

KEY CORPORATE RISK MATRIX

OCTOBER 2023

KCR 1	Financial Sustainability	Previous	Current
Risk Owner: Director of Finance		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.		20	20
Q2 update: Increased risk of not delivering against the 23-24 agreed budget outturn position, despite enhanced monitoring and management focus. Options for early implementation of future years savings proposals have been considered however limited opportunities have been identified. Greater assurance is required over the deliverability of some of the savings proposals for 24-25, both in isolation and as a cumulative package, acknowledging that initiatives identified still do not meet the required savings target.			
Sources of risk Mitigating controls / actions		Responsible Officer	Previous
1.1	Failure to maintain sufficient level of priority and focus that could lead to in year (23-24) savings not being achieved, resulting in budget overspend and rollover of overspend to future years budget (24-25)	Director of Finance	3x5 = 15
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		
1.1.2	Resilience tracking		
1.1.3	Forecasts reviewed and updated on a monthly basis with updated year end position		
1.1.4	Ongoing budget monitoring takes place in conjunction with budget holders, responsibility for budgetary control is aligned to Strategic and Service Directors there are dedicated finance managers for each service area and income management teams	Weekly Budget Delivery Group in place to provide oversight	
1.1.5	Regular meetings and ongoing engagement as required between Service Directors and Finance, there are regular links to performance meetings, monitoring KPIs and contract compliance		
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		
1.2	Risk of medium-long term financial instability caused by failure to develop or adhere to robust financial planning processes and procedures leading to reductions in service provision, possible government intervention and reputational damage	Director of Finance	3x5 = 15
1.2.1	Agreed 5 year capital plan with 2 year savings plan and 3 year headline spend and income forecasts. HRA to deliver a balanced 30 year plan		
1.2.2	Documented governance process for determining adequacy of reserves and the utilisation of reserves, if required, to balance the budget		
1.2.3	Corporate capital plan review		

1.2.4	Income assumption challenge and validation process in place with robust rationale for significant increase			
1.3	Risk of prolonged inflationary pressures 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	5x4 = 20	5x4 = 20
1.3.1	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)			
1.3.2	Contract procedure rules followed, investigate where opportunity exists to renegotiate or retender contracts			
1.3.3	Ensure that budgets anticipate likely cost impacts with allowances built into budget to cover inflation risk. Recognise that even where inflation linked cost impact are permitted contractually, they may not be acceptable politically / reputationally			
1.3.4	Regular review of priorities and available resources, informed by ongoing monitoring of expenditure and updated forecast position			
1.3.5	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.			
1.4	The risk of a reduction in expected income as tenants, residents and businesses are 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	4x4 = 16	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 and benefits are paid in line with expectations			
1.4.3	Adhere to the recovery timetable for issuing reminders and summonses.			
1.4.4	Continue to drive 'digital by design' improvement of business processes to reduce waste and deliver improved processing times			
1.5	The risk of external intervention by DLUCH (and subsequent required actions) which will impact on the Councils ability to deliver key services and investment priorities, increase borrowing costs and cause reputational damage	CEO	4x5 = 20	4x5 = 20
1.5.1	Delivery of identified savings, maximise income opportunities			
1.5.2	Deferral, reduction or removal of borrowing commitments to reduce capital requirements			
1.5.3	Prepare for DLUCH intervention by engaging Members and Senior Officers, actively manage reputational impact			
1.5.4	Review of corporate objectives (Must do, Should do, Stop)			
1.6	The sustainability of the Housing Revenue Account (HRA) Business Plan in the context of a significant repair backlog, legislative obligations arising from Grenfell, remediation of DM&C issues and tightening regulatory framework	Director of Finance	3x5 = 15	3x5 = 15
1.6.1	Robust governance arrangements in place to ensure common understanding of and agreement to priority actions			
1.6.2	Review of the Business Plan and scenarios linked to asset data, stress testing of assumptions and participation in benchmarking activity			
1.6.3	Proposals for annual rent increase based on government formula and approved by Cabinet			
1.6.4	Annual rent return to regulator			
1.6.5	Budget monitoring and review of the capital plan and savings requirements in line with the General Fund			
1.7	Demand pressures on key services such as Adults and Childrens Services result in unbudgeted additional costs that the Council does not have the financial capacity to meet	Director of Finance	3x5 = 15	3x5 = 15

