

Inherent Risk								Residual Risk					Actions				
Risk No.	Risk Description	Cause	Effect	Owner	Likelihood	Impact	Score & RAG	Key controls	Sources of assurance over controls	Likelihood	Impact	Score & RAG	Actions	Owner	Target Date	Action RAG	
1	Children's Trust fails to deliver to the agreed standards / failure of the Intelligent Client Function (ICF).	NCT does not meet its requirements in the improvement plan. The ICF fails to identify and address areas for improvement of NCT's performance.	Risks to child safeguarding. Poor quality of service and outcomes for service users. Financial risks to the Council.	Exec Director of Children's Services	5	4	20	The Intelligent Client Function (ICF) is in place with clear governance arrangements set out in the contract including monitoring of performance and financial plans via the Operational Group and Strategic Groups. Ofsted complete inspection visits as per there inspection framework and provide independent performance feedback at regular intervals. The Childrens Trust has an Improvement Plan, linked to its Ofsted inspection performance, which is overseen by a Social Care Improvement Board led by a DfE appointed Independent Chair.	Ofsted complete regular Monitoring Visits and Thematic Inspections between main inspections as a means to assess the progress on the Trusts improvement journey. Where performance drops below agreed levels the Council via the ICF undertakes additional assurance activity including deep dive reviews, production of additional time limited action plans or contract notices to improve performance. Internal Audit of ICF May 2023: Satisfactory Assurance - with action plan in place to prioritise areas for improvement. A Joint Officer Board and Joint Committee is also in place to oversee arrangements managing the Childrens Trust including matters pertaining to the Councils ownership of the Trust. A monthly Lead Member/Director of Children's Service Assurance Meeting takes place in order to ensure the Childrens Trust is held to account on its delivery of quality.	3	4	12	A joint review of the ICF is taking place with WNC. Following this recruitment to vacant posts to replace agency staff will take place. Restructure has been approved through CLT. Plan in place to operationalise restructure and recruitment (subject to full consultation with DCF) NOTE - pending CEX discussions with WNC	Assistant Director of Commissioning			
2	Failure of corporate governance/meeting statutory requirements/ poor decision making.	Lack of awareness of decision making and legislative requirements. Continuation of processes from predecessor authorities which are no longer in place. Culture of good corporate governance not permeated through organisation. Lack of legal support and updates on legislative changes. Strong governance processes not yet implemented for all matters.	Failure to ensure best value. Breach of legislation which increases risk of legal challenge. Unlawful decisions made.	Exec Director of Customer & Governance	4	5	20	Decision making training undertaken and resources available on intranet. Stabilised legal and democratic service to provide proactive advice. Implementation of processes and procedures to support a good corporate culture. Legal support being proactive and engrained in services. Governance processes continuing to be implemented. Consideration and implementation of Oflog Best value Guidance.	Records of decision, Forward Plan, increased advice from legal and democratic services. Audits of service. Policies and Procedures.	3	4	12	A programme of training and engagement for all staff will be implemented. The governance toolkit is being updated to provide easier access to officers and to strengthen understanding of process. Full training programme to be rolled out for all staff at all levels.	Assistant Director of Legal and Democratic	Mar-24		
3	Loss of data or systems due to cyber attack	Failure of preventative and detective controls leads to successful attack on Council systems.	Disruption to service delivery. Reputational damage and loss of customer confidence. Financial loss, penalties and fines.	Assistant Chief Executive													
4	Disruption to service delivery and community due to unplanned incident or emergency	Lack of adequately resourced, experienced staff to fulfil BC roles. Lack of understanding of BC processes by Service Areas. Failure to address critical BC issues. Lack of completed BC plans to support with an internal disruptive event. Inadequate Emergency Planning arrangements arising from insufficient EP capacity and/or a lack of organisational engagement. Incident of scale that is beyond proportionate mitigation activity	Failure to deliver timely and effective BC Work Programme. BC arrangements not in place. Ineffective response to a BC incident. Low levels of resilience exacerbating impacts. Public harm, financial losses, reputational damage, legal failures, fines, service failure, staff absence. Poor response to incidents and emergencies leading to loss of life, serious public harm, serious economic harm, serious environmental harm, increased financial losses, failure of critical functions, significant reputational damage, legal failures and penalties	Exec Director of Place & Economy	5	4	20	Workforce planning; Training plans; Effectively managed BC programme; Adequate investment to address critical resilience issues; Defined, established and rehearsed emergency management processes. Key contractors are required to outline BC arrangements as part of the contract procedures rules	NNC has an