2.4	Work with partners to co-design governance processes / funding agreements etc.. to reduce the risk of additional and unnecessary provisions which add cost or delays			
4.3	**NHS West Yorkshire Integrated Care Board / Kirklees Integrated Care Board**	**SD Adults & Health**	**NEW**	
4a ER	**Associated Parties**	**SD Growth & Regeneration**	**Raised: July 2022**	

KCR 5	Workforce Development		Previous	Current
Risk Owner: SD Corporate Strategy, Commissioning and Public Health		Risk Type: Colleague / Operational	🟥	⬆🟥

Risk that delivery of services is negatively impacted through a reduction in number and / or capability of council workforce. We are reliant on maintaining a suitably qualified, capable and motivated workforce in order to meet the expectations of our partners and communities.

Q3 update: Challenging market conditions are being experienced across the public and private sector and are presenting a significant risk to both recruitment and retention success. The risk of industrial action over pay is flagged as an emerging risk with various other public services discussing increasing likelihood of strike action over the coming months. Turnover has risen to pre-pandemic levels. Whilst sickness levels have stabilised since last quarter any resurgence of Covid and / or winter flu and resulting absence will place further pressure on front line colleagues. Salaries are becoming increasingly out of line with market norms / candidate expectations.

Sources of risk and Mitigating controls / actions		Responsible Officer	Previous	Current
5.1	**Failure to deliver the recruitment requirements to resource council roles, primarily due to salary expectations or role specifications, leading to increasing numbers of agency / contracted staff with resulting financial and operational implications.**	**Head of People Services**	4x4 = 16	5x4 = 20
5.1.1	Recruitment strategy to promote the range of employee benefits and emphasise the job satisfaction factors, specifically from service employment			
5.1.2	Recruitment initiatives include working with the job centre, launch of careers site (2021), working with employment and skills and social media campaigns. Two council recruitment events taking place in Q4 and continuing to drive place-based initiatives such as outreach through libraries.			
5.1.3	Embedding flexibility into the recruitment process where possible and responding to changing candidate expectations. Eg. Application form has been further simplified.			
5.1.4	Engage and encourage younger people through targeted apprenticeships, training and career development opportunities as well as support into employment programmes (Project Search, Kickstart and work experience)	Active YEN		
5.2	**The risk of failing to retain a motivated, sustainable and diverse workforce, appropriately skilled to meet the demands of the council / government agenda.**	**Head of People Services**	4x4 = 16	5x4 = 20
5.2.1	Refreshed People Strategy now in place, with regular monitoring of workforce data at ET and SLTs	Ongoing – monthly reporting in place		
5.2.2	Appropriate oversight and scrutiny in place through updates provided to Personnel Committee and Corporate Scrutiny Panel (August 22), specifically on recruitment and retention challenges	Ad hoc		
5.2.3	Dedicated resource is in place to support services with the most acute need, utilising more creative approaches such as talent banks, alternative advertising approaches and bespoke events.			
5.2.4	Ongoing pilot activity to trial workforce planning approaches and utilise benchmarking data across Adults, Growth & Regeneration, Communities, Catering & Cleaning	Outcome of pilots to be reviewed		
5.2.5	My Learning (MiPod Xtra replacement) has now launched making learning easier to access for everyone. My Space, new employee portal launched, making accessing employee content easier from personal devices	Complete		

5.2.6	Development of a workforce planning approach to consider long term plans as well as short term solutions; fully utilise the Timewise accreditation in promoting the council as a Flexible Employer.		
5.2.7	Focus on Mental Health Awareness, including stress, with promotion of Wellbeing surveys, Wellbeing network and dedicated support service		
5.2.8	Revitalising exit interviews and developing 'stay' interviews to drive understanding	Target date Q1 2023	
5.2.9	Create a commercial strategy linked to income generation from schools, given the future government's White Paper agenda of academisation in order to future proof our business.		
5a ER	**Industrial Action**	**SD Governance & Commissioning**	**Raised: July 22**

KCR 6	Safeguarding			Previous	Current
Risk Owner: SD Children & Families and SD Adults & Health		Risk Type: Reputational		🟥	➡️ 🟧

Failure to keep vulnerable people in our communities safe from harm is a key priority for the Council. The consequence of a safeguarding failure are serious and long-lasting at both an individual and organisational level.