1.7.1	Monthly budget monitoring to flag up any pressures and trends with services so that action can be taken			
1.7.2	Procurement of contract amounts to be linked to budgets, monitored and extensions / overspends to be reported through agreed governance			
1.7.3	Financial Procedure Rules, Contract Procedure Rules and Scheme of Delegation in place. Relevant training and briefings in place for appropriate staff.			
1.8	Risk that budget estimates are not considered robust	Director of Finance	3x5 = 15	3x5 = 15
1.8.1	2024-25 savings template proposals must detail assumptions and be supported by an achievable delivery plan			
1.8.2	Challenge sessions at relevant SLT and ET meetings to validate assumptions and estimates			
1.8.3	Budget proposals are validated by internal audit			
1.9	Risk that the Capital Programme is not sustainable due to either reliance on borrowing at a time of rising interest rates, or reliance on capital receipts from asset disposals that are not guaranteed	Head of Commercial Finance	4x5 = 20	4x5 = 20
1.9.1	Review of Capital Plan with Defer / Stop as potential outcomes			
1.9.2	Council Corporate Property Strategy has identified an initial register of surplus property, which is not required to support organizational delivery requirements			
1.9.3	Oversight of the Corporate Property Strategy is provided by the Corporate Property Board with assurance of progress and review of issues and risks	Corporate Property Board to be established		
1.10	Risk that Council reserves are utilised to such an extent that action is required to return them to adequate levels and / or that the Council is forced to seek funding externally with rising borrowing costs	Head of Commercial Finance	4x5 = 20	4x5 = 20
1.10.1	Review of Corporate Plan to identifying activity that can be stopped / reduced			
1.10.2	Review of Capital Plan with Defer / Stop as potential outcomes			
1.11	The risk of delay in repayment or default of loans that the Council has entered into with third party organisations due to poor lending decisions and / or deterioration in market conditions leading to write offs	Head of Accountancy	3x5 = 15	3x5 = 15
1.11.1	Annual review of the position relating to in scope loans and a provision made for any forecast loss			
1.12	The deterioration in the capital value of the Council's investments that, without the statutory override, would otherwise have to be charged to the Council's revenue account	Head of Accountancy	3x5 = 15	3x5 = 15
1.12.1	Regular monitoring of the investments in place and a provision set aside to provide for any potential loss			
1b ER	Safety Valve Commitments (Funding to support SEND transformation activity)	SD Children & Families	Raised: July 22	
1c ER	Identification of Budget Savings	CEO	Raised: Jan 23	
1d ER	Kirklees Apprenticeships for All	SD Growth & Regeneration	Raised: July 23	
1e ER	Equal Pay Claim	SD Corporate Strategy & Commissioning	Raised: Oct 23	

1f ER	Taxi Licensing Fees	SD Corporate Strategy & Commissioning	Raised: Oct 23
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KCR 2	Effective Governance	Previous	Current
Risk Owner: Strategic Director Corporate Strategy, Commissioning & Public Health		9	12
Risk Type: Compliance / Legal / Reputational			
<p>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.</p> <p>Q2 Update: The Council needs to balance corporate control and strong oversight with a risk that this creates delays over implementation affecting the effectiveness of achieving the savings targets. The extent of public consultation activity that is required to support implementation of savings proposals is resource intensive and provides additional challenge, we have also seen an increase in the volume of Freedom of Information requests. Activity is underway to ensure appropriate controls are in place when we enter into data sharing agreements with third parties.</p>			
Sources of risk and Mitigating controls / actions		Responsible Officer	Previous
2.1	Failure to ensure that effective processes, frameworks and training are in place and adhered to, by officers and members, in order to facilitate ethical, compliant and legally sound decision making, to avoid subsequent challenge and reputational damage.	Director of Legal, Governance & Commissioning	2x4 = 8
2.1.1	Agenda planning process is embedded with regular reminders issued		2x4 = 8
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 stakeholder engagement and appropriate 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) is required		
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	Complete	
2.1.8	Review of decision-making templates to ensure the requirement to identify and document the associated risks is included. This could be existing risks that will be mitigated, the introduction of new risks, or a combination of both.		
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 Legal	3x4 = 12
2.2.1	Information Governance Policy and Strategy in place and regularly reviewed through appropriate governance		4x4 = 16
2.2.2	Information Governance Board in place to provide oversight of IG issues and risks		
2.2.3	Comprehensive mandatory training in place required to be completed by all members of staff. Completion rates monitored through Information Governance Board (IGB)	Training is no longer mandatory Completion rates are not available	