established Incident & Emergency Plan which is supported by emergency management arrangements to provide a core capability for the management of disruptive incidents. This includes a duty rota for Gold and Silver officers to ensure coverage for key command roles. Strategic and Tactical Emergency Management Training was delivered by the Emergency Planning College in July 2022 These arrangements have been validated by incidents in the last 12 months. Where lessons were identified, action is underway to address these issues NNC has an established BC steering group to coordinate and oversee the development of BC arrangements across the organisation. NNC exercised its Incident and Emergency Plan in October 23. this also tested service level BC plans. A debrief report will be provided to the december BC steering group	3	4	12	Ongoing delivery of the BC work programme under direction of BC steering group continued roll out of BC assessment tool and plans template and provision of support to services in completion Complete review of NNC Critical Incident Plan following consultation period Complete debrief analysis and report following delivery of exercise Lantern Undertake analysis of NNC arrangements vs ISO standards	Matt Hoy	Dec-23		

5	Failure of capital and revenue projects to deliver upon intended benefits, within budget and planned timeframes.	Multiple causes including inflationary impact, cost of borrowing, lack of resources, lack of pace, poor scoping of activities, outcomes and benefits, time slippage, budget or scope creep, change of legislative or original priorities. external factors taking priority	Failure to deliver timely and effective projects. Financial penalties. Reputational damage. Legal implications. Service failure. Customer/community impact.	Exec Director of Finance & Performance	4	4	16	Defined governance programme in place including: Place Capital Programme Board; Strategic Capital Board. There will be corporate governance under the remit of the constitution and Senior Responsible Officer with scheme of delegation, CLT; Member Transformation Board (where appropriate). Reporting into Service Delivery EAPs (where appropriate). Quarterly Capital and Monthly Revenue Reports to Executive and the following Finance and Resources Scrutiny. Individual Project Boards established for relevant projects. Capital Update report on new/changing projects to Executive each month.	Internal Audit Review of Capital Programmes scheduled for 2022. Internal Transformation Team reviews and Internal Audit (recent "Good" score for disagg programme, for example). Process for approval of capital projects reviewed by Finance and Resources Scrutiny Committee.	3	4	12	Scrutiny of programme progress at established Boards and ad-hoc e.g. project/programme audits by Transf. Team or Internal Audit. New Performance / PMO role established in finance to monitor project progress and risks - to be recruited to. Dedicated Head of Capital Projects (property) proposed to ensure sufficient capacity to manage current and forthcoming projects effectively.	Executive Director of Finance and Performance/ CLT Owner	Ongoing	
6	Failure to safeguard vulnerable adults.	Failure to meet statutory requirements under the Care Act. The Care Act 2014 sets out that the local authority must act when it has reasonable cause to suspect that an adult in its area has needs for care and support or is experiencing or at risk of abuse or neglect.	An adult is harmed due to failure to exercise safeguarding duties. Financial implications. Reputational damage. Failure to meet areas of importance. Continue to neglect individuals' wellbeing. Poor outcome for people.	Exec Director of Adults, Health Partnerships & Housing	4	5	20	Monthly safeguarding quality assurance audit process NSAB Delivery Board Review and continuous improvement of adult safeguarding processes and procedures NSAB Performance Dashboard KPI data reporting on ASC Safeguarding Effective delivery and monitoring of internal safeguarding training for ASC staff Quality Assurance Board with Commissioning Implementation and ongoing review of the NNC Practice Framework	Safeguarding audits by Team Manager Safeguarding & Quality. Safeguarding audits by Team Managers and Principal Social Workers from April 23. Implementing actions for improvement identified in internal audit reports. Internal Audit of Adult Safeguarding referrals 2021/22 - satisfactory assurance Internal Audit of DoLS 2022/23 - satisfactory assurance:	3	4	12	Workstream on safeguarding to be reviewed in relation to safeguarding processes and procedures KPI data reporting on safeguarding to be reviewed ASC training matrix will be provided to L&D team to input all mandatory safeguarding training onto the iLearn system A review of the Terms of Reference for the Quality Assurance Board to be completed to reflect the extension of the membership of the board to external partners and providers. Updated guidance on safeguarding process written – process map and updated Eclipse Guidance to be added. Notification of concern guidance written. Large Scale Investigation guidance being written. CQC Ensuring Safety - joint training with Health on statutory responsibilities including performance, other stakeholder	ED and ADs - Adult Social Care	Ongoing	