Q3 update: It should be noted that whilst the risk assessment scores have reduced across all safeguarding risks this reflects a re-baselining against the revised risk assessment matrix, to accurately reflect the current risk. There has not been a material in quarter reduction in risk exposure. Robust processes and procedures and effective working with strategic partners ensures appropriate escalation and intervention as required. The 2022 JTAI inspection observed there is a well embedded strategic partnership approach to CSE & CCE.

Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
6.1	**The council does not adequately safeguard children because of increased complexity, referral volumes and a lack of service capacity to respond to the assessed need.**	**SD Children & Families**	3x4=12	2x4=8
6.1.1	Disclosure & Barring Service (DBS) checking, staff training, supervision, protection policies kept up to date and communicated			
6.1.2	Robust Safeguarding board partnership is in place, shared accountability across key strategic partners ensures oversight and management of safeguarding risks			
6.1.3	Effective management of social work (and related services); rapid response to any issues identified and from any Safeguarding Practice Reviews (Children), Ofsted focus visits have evidenced practice is improved with no children considered at risk of significant harm. LADO procedures, process and training issues have been addressed as a result of the 2019 Ofsted inspection.			
6.1.4	16+ Unregistered/unregulated provision procedure in place and communicated to staff mitigates against inappropriate use of the above provision.			
6.1.5	Continued focus on strengthening practice - Recording Assessment and Planning with regular, high quality supervisions in place.			
6.1.6	Recruitment practices and a focus on developing staff has stabilised the social care workforce and addressed capacity issues.			
6.1.7	Monthly directorate wide QA meetings focusing on key areas, giving assurance of grip, management oversight, quality of practice and performance.			
6.1.8	Service Practice learning days and auditing in place contributing to children's services objective of being a learning organisation			
6.2	**The council does not adequately safeguard vulnerable adults, and those subject to elder abuse, because of increased complexity, referral volumes and a lack of service capacity to respond to the assessed need.**	**SD Adults & Health**	4x5=20	4x4=16
6.2.1	Staff training, supervision, safeguarding and Self Neglect Policies kept up to date and communicated.			
6.2.2	Active management of cases with media interest, Adults have an Escalation pathway monitored by Safeguarding Service manager.			
6.2.3	Completion of the development of the Corporate Safeguarding Policy (approved by Cabinet March 2022)			

6.2.4	Self-neglect policy and pathway			
6.2.5	Ongoing awareness raising through functions such as Safeguarding Week, training and briefings			
6.2.6	Adults Survivors team in place to work with adult survivors of CSE.			
6.2.7	Adults continue to review and prioritise risk and actively work with staff in monitoring workloads during workload management conversations.			
6.2.8	Responded to recruitment and retention issues recruitment drive, Rolling adverts, jobs fairs and offering certain roles a retention payment			
6.2.9	Ensure competence of the Safeguarding Boards and that they are adequately resourced to challenge and improve outcomes			
6.2.10	Adults Safeguarding Board has its own risk register.			
6.2.11	Risk Escalation Conference for Self-Neglect cases which is multi-agency focused.			
6.2.12	Additional work to ensure that corporate safeguarding activities include appropriate control arrangements. Comprehensive audit programmes ensure quality oversight (such as effective record keeping, risk management and decision making)			
6.2.13	Adult's representation on all strategic and operational groups related to safeguarding (such as Prevent, Domestic Abuse and Modern Day Slavery)			
6.2.14	PIPOT Process in Place			
6.3	**Legacy issues of historical childcare management practices, and particularly, the heightened national attention to Child Sexual Exploitation and historical abuse cases leads to reputational issues, and resource demands to address consequential matters.**	**SD Children & Families**	**4x4=16**	**2x4=8**
6.3.1	Additional resources and expertise allocated to new and historical Child Sex Exploitation (CSE) and other legacy work, as required.			
6.3.2	Two exploitation subgroups that focus on strategic and operational matters relating to the exploitation of children are in place which has mitigated resource demands to address consequential matters.			
6.3.3	Risk matrix and risk management approach implemented with the police and partners.			
6.3.4	Provision of support pathways to assist victims			
6.3.5	Understand relationship with the Prevent strategy, and issues linked to counter terrorism			
6.3.6	Continue to monitor external developments and engage with other LA's / relevant bodies			
6a ER	**Shortage of Approved Mental Health Professionals AMHPs in the Out of Hours service.**	**SD Adults & Health**	**Raised: April 22**	

KCR 7	Resilient Operational Processes		Previous	Current
Risk Owner: SD Corporate Strategy, Commissioning & Public Health		**Risk Type: Operational**	🟥	➡️ 🟥

Failure to develop and maintain resilient operational processes and controls resulting in an inability to keep our communities and colleagues safe.