2.2.4	Reference material available via the Intranet (eg. Quick guides developed) and regular drop-in sessions to access expert guidance			
2.2.5	Online reporting functionality for information security incident.			
2.2.6	Procurement documentation (eg. Business Case, Contract Award Notification <£25k, IT Systems Assessment) requires assessment of IG risk to be considered.			
2.2.7	Undertake a review of current process for completing due diligence of third parties cyber security controls when entering into data sharing agreements	Proposal to enhance assurance over third party data sharing agreements to go to November IGB		
2.3	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	3x4 = 12	3x4 = 12
2.3.1	Anti-Fraud, Bribery & Corruption Policy in place and reviewed regularly through approved governance.			
2.3.2	Fraud Risk Forum meets quarterly to review risks and issues.			
2.3.3	Introduction of organisation wide Fraud training	On track for introduction in Q3 23-24		
2.3.4	Fraud team in place to advise on fraud risk areas and investigate where there is evidence of fraud			
2.4	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 SD Skills & Regen	3x3 = 9	3x3 = 9
2.4.1	Corporate Transformation priorities are required to follow agreed project methodology and are subject to prioritisation where the higher benefit projects are given seniority.	A review of capacity and prioritisation is being taken forward by the PMO function. Organisational capacity to support delivery is being assessed.		
2.4.2	Clear and effective governance models and reporting routes in place, for Corporate Transformation Priorities, to include <ul style="list-style-type: none"> Individual Programme Board meetings, as appropriate In view Corporate Transformation Priorities are considered at Monthly Modern Organisation Board and/or Bi-Monthly TPB meetings 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 	All in-view Transformation programmes/projects that are reported into Modern Organisation Board, Transformation Portfolio Board or Budget Delivery Programme Board continue to be reviewed by the portfolio management office (PMO) including 1:1 meetings with the HoS. In addition, all programmes being led by the CTO are under a schedule of assurance sessions that take place quarterly.		
2.4.3	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	Expect to have a full baseline that has been subject to CTO assurance by the end of Q3 FY 23/24.		
2c ER	Senior leadership transition	CEO / Leader	Raised: April 23	

KCR 3		Statutory Obligations	Previous	Current	
Risk Owner: Chief Executive		Risk Type: Legal / Compliance	16	16	
<p>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.</p> <p>Q2 update: Whilst the council's statutory obligations are ringfenced and prioritised in the current review of corporate budgets and objectives, there is a requirement to think differently about how these services are delivered. Demand continues to be high and meeting statutory deadlines for SEND assessments is challenging with associated financial and reputational risks. Close partnership working with Kirklees Care Association and strengthened relationships across the market has reduced the risk associated with service provider failure - whilst the risk still exists processes to ensure early visibility are in place.</p>					
Sources of risk and Mitigating controls / actions			Responsible Officer	Previous	Current
3.1	Risk that new 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				
3.3	Sustainability of the Social Care Market: Service provider failures and \ or market exits resulting from increasingly difficult operating circumstances including, increasing costs, challenges with recruitment and retention and maintaining service quality		SD Adults & Health	4x5 = 20	3x4 = 12
3.3.1	Working in partnership with Kirca (Kirklees Care Association) and continuous engagement with the wider provider base via forums to increase channels of communication and build stronger relationship within the market.				
3.3.2	Robust escalation procedures to address quality and sustainability issues in a timely manner via CHESP. Where quality issues exist/emerge with the sector, steps are taken with system partners and CQC to ensure safety of residents.				
3.3.3	Escalation of issues where necessary to senior leaders and portfolio holder where provider failure is an issue.				
3.3.4	Sharing intelligence across the system through ourselves partner agencies allowing us to look for early signs of possible failure so we can intervene early and address issues at the earliest opportunity				

3.3.5	Co-ordinating proactive quality assurance good practise events (consultation with providers focusing on issues identified as needing addressing.			
3.3.6	Working in partnership with KirCA on funding and grants for providers in the market.			
3.3.7	Engagement with providers to understand how they operate and where we can work in partnership to focus on concerns and to build stronger relationship with partners in the market.			
3.3.8	2 monthly CQC engagement meetings to discuss issues identified in inspections and areas of focus or concerns.			
3.4	Inability to maintain sufficient SEND provision due to lack of capacity within services, lack of existing local provision, increases in demand led services, increasing costs and increasing complexity in clients' needs	SD Childrens & Families	4x4 = 16	4x4 = 16
3.4.1	SEND Transformation will address the lack of specialist education provision through: 1) the rebuild of two existing Special Schools 2) expanding Additionally Resourced Provision 3) creating special school Satellite Provision 4) Refreshing the Alternative Provision offer			
3.4.2	Safety Valve funding agreement planned to eliminate cumulative deficit in DSG by year end 26/27, enhanced monitoring and support now in place to ensure delivery	See Emerging Risk 1b		
3b	Revised CQC regulatory framework	SD Adults & Health	Raised: Jan 23	
3c	EHCP pipeline / delays complaints risk	SD Children & Families	Raised: Oct 23	