7	Unsustainable finances (medium term from 2024/25)	Whilst the budget for 2023/24 is balanced, the position for 2024/25 onwards continues to be uncertain due to the prevailing economic climate particularly inflationary factors for pay and prices, as well as demand pressures, such as children's services and adult social care. There remains risks from continuing LGR/transformation related changes as services are disaggregated and/or reformed as well as the Government review of funding for Local Authorities which is anticipated in the next Parliament. This risk reflects this uncertainty.	Resources are insufficient and this results in non achievement of Corporate Plan priorities, with consequent negative impacts on residents and other stakeholders.	Exec Director of Finance & Performance	4	5	20	Budget balanced for 2023/24. Indicative budget requirements highlighted from 2024/25 and work is ongoing to address in advance of draft budget being presented in December. Ongoing intelligence and lobbying alongside working to ensure robustness of the budgets for future years, including timely responses to the consultation on LA funding at the appropriate time. Financial planning and budget proposals and savings / income generation options. Budgets based on prudent assumptions. Challenge of budget proposals from Officers and Members All work linked to future transformation programme across all aspects of the Council. Transformation and specific working groups to address specific budget areas including programme boards within Directorates. Review potential external funding opportunities to meet service need.	CIPFA Financial Management Code self-assessment Budget Scrutiny Arrangements Member/Officer challenge	3	4	12	Continuing development of the MTFP for minimum 3 years. Budget 2023/24 approved February 2023. Work with services to identify efficiencies, cost controls and income generation to protect vital services. Factor in any announcements from the Chancellor's Spring/Autumn Budget Statements (generally March and November each year) and the Spending Review. Strong focus on robust controls for areas outside the General Fund, ie DSG and HRA. Respond to Government	Executive Director of Finance and Performance	Ongoing	
8	Inability to remain within budget for the current year (2023/24)	The requirements from demand led services such as children's social care are concerning and already outstripping the budget as at P2 reporting. Other areas such as Home to School Transport and Adult Social Care also remain a risk in this regard. The budget is also still impacted by the significant impact of higher than anticipated inflation (both pay and prices). The level and extent of the inflationary increases is higher than the OBR forecast at the time the budget was set. The pay award (although not yet approved) already exceeds the budgetary provision of 4%. The cost of living challenges will also potentially present difficulties for income generation in areas such as leisure, with greater support mechanisms being required as well as possibly resulting in increased service demand in areas such as homelessness.	The Council will overspend, which will impact on the level of reserves. The Council is currently forecasting an overspend predominantly due to demand and price pressures.	Exec Director of Finance & Performance	5	4	20	Ongoing monitoring and scrutiny. Reserves and contingency to offset in year pressures. Robust governance arrangements for approval of any new/unplanned spend or proposals. Closely monitor the financial position and work with colleagues to mitigate any pressures in year. Continue to work through the budget to identify underlying issues and risks and address as part of the MTFP. Utilisation of government funding as available to support individuals, businesses and households. Eg Household Supprt Fund	CIPFA Financial Management Code self-assessment. In year monthly monitoring to Executive and regular scrutiny by the Finance and Resources Scrutiny Committee including scrutiny of Children's Services position which is operated through the Children's Trust. Children's Trust position also reported to the Operational Commissioning Group and the Strategic Commissioning Group for review.	5	4	20	Work to identify in-year mitigation as well as close working with the Children's Trust to understand the driving factors for, and the potential for mitigation. Set aside contingency and reserves to meet shortfall recognising the need for a longer term solution as part of the MTFP.	Executive Director of Finance and Performance	Ongoing	

9	Inadequate data sharing and data security arrangements- leading to non-compliance with legislative requirements.	Processes and procedures are not effective. Officers do not comply with processes and procedures. Inadequate training to promote requirements and risks. Information Asset Registers aren't complete.	Loss of data. Financial fines/penalties. Reputational damage.	Exec Director of Customer & Governance	3	4	12	Information Asset Registers. Data protection training for staff and Members. Data protection policies and guidance for staff. Data Protection Officer in post IT health checks including penetration testing, information sharing agreements with partners and agencies	Internal Audit of Information Governance 2021/22 - Satisfactory assurance.	3	4	12	Predessor storage arrangements to be considered and business case put together for consideration by CLT.	Data Protection Officer	Jan-24	