Q3 update: No change – governance and oversight controls are working effectively. Online accident and incident reporting system now in place to ensure accurate recording of lessons learnt activity completed and any additional training provided to relevant colleagues. The potential impact of a successful cyber attack is so severe that the risk remains reporting as 'red', despite the operation of the preventative controls that are in place.

Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
7.1	**The risk that the Council's incident management / emergency planning is insufficient to manage a serious incident or series of related incidents leading to short term or prolonged impacts on the Kirklees community and Council employees and operations. Potential risk causes include, but are not limited to: Weather related events; Industrial accident; Infectious disease outbreak; Terrorist attack**	**Head of Health Protection**	**4x4=16**	**4x4=16**
7.1.1	The Council has an embedded emergency management system that aligns to National guidance, including annual assurance audit under EPRR core competencies assessment.			
7.1.2	All our plans are subject to regular review as per work programme. We also regularly train people in their roles and test these via exercises.			
7.1.3	Governance is provided via Kirklees Health Protection Board.			
7.1.4	Debriefing following incidents so that lessons can be identified, and plans modified where necessary.			
7.2	**The risk of a data breach and / or impaired system functionality caused by a malicious cyber-attack leading to inability to deliver council services, costs to recover / compensate and associated reputational damage**	**Head of Technology**	**5x5=25**	**5x5=25**
7.2.1	Cyber Strategy approved by ET and IG Board being implemented by IT Service			
7.2.2	Comprehensive training plan in place to cover new starters and refresher training on an annual basis			
7.2.3	Recognising and understanding "cloud" based products and the advantages and risks that they provide			
7.2.4	Business continuity procedures (in various scenarios) including recognising that some solutions may involve a return to paper-based solutions and records			
7.2.5	Proactive management of cyber issues, including additional web controls			
7.2.6	Adherence to NCSC guidance			
7.3	**Health and safety measures are inadequate leading to harm to employees or customers and possible litigious action from them personally and/or the Health and Safety Executive with the potential for prosecution and reputational damage .reputational damage And the potential of prosecution and corporate /personal liability) (and particularly issues of fire safety)**	**Head of Public Health**	**2x4=8**	**2x4=8**
7.3.1	Regular monitoring through Health and Safety Oversight Board			
7.3.2	Completion of Bi-annual corporate performance reports			

7.3.3	Audit of the health and safety management systems of Services within the Council, carried out in accordance with HSE guidance Successful Health and Safety Management (HSG (65)	
7.3.4	Management review and inspection of high risk premises at 3 yearly intervals and medium risk premises at 5 year intervals.	
7.3.5	Online accident and incident reporting system (Claim Control) has recently been launched to provide statistical information to managers at agreed intervals. Accident reports monitored and followed up and or investigated as necessary.	
7.3.6	Mandatory health and safety training matrix developed to specify the minimum level of training dependent on role within the Council. A well-managed training programme will help to develop a positive health and safety culture as well as helping to ensure that the Council meets its legal duty to protect its employees	

KCR 8	Climate Change		Previous	Current
Risk Owner: SD Environment & Climate Change		**Risk Type: Operational / Reputational**	🟥	🟧

Failure to consider and adequately respond to Climate Change both at an immediate operational level and as longer-term strategic risk resulting in insufficient resilience to climate events with consequential local environmental / community impacts (eg. Flood risk) financial impacts (predominantly restrictions on funding) and reputational damage.

Q3 Update: Team have been successful in securing external WYCA gainshare and grant funding for service priority projects and staff resources. The Climate Change Action Plan is progressing through governance with approval at Cabinet and full Council in due course. Guidance for residents and employees was issued to ensure people remained safe during the extreme heat in July / August.

Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
8.1	**Failure to identify, prioritise and implement adaptation measures resulting in low levels of climate change resilience**	**SD Environmental Strategy & Climate Change**	4x5=20	
8.1.1	Operational and response plans designed to minimise impacts (e.g. gully cleansing for those areas which are prone to flooding, winter maintenance budgets are supported by bad weather contingency, gritting deployment plans etc..)			
8.1.2	Investment in flood management			
8.1.3	Awareness of local consequences such as ensuring appropriate levels of energy efficiency in residential and commercial property, and the financial consequences			
8.1.4	Consultant-led work, due to be completed by August 22, to understand Kirklees' climate change risks and vulnerabilities and identifying possible adaptation measures.			
8.2	**Risk that net zero net zero climate commitments are not achieved due to scope and scale of programme exceeding the funding and delivery capability that is currently allocated. Grants increasingly require demonstration of climate commitments, impacting on funding available and statutory obligations relating to climate change are becoming more stringent.**	**SD Environmental Strategy & Climate Change**	4x5=20	3x4=12
8.2.1	PCAN (Placed-Based Climate Action Network) and UoL led work, completed in Jan 22, outlining the pathways to Net Zero for Kirklees, in-line with the districts 2038 net zero target and UK's 2050 net zero target.	Complete		
8.2.2	Lobbying for financial and other government support in relation to the costs of meeting obligations			
8.2.3	Climate Change engagement underway to inform the Action Plan, including a resident survey alongside workshops with Council and non-Council stakeholders. The results for which will be published as part of the Autumn 22 Action Plan.			
8.2.4	Phase 2 Climate Change Action Plan to be published in Autumn 2022, detailing how we will become carbon neutral and climate ready by 2038			

KCR 9	Community Wellbeing & Resilience		Previous	Current
Risk Owner: SD Adults & Health		**Risk Type: Operational / Reputational**	🟥	🟥 ⬆

Risk of declining community wellbeing & resilience caused by lack of engagement with communities directly and partner organisations, insufficient understanding of community needs and wants, poorly targeted interventions / service developments, persistent reduction in funding.

Q3 update: The cost of living crisis continues to impact directly on our communities. Planning underway for winter interventions when further increases in fuel costs are expected. Direct financial support continues to be provided through the Household Support Fund, with signposting to existing sources of support (eg FSM). Cost of Living Action Plan being developed.

Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
9.1	**Failure to address matters of violent extremism and related safer stronger community factors, including criminal exploitation, or national or international incidents (e.g., terrorism), create significant community tension, with the risk of public disorder, and threats to councillors going about their duties.**	**Service Director Customer & Communities**	**3x5=15**	**3x5=15**
9.1.1	Dedicated community tensions monitoring process and a clear procedure to process intelligence related to protests and tensions. Procedure includes Police and Emergency planning colleagues.			
9.1.2	Weekly tensions monitoring meetings are held with all relevant partners, would move to daily if required			
9.1.3	Prevent Action Plan addresses community engagement, critical thinking and ideological issues and seeks to mitigate risk			
9.1.4	The implementation of the Inclusive Communities Framework to build resilience to extremist narratives			
9.1.5	The Cohesion Team engage with communities and enable opportunities for communities to build relationships and mix to counter extremist narratives			
9.1.6	Protect and Prepare obligations to mitigate terrorism risk on publicly accessible locations (PAL). The Protect Duty will introduce additional responsibilities with a short implementation date anticipated.	Implementation date TBC – August 2023?		
9.1.7	Assurance processes re ensuring appropriate understanding associated with the use of public and client access to the internet (terrorism and extremism related)			
9.2	**The impact of the "cost of living crisis" (specifically inflationary pressure leading to increased prices for food and fuel) on individuals, the community, partners and the business sector, and on their priorities, and their consequent demands for council service. Impact on the voluntary sectors may reduce their ability to support communities, with a consequent impact on the council.**	**Service Director Customer & Communities**	**4x4=16**	**4x4=16**
9.2.1	Direct financial support being allocated through the Household Support Fund and discretionary energy rebate fund. It is anticipated that there will be a further allocation of funding to the Household Support Fund.			
9.2.2	Continuation and signposting of existing support through Council Tax Reduction Scheme, Free School Meals (inc holiday support), Housing Benefit etc…			
9.2.3	Local Cost of Living campaign has detailed the various national and local sources of support available to residents. This is available digitally, but has also taken a place-based approach and worked with local community organisations, frontline			