KCR 4		Third Party Relationship Management	Previous	Current	
Risk Owner: Chief Executive		Risk Type: Operational / Reputational / Financial	12	12	
<p>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.</p> <p>Q2 Update: The external economic environment continues to present challenges to operators within the third sector with impacts on service provision on behalf of the Council, coupled with increased demand. Work is underway to assess the impact of budget challenges on voluntary sector organisations. Activity is underway to validate the control framework that exists across contract management within the council and highlight areas for improvement. Additionally, we are undertaking an external assessment of the Councils own arrangements across the procurement lifecycle which will be peer reviewed by another Local Authority.</p>					
Sources of risk and Mitigating controls / actions			Responsible Officer	Previous	Current
4.1	Risk that the Council agrees contracts with suppliers / commissioned service providers that either do not meet the requirements of the council, or do not maximise the economic, social and environment benefits that procurement can bring		Head of Procurement	3x5=15	3x5 = 15
4.1.1	Procurement Strategy 2022-2026 and associated 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				
4.1.2	Contract Procedure Rules regularly reviewed, communicated and adhered to				
4.1.3	Adherence to procurement processes, including the agreed governance framework, to ensure the risks associated with approvals are documented and escalated appropriately				
4.1.4	Rules to prevent / limit reliance on single suppliers and contracting with firms that derive large proportions of their business from the public sector.				
4.1.5	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.				
4.1.6	Instigate early consultation with existing suppliers about arrangements to be followed at the end of existing contractual arrangements				
4.1.7	We have elected to undertake the Commercial Continuous Improvement Assessment Framework (via Gov't commercial function) The assessment framework applies to how public sector organisations manage commercial delivery and capability.		New Action		
4.2	Risk that suppliers do not provide goods / service in line with contractual agreement due to lack of robust oversight and governance arrangements leading to delays, requirement to re-contract, possible legal costs and potential reputational damage		All contract managers	3x4 = 12	3x4 = 12

4.2.1	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	Training options provided to contract managers		
4.2.2	Ensure contractual documentation includes sufficient clarity on specifications.			
4.2.3	Ensure outcome measures / Key Performance Indicators to monitor performance are agreed pre contract completion	Work underway by Procurement to develop contract handover document to support contract managers.		
4.2.4	Contract management health checks to take place – Procurement to undertake these ‘temperature checks’ to identify areas of best practice and areas for improvement	New Action		
4.3	<p>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:</p> <ul style="list-style-type: none"> • 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 • NHS West Yorkshire Integrated Care Board / Kirklees Integrated Care Board 	CEO / ET	4x3=12	4x3 = 12
4.3.1	Maintain senior officer engagement eg, Strategic Director currently Chair of ‘Directors of Development’ group,			
4.3.2	Ensure that Kirklees are represented on all relevant boards and relevant officer groups with appropriate briefing			
4.3.3	Ensure effective use of WY Chief Executives and WY Leaders groups to escalate issues / concerns			
4.3.4	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			
4.3.5	WY ICB Monthly meeting attended by senior officers (CEO, SD Adults & Health and Director of PH)			
4.4	A failure by an associated party creates financial or reputational issues for the council	CEO / Head of Risk & Internal Audit	3x3 = 9	4x3 = 12
4.4.1	Adequate monitoring of activities of associated parties			
4.4.2	Robust and task-based approach to selection of appropriate persons to act in governance roles within those organisations			
4.4.3	Clear governance of decision making, including approval by Cabinet where agreements in principle on way forward has been reached			
4a ER	Associated Parties	SD Growth & Regeneration	Raised: July 22	

KCR 5	People Management	Previous	Current	
Risk Owner: Strategic Director Corporate Strategy, Commissioning and Public Health		20	20	
Risk Type: Colleague / Operational				
<p>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.</p> <p>Q2 Update: Focus on support to service redesign activity and ensuring a reduction in required headcount is managed through redeployment and natural turnover where possible. For the roles which the council chooses to recruit to the labour market pressure has eased somewhat however key specialised roles remain in high demand. Capacity issues challenge the ability of the organisation to deliver required outcomes particularly where they are dependent on key individuals. We continue to monitor sickness levels to understand if recent increase is in excess of normal seasonal variances.</p>				
Sources of risk and Mitigating controls / actions		Responsible Officer	Previous	Current
5.1	Failure to attract / recruit / retain staff to meet the demands of the organisation due to significant broader labour market challenges, expectations relating to pay & reward and national / regional shortages in some specialist areas leading to increased costs if agency / contracted staff are required and implications for operational service delivery.	Head of People Services	5x4 = 20	5x3 = 15
5.1.1	Recruitment strategy to promote the range of employee benefits and emphasise the job satisfaction factors, specifically from service employment	Refocussed to target essential roles only		
5.1.2	Recruitment initiatives include working with the job centre, launch of careers site, working with employment and skills and social media campaigns. Marketing / Comms activity focussing on essential roles only			
5.1.3	Embedding flexibility into the recruitment process where possible and responding to changing candidate expectations. Eg. Application form has been further simplified.	In place and condiate experience excellence recognised through award shortlisting		
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)	BAU. People Panel commitment to champion support into emplyment intitatives		
5.1.5	Refreshed People Strategy now in place, with regular monitoring of workforce data at ET and SLTs, introduction of dashboards and lead and lag indicators across People Services	Ongoing – monthly reporting in place		
5.1.6	Appropriate oversight and scrutiny in place through updates provided to Personnel Committee and Corporate Scrutiny Panel, specifically on recruitment and retention challenges	Ad hoc.		
5.1.7	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.	Capacity and appetite more limited through current essential only recruitment		
5.1.8	Piloting workforce planning approaches and benchmarking. Development of a workforce planning approach to consider long term plans as well as short term solutions;	WFP team working with most council services		
5.1.9	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	Increase in take-up of My Space following F/F workshops for front-line staff as part of digital Upskilling project		