10	Procurement - Key suppliers of goods and services (including hosted / shared services) fail to deliver services to the required standards and capacity - thereby, impacting on the Council's ability to operate effectively in delivery/provision of services.	This may be due to lack of financial resilience or other factors, impacting the onward ability of the Council to secure required services to its residents. A key risk given COVID impact, inflationary pressures, negotiation of UK trade deals following UK Exit and lack of competition in some markets. Poor contract management may lead to failure to highlight and address performance issues effectively.	Financial and legal implications for the Council. Implications for maintaining appropriate standards for key service functions and impact on customers. Reputational damage for the Council and the Contractor. Early termination of the contract because of operational failures by the Contractor. Withdrawal of the service by the Contractor owing to dispute with the Council. Legal challenge on award of contracts / failure to achieve value for money.	Exec Director of Finance & Performance	3	4	12	Professional Procurement Teams in place to support services in effective management of procurement lifecycle; including supplier due diligence. Includes involving all directorates. Contract management register and risk assessment in place. Bankruptcy / Liquidation Policy to enable consistent response to supplier failure. Enhanced due diligence arrangements developed and Due Diligence working group in place. Risk reduced but maintained at medium due to wider risks of supplier resilience outside of control of the Council and acute given ongoing impacts of Covid19 and of agreeing post EU trade deals. Reporting to: CLT and Corporate Scrutiny Committee as required.	Internal Audit review of Procurement Compliance 2021/22 (Satisfactory assurance rating) Internal Audit review of Contract Management in Place and Economy (Good assurance rating).	2	3	6	Ongoing work with Directorates regarding Procurement requirements and maintenance of the Contract Register with a view to timely procurement and greater contract negotiation potential.	Head of Procurement	Ongoing	
11	Inadequate organisational capacity.	Capacity is not prioritised in the areas which will deliver outcomes and ensure service delivery. Capacity is not directed to specific pressures, eg- elections. Increased turnover resulting in increased vacancies. Recruitment and retention challenges which are influenced by a national shortage of employees as well as local issues such as near implementation of pay and pension and terms and conditions.	Reduced service provision, negative impact on health and wellbeing of officers, service delivery not meeting performance standards. Worse outcomes for residents.	Exec Director of Customer & Governance	5	4	20	Data considered regularly. HR Policies to support effective recruitment. People Plan in place to support employees. Future Ways of Working Strategy in place to attract employees and support health and wellbeing as well as ensuring excellent services are delivered. Managers supported to understand areas and any organisational challenges. Apprenticeship Policies being implemented to support "grow your own". Managers Network established to support managers with implementation of values. Pay and Grading and Terms and Conditions implementation due in Feb 2024. Dialogue at the right level around critical areas where resource is specialised and limited and could have a more rapid impact on service delivery.	HR data presented regularly along with wider corporate healthcheck information to ensure that performance, complaints, budget and HR data is considered holistically. Management information provided to managers within the organisation. Policies and Procedures. Consideration at CLT of areas of greater risk of impact of capacity shortage.	3	4	12	CLN colleagues to raise areas of concern with CLT should they arise.	CLN		
13	Legacy legal claims of predecessor Councils, .	Matters arising from actions/omissions of previous authorities which may be challenged	Reputational damage, financial and legal implications	CLT	3	5	15	Risk Registers, understanding of previous actions/omissions by senior management, national learning.	Risk Registers	3	5	15	Claims can arise at any time but there are specific limitation periods dependant on type. They will be dealt with on a case by case basis when they arise.	CLN	ongoing	
14	Consolidation and/or disaggregation of services into the new Unitary delivery.	Disaggregation of previously county wide services.	Disaggregation may cause budgetary and recruitment challenges where a service will cost more to deliver and staff may choose to transfer to the other authority for reasons such as local or pay differential. Reduced levels of services to customers. Vacancies for difficult to recruit key/statutory posts Increased cost of service delivery.	CLT	3	4	12	Agreed HR process & disaggregation principles between NNC/WNC on transfer of staff Statutory staff consultation process in place Updates to Directorate forums with Unions to include info on new service structures Agreed process for staff re-structures	Transformation Impact Assessments Transformation Business cases Transformation decision process through Joint Officer Board and Shared Services Joint Committee Directorate Union consultation forums	3	4	12	Detailed Transformation Plans reflect the remaining areas of disaggregation to be finalised and business plans are considered in detail.	CLT	Mar-24	