	services, healthcare providers etc to ensure that physical leaflets are also available in order to support and facilitate conversations.			
9.2.4	Cost of Living event took place in July with over 70 attendees across VCSE, council and Cllrs. Several organisations made links to wider partnerships and shared ideas for better communication and cross working in local areas.			
9.2.5	Local Welfare team fund 3 foodbanks in Kirklees to ensure residents can access crisis food. Working in partnership with the Bread and Butter Thing to provide a place-based response to food access, currently in the process of setting up 5 local hubs in areas of Kirklees which have high levels of deprivation. It is expected that an additional 5 hubs will be funded.			
9.2.6	Exploration of upskilling front line workforce to have brief intervention conversations - in order to provide appropriate support and signposting.			
9.2.7	The Suicide prevention action group have prioritised cost of living/economical adversity as a significant risk factor for suicide prevention. Making suicide prevention part of everyone's responsibility (awareness raising, training and knowledge of where to signpost) is key			
9.2.8	Council officers are working with colleagues from the VCS to ensure a coordinated and joined up approach where possible, and to reflect the fact that VCS are often best placed to deliver place based community support.			
9.2.9	Cost Of Living Action Plan currently being developed between Public Health and Policy. This will reflect the short to medium / long term actions which the LA are facilitating to support people in crisis as well as to increase long term economic development			
9.2.10	Working in partnership with regional colleagues in order to develop a regional Cost of Living action plan and supporting regional groups			
9a ER	**Risks associated with expedited process for Ukranian refugees**		**Head of Communities**	**Raised: April 22**
9b ER	**Change in consumer habits**		**SD Adults & Health**	**Raised: April 22**
9c ER	**Heightened infectious disease risk**		**Head of Health Protection**	**Raised: April 22**
9d ER	**Dispersed asylum seekers triggering increase in community tension**		**Head of Communities**	**Raised: Oct 22**
9e ER	**Increase in fuel poverty resulting in no energy supply to residential properties**		**Director of Homes & Neighborhoods**	**Raised: Oct 22**

KCR 10	Physical Assets and Infrastructure		Previous	Current
Risk Owner: SD Growth & Regeneration	Risk Type: Compliance / Reputational		🟧	⬇

The exposure to increased liabilities arising from property ownership and management, including both the councils residential portfolio and corporate portfolio (inc schools, community buildings) with reputational and financial implications.

Q3 update: Embedded assurance activity across both residential and corporate assets continues to control and manage inherent risks associated with property ownership and management. Work underway to validate residential stock quality data is progressing in line with agreed plan.

Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
10.1	Exposure to increased liabilities arising from the Council's ownership and management of corporate assets, including dangerous structures and asbestos, cladding and fire controls with reputational and financial implications	Head of Property	3x4=12	3x4=12
10.1.1	Corporate Compliance Board established, with escalation to the Health & Safety Oversight Board			
10.1.2	Compliance testing matrix in place identifying sources of risk, test requirement as detailed in legislation and test frequency	Dependency with 10.1.6		
10.1.3	Asbestos and Legionella currently reported as AMBER within H&S Risk Report			
10.1.4	Embedded programme of fire risk assessments, inspections and audits in place, as documented in Corporate Fire Safety Policy. New fire log has been produced for site trial before full roll out.			
10.1.5	Routine servicing and cleansing regimes in place with site audits continuing to fill data gaps. Further work on collation of data to be continued into 2023.	Ongoing into 2023		
10.1.6	Corporate compliance guide being created to develop all servicing regimes and reasoning to allow areas that are more at risk to be addressed first	In progress		
10.2	Exposure to increased liabilities arising from residential property ownership and management, including dangerous structures and asbestos, cladding and fire controls with reputational and financial implications.	Head of Assurance	4x5=20	3x5=15
10.2.1	Building Safety Assurance Board (Housing) established to provide oversight of controls and governance in place, reporting into the Housing Advisory Board and the Health & Safety Oversight Board			
10.2.2	Regular onsite audits, detailed training programme and dedicated HSE team ensure robust H&S culture with officers clear on duties related to H&S compliance			
10.2.3	Fire Risk Assessment (FRAs) remedial actions continue to progress. Of the outstanding 1164 high risk remediation actions at the time of the review, 1118 have been completed with the balance in procurement or in contract. The low and medium rise FRA actions are currently at the early stages of contract negotiation. The outcome of these will determine the programme.	March 2024 overall completion date		
10.2.4	Comprehensive and accurate stock condition data is available to inform programmes of work and ensure high risk items are addressed as a priority	In progress		
10a ER	Ensuring housing stock meets the Decent Home Standard (DHS)	Head of Asset Management	Raised: July 22	