5.1.10	Review and monitor use of market rate/retention supplements	Full review to take place with report to ET in October	
5.1.11	Focus on Mental Health Awareness, including stress, with promotion of Wellbeing surveys, Wellbeing network and dedicated support service	Pilots underway as part of People Strategy phase 2	
5.1.12	Revitalising exit interviews and developing 'stay' interviews to drive understanding	Stay interviews in place across A&H	
5a ER	Potential for industrial action	SD Governance & Commissioning	Raised: July 22

KCR 6	Safeguarding	Previous	Current	
Risk Owner: Strategic Director Children & Families and Strategic Director Adults & Health		12	8	
Risk Type: Reputational				
<p>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.</p> <p>Q2 update: Safeguarding risks continue to be well controlled, with embedded processes and procedures in place to ensure vulnerable adults and young people are safe from harm. Reassessment of the adequacy and effectiveness of the controls in place across Adult Social Care has resulted in a reduction to the 'likelihood' score.</p>				
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	2x4 = 8	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.	Insufficient capacity to meet demand has resulted in use of unregulated provision. Volumes are decreasing and additional assurance operated throughout placement		
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			
6.1.9	Caseloads are monitored as part of the embedded performance culture; action is taken promptly to allocate and balance workloads.			
6.1.10	Phased plan in design stage to address McCallister recommendations which will see some CiN cases held at a lower level, this will help rebalance caseloads.			

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	3x4 = 12	3x3 = 9
6.2.1	The Safeguarding front door and the social care hubs regularly review back logs, and the level of complexity, prioritising cases to ensure people are safe			
6.2.2	Escalation process in place through the Safeguarding Service Manager where there may be unmitigated risk and/or media interest			
6.2.3	The teams are currently working on a risk basis and triaging/monitoring cases			
6.2.4	Staff access training appropriate to their role. Risk identified relating to safer recruitment and training requires addressing			
6.2.5	Regular supervision is in place where caseloads are discussed, and actions set			
6.2.6	Recruitment and retention issues are managed through recruitment drives, rolling adverts, and a review of social work grades			
6.2.7	The self-neglect policy and pathway now in place. Self-neglect cases are being managed through the multi-agency risk escalation conferences			
6.2.8	Person in Position of Trust (PIPOT) process in place			
6.2.9	Completion of the development of the Corporate Safeguarding Policy (approved by Cabinet March 2022) has resulted in raised awareness. Ongoing involvement from ASC with action planning			
6.2.10	Adult's representation on all strategic and operational groups related to safeguarding (such as; Prevent, Domestic Abuse and Modern Slavery)			
6.2.11	Advice, and information and guidance is available to support with the impact of the cost of living crisis			
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	2x4 = 8	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	The 2022 JTAI inspection observed there is a well embedded strategic partnership approach to CSE & CCE. This focus has enabled the historical childcare management practice issues to be addressed.			
6.3.3	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.			
6.3.4	Risk matrix and risk management approach implemented with the police and partners.			
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			
6.3.7	Develop and embed an approved multi-agency model to address CSE			
				New KRASAC contract in place from September 2023 for 12 months.
6a ER	Unregulated provision			SD Children & Families

KCR 7	Resilient Operational Processes	Previous	Current	
Risk Owner: Strategic Director Corporate Strategy, Commissioning & Public Health		12	12	
Risk Type: Operational				
Failure to develop and maintain resilient operational processes and controls resulting in an inability to keep our communities and colleagues safe. Statutory obligations include, but are not limited to, the Civil Contingencies Act and Health & Safety at Work Act.				
Q2 Update: Management of Health & Safety continue to be well controlled with a focus on maximising the benefits of the new council wide online reporting system both centrally and within operational areas. Work continues on an ongoing basis to ensure the Council's defences are operating effectively to identify, prevent and recover from any hostile cyber activity. The external environment threat level remains high and we continue to review and take learnings from impacted organisations, updating our control framework as required.				
Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
7.1	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	4x4 = 16	4x4 = 16
7.1.1	Documented and approved Cyber Strategy	Implementation of all actions complete		
7.1.2	Penetration tests and PSN accreditation is maintained on an annual basis			
7.1.3	Business continuity procedures (in various scenarios) including recognising that some solutions may involve a return to paper-based solutions and records			
7.1.4	Access to core systems restricted through Privileged Access Management			
7.1.5	Adherence to NCSC guidance			
7.1.5	Controls validated on a regular basis through industry benchmarking and review by external auditors.	All actions identified through Grant Thornton review completed		
7.1.6	Undertake a review of current process for completing due diligence of third parties cyber security controls when entering into data sharing agreements (eg. commissioned services)	Action transferred		
7.2	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	3x4=12	3x4 = 12
7.2.1	The Council has an embedded emergency management system that aligns to the NHS Emergency Preparedness, Resilience and Response. Readiness and competencies are monitored through completion annually of a self-assessment audit	2022 self assessment outcome: 'Substantial assurance'		
7.2.2	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			
7.2.3	Governance is provided via Kirklees Health Protection Board			
7.2.4	Debriefing following incidents so that lessons can be identified, and plans modified where necessary			

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.	Head of Health Protection	2x4=8	2x4 = 8
7.3.1	Regular (6 monthly) monitoring through Health and Safety Oversight Board chaired by a member of the Executive Team			
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	Council wide online accident and incident reporting system (Claim Control) was implemented during 2022. The system can provide statistical information to managers at agreed intervals.	Further improvements to the system in last quarter resulted in the introduction of functionality that allows managers to interrogate the data for their service area and run off reports.		
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	There are currently data anomaly issues when running reports from the new MyLearning system. Learning and Development has reported this to the provider, and they are seeking to resolve the situation as soon as possible.		
7.3.7	Accident, incident and near miss reports monitored and followed up and or investigated as necessary.	There have been 13 reportable incidents in this quarter.		

KCR 8	Climate Change	Previous	Current	
Risk Owner: Strategic Director Corporate Strategy, Commissioning & Public Health		12	12	
Risk Type: Operational / Reputational / Financial				
<p>Failure to consider and adequately respond to Climate Change (emission reduction and resilience building) at an immediate operational level, as longer-term strategic risk and at a community level, resulting in not achieving our 'Net Zero and Climate Ready' target and insufficient resilience to the current and future climate change risks outlined within Kirklees' district-wide Climate Change Risk and Vulnerability Assessment (CCRVA), which portrays consequential local, physical environmental / social impacts (e.g. Flood risk, overheating), disruption to delivering statutory obligations and business continuity, financial impacts (predominantly restrictions on funding, cost of response and recovery) and reputational damage.</p> <p>Q2 Update: Progress continues to be made on the Environmental Sustainability Strategy and the prioritisation of actions agreed as part of the Climate Change Action Plan. The need to identify further budget savings is expected to have an impact on the extent to which climate adaptations and mitigations can be prioritised in the short term. We continue to use external organisations to benchmark our activities. Recognition that the organisations financial and environmental priorities may be in conflict in the short term.</p>				
Sources of risk and Mitigating controls / actions		Responsible Officer Target Date	Previous	Current
8.1	Failure to deliver statutory services and disruption to business continuity due to climate change.	TBC	3x5=15	3x5 = 15
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..)	Ongoing		
8.1.2	Consultant-led work, completed in August 22, to understand Kirklees' climate change risks and vulnerabilities and identifying possible adaptation measures.	Complete		
8.1.3	Development of the Council wide 'Environmental Strategy; Everyday Life' to provide a mandate for the integration of best-practice climate and environmental considerations into all council decision-making and processes as business as usual.	Council approval due February 2023.		
8.1.4	Council participating in Yorkshire and Humber Climate Commission Adaptation Framework, which has the objective of developing a framework for consistently integrating the climate change risks outlined in Kirklees' CCRVA into Corporate and Service Area risk assessments with associated mitigations	January to December 2023		
8.1.5	Emergency planning includes necessary considerations for climate change influencing the severity and frequency of natural events (i.e., floods, storms, heatwaves).	Ongoing		
8.2	Not delivering on the Net Zero target due to scope and scale of the programme exceeding the funding and delivery capability as currently allocated. There is no Council budget for the climate change programme from 2025/26, with grants increasingly requiring match funding and active demonstration of climate commitments, including resource.	Director of Environmental Strategy & Climate Change	3x4=12	3x4 = 12
8.2.1	PCAN (Placed-Based Climate Action Network) and University of Leeds led work, completed in Jan 22, outlining the pathways to Net Zero for Kirklees, in-line with the district's 2038 net zero target and UK's 2050 net zero target.	Complete		

8.2.2	Funding officer employed and fund finding toolkit being utilised Council wide to signpost teams to specific funding opportunities. 'Think Funding' model applied across capital and project delivery teams. Partnership funding opportunities being utilised including WYCA Gainshare and other funding in addition to economies of scale achieve through consortium funding partnerships, bid applications and regional project delivery.	Ongoing		
8.2.3	Phase 2 Climate Change Action Plan published in December 2022, detailing how we will become carbon neutral and climate ready by 2038	Complete – approved by Council December 22		
8.2.4	Establish Climate Change Board to track progress against the CCAP	On-hold subject to review.		
8.2.5	Action workshop delivered with Kirklees-wide partners to identify high priority actions for business case development (18 th May 2023)	Summer 2023, engagement completed, and the findings are being written up.		
8.2.6	Development of business cases for the priority actions identified by the place-based prioritisation process (dependent on obtaining necessary external funding)	Mid 2024 subject to financial support for developing the business cases.		
8.2.7	Delivery and implementation of the businesses cases that require Council ownership, subject to obtaining funding to deliver.	Mid 2024 subject to financial support for developing the business cases.		
8.2.8	Ongoing Monitoring & Evaluation, with annual reporting of progress to CDP and implementing a 3-yearly reporting process for our CCAP once V2.0 is published.	Annual CDP Reporting – July 2023 CCAP reporting due to commence mid 2024		
8.2.9	External funding bids continue to be submitted and alternative sources of funding are applied for where available, to support project delivery and to fund the climate change programme delivery staff in the absence of council budget funding.	Ongoing		
8.2.10	Option for Directorate SLTs to mandate and monitor actions and impacts of decisions and operational activity against our Net Zero and Climate Ready goal.	Opportunity		
8.3	Immediate financial pressures leading to impactful decision-making council-wide, delaying, halting, or reversing progress made towards our Net Zero and Climate Ready target, compounding future risks and leading to medium and longer-term financial, operational, and reputational challenges.	Director of Finance	New	4 x 4 = 16
8.3.1.	Climate change considerations are included within the Integrated Impact Assessment (IIA), which all new Council projects need to complete. There is a lack of confidence in this impact of this process, as considerations are not mandatory, with no expectation or standard set to the quality and the impact of any necessary interventions.			
8.3.2	All decisions that go through the Council governance process are asked to fill out a section in the Cabinet report on Climate Change. There is a lack of confidence in this impact of this process, as considerations are not mandatory, with no expectation or standard set to the quality and the impact of any necessary interventions.			
8.3.3.	Environment and Climate Change Scrutiny Panel is in place to check and challenge.			
8.4	Climate change thinking and approaches insufficiently integrated within policies, procedures, and decision-making throughout the council, compounding future risks and leading to medium and longer-term financial and reputational challenges.	Strategy & Innovation Director	New	3x4 = 12
8.4.1	Climate related modules have been offered to Executive officers and Councillors with an unknown degree of uptake			
8.4.2	Development of the Environment Strategy; Everyday Life, is due to Cabinet in January 2024, to set an organisational mandate for more ambitious climate change thinking and approaches.			

KCR 9	Community Wellbeing & Resilience	Previous	Current
Risk Owner: Strategic Director Adults & Health		Risk Type: Operational / Reputational	
12			
12			
Risk of declining community wellbeing and 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.			
Q2 update: Weekly monitoring by Safer Kirklees continues to suggest that issues around violent extremism and community tension are reasonably well controlled. Continuing cost of living issues will impact on demand for services provided by the community sector and, if these cannot be met, then on demand for some council services. The ability of the council to provide additional support to individuals / organisations / businesses is constrained by its financial position.			
Sources of risk and Mitigating controls / actions	Responsible Officer	Previous	Current
	Target Date		
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	4x3=12
	Communities & Access Services	4x3 = 12	
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.	Risk level pending the opening of the private new large-scale site possibly in October, awaiting communication from Home Office. VCS/ health and police response is significant, and planning is required to manage this effectively.	
9.1.2	Weekly tensions monitoring (tactical threat) meetings are held with all relevant partners – these can quickly switch to daily if required. Escalations are reported into Police Silver and via Safer/EP internally dependent on issue. Silver/Gold groups in place for oversight.		
9.1.3	Prevent Action Plan addresses community engagement, critical thinking and ideological issues and seeks to mitigate risk	The plan is due to be revised in line with a reduction in capacity of prevent engagement officers.	
9.1.4	Channel Panel process is subject to ongoing self-assessment, internal audit review and external assurance by the Home Office	From April 2024 monitoring will move from Kirklees Council to the WY Police	
9.1.5	Implementation of the Inclusive Communities Framework to build resilience to extremist narratives, ensuring people feel listened to and that they belong	Annual report on progress and summary recommendations submitted to the Communities Board	
9.1.6	The Cohesion Team engage with communities and enable opportunities for communities to build relationships and mix to counter extremist narratives		
9.1.7	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.	Protect & Prepare group have been established to oversee implementation	
9.1.8	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	Head of Policy,	4x3=12
		Partnerships &	4x3 = 12

	council service. Impact on the voluntary sectors may reduce their ability to support communities, with a consequent impact on the council.	Corporate Planning, Head of Improving Population Health		
9.2.1	Interventions and support put in place to mitigate some of the effects of the Cost of Living crisis are being coordinated and monitored through the Cost of Living Programme Board. Recognising the urgency of the need, the action plan is primarily focussed on accelerating and scaling up existing work rather than establishing completely new projects. There is Representation from all relevant services with weekly reporting to Cllr Davies (as portfolio lead).	Programme Board meeting reduced to monthly. All bar one workstreams reporting GREEN		
9.2.2	Priority 1: Emergency response with focus on direct support for people already in crisis <ul style="list-style-type: none"> - Communications - Access to Support for residents - Support for and from businesses 	On track to spend HSF4 within the grant period (01/04/23 - 31/03/24) Government £300 CoL payment to be made to those in receipt of qualifying benefits – Nov 2023		
9.2.3	Priority 2: Building resilience within and across our communities <ul style="list-style-type: none"> - Housing Services - Community Response - Community Power 	Digital inclusion projects in North Kirklees commencing in October 2023		
9.2.4	Priority 3: Preventative action to address medium-long term challenges <ul style="list-style-type: none"> - Economic Strategy & Long term recovery - Working, Volunteering, Participating, Aspiring - National & Regional Lobbying 			
9e ER	Housing stock availability	SD Growth & Regeneration	Raised: Jan 23	
9f ER	Fusion Housing	SD Growth & Regeneration	Raised: Oct 23	
9g ER	Large scale asylum site	SD Adults & Health	Raised: Oct 23	

KCR 10	Physical Assets and Infrastructure	Previous	Current	
Risk Owner: Strategic Director 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.		12	16	
<p>Q2 Update: A more consistent approach to evaluating future approach to premises retention is being implemented across the corporate portfolio. There are still concerns about elements of fire safety in residential properties and ability to demonstrate sufficient progress. Emergence of concerns about the use of RAAC in all types of council property creates the need to undertake specialist investigation and depending on outcomes to potentially take action to mitigate, with associated costs.</p>				
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	Director of Development	3x4 = 12	3x4 = 12
10.1.1	Building Safety Assurance Board - Corporate manages corporate compliance with statutory regulations and other guidance including ongoing management of building compliance risks, with escalation to the Health & Safety Oversight Board	Next meeting: November 23		
10.1.2	Compliance testing matrix in place identifying sources of risk, test requirement as detailed in legislation and test frequency			
10.1.3	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.			
10.1.4	Approved Asset Strategy in place	Asset disposals list agreed		
10.1.5	Procurement and integration of new asset management database to monitor and report our asset management activity	Implementation targeted for Q4 23-24		
10.1.6	Development and implementation of processes and procedures to support delivery of prioritised actions based on condition surveys and defects reported during servicing & maintenance			
10.2	Exposure to increased liabilities arising from residential property ownership and management, focussing on the 6 components of building safety (fire, asbestos, gas, electric, water, lifts) and latterly DMC (Damp, Mould and Condensation)	Director of Homes & Neighbourhoods	3x4 = 12	3x4 = 12
10.2.1	Building Safety Assurance Board (Housing) established to provide oversight of controls and governance in place, reporting into the Housing Improvement Board and the Health & Safety Oversight Board			
10.2.2	There are regular programmes of inspection and re-inspection for all six-building safety workstreams including asbestos and water hygiene, whilst the work on strengthening processes and data integrity is supporting a stronger internal framework of assurance.	Third party appointed to validate integrity of building safety compliance data and develop Landlord Compliance Data Management Plan		
10.2.3	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			
10.2.4	For Fire Risk Assessment (FRAs) remedial actions, completion of every high priority action is tracked and those to high rise blocks notified to the Regulator.	The Regulator will review progress in late November and the Consumer Panel in early December – at this point there needs to		

		demonstrable progress in the completion and resolution of outstanding and overdue fire risk actions.	
10.2.5	Programme of activity to ensure housing stock meets the Decent Homes Standard. Stock condition validation and data cleansing activity is underway, focus now on development of a long term asset management strategy, including benchmarking of cost data	The first draft of the Asset Strategy has been produced. Stock condition surveys are being undertaken in house to support the development and delivery of 23/24 and 24/25 programmes of work.	
10b ER	Damp, Mould & Condensation Strategy	SD Homes & Neighbourhoods	Raised: Jan 23
10c ER	Reinforced Autoclaved Aerated Concrete (RAAC)	SD Growth & Regeneration	Raised: Oct 23