16	Breaches of health and safety responsibilities result in injuries/harm to staff, tenants or service users.	People Ineffective or insufficient competent advice. A lack of leadership engagement and competence in HSW matters. Lack/loss/movement of those with additional H&S responsibilities. IT Unsuitable IT systems to aid risk management. Property Unsuitable or poorly maintained properties and or workspaces.	Injury / harm to individual(s). Financial penalties and fines. Prosecution of organisation and or individuals. Reputational damage. Employees do not feel safe and supported and decide to leave employment. Failure to meet Service Level Agreement requirements with schools (LA + Non LA). Poor safety culture. Inadequate management systems.	Exec Director of Customer & Governance	3	5	15	•Nominated Director for HSW (Exec Director Legal & Governance) •HSW policy in place and signed off Chief Exec. •Supplementary procedures on specific risks / processes. Procedures have identified owners across various departments. •HSW intranet pages to publish / communicate information. •Contracts for occ health, eye care and eap provider in place. •Competent Advice - HSW team re-structure completed, maintain resource requirements and team competencies. •Providing adequate Information, Instruction, Training and Supervision. •Certificate of employers liability insurance / policy statement published on intranet and notice boards where staff don't have access to this.	•Management self-audits and inspections (HSW Management Tool) •HSW team led audits. •Reporting and investigation of accidents and incidents. •HSW monitor accident and incident reports. •Competent person inspections of plant and equipment. •Internal audit. •Routine/non-routine visits from enforcement authorities (fire, hse). •Directorate HSW forums and Joint HSW committee's established (Qrtly meetings). •Reviewing of policy and procedures.	3	5	15	Corporate plans are in place to lower risk and development of our safety management system (SMS) is ongoing. We have started to carryout audits this year to measure compliance with and effectiveness of the SMS. Only when we have some real assurance across a broad range of areas will the score be lowered for likelihood.	Health and Safety Lead	Ongoing	
18	Transformation Plan not delivered as endorsed by Executive, affecting the ability to deliver benefits of projects/programmes within the plan.	External (corporate wide or external to organisation) pressures impact upon the delivery of the Transformation team. increase in service demand for Transformation – leading to the service being overwhelmed by competing demands on resources and disappointment amongst customer base with pace achieved.	Failure to deliver planned benefits and savings.	CLT	3	4	12	An Enabler Working Group has been set up to review competing priorities / resource demands and there will be regular reviews of gateway process to evaluate urgency/criticality of new project proposals. Governance within the Transformation Programme including: Officer Transformation Board; Member Transformation Board. Reporting into Service Delivery EAP. Individual Project Boards established for relevant projects. Transformation Change Control process. Transformation Plan approved.	Internal reviews and Internal Audit (recent "Good" score for disagg programme, for example)	3	3	9	Transformation Plan resides with individual Executive Directors.	CLT	Ongoing	

19	Pay and Grading resources and expertise	Pay and Grading regarded as HR project rather than corporate transformation project. There is a lack of specialist resource in North to lead and support this critical work. AD leading this, as well as other key projects - e recruitment, FWOW people workstream, people strategy and disaggregation of L&D.	Serious risk that the project will drift and not achieve the aims of a competitive and comprehensive pay and reward structure for the North. Financial risks if financial expertise and capacity is not integral to the project. Financial risk to HR budget as this should not be a pressure on the HR budget.	Exec Director of Customer & Governance	4	4	16	Establish Pay and Grading as a corporate transformation project and resource with adequate specialists / expertise.		4	3	12	Continue to seek additional specialist resource and utilise substantive team where possible.	Assistant Director of HR	Ongoing	
20	Cost/Service Need being in excess of budget and activity anticipated due to Cost of Living impact	National/global recession resulting in business failure and unemployment Growth or decline of the local/national economy - adverse impact on interest rates, inflation and service demand	Increased requirement for benefits, housing, Council Tax support, business advice and support. Adverse impact on demand led services eg homelessness. Adverse impact on other services due to reduction in disposable income eg use of leisure facilities. Impact on services to deliver support packages	CLT	4	4	16	Emergency Planning Business Continuity Plan - Reviewed as part of Business Continuity Arrangements through Emergency Planning Team. Identified area on the Council's website to provide details of support for residents including wider link to Government support - https://www.northnorthants.gov.uk/cost-of-living Existing Council support mechanisms for those in need and wider community support networks Specific government funding streams such as Household Support Fund administered by the Council. Macro controls to offset inflation. However, this often means interest rate rises and affects predominantly home owners.	Emergency Planning Business Continuity Planning Process and information dissemination. National Announcements for Government support - https://www.gov.uk/cost-of-living-ya help alleviate individual and organisational pressures. Current service provision and controls including work with community groups. Bank of England control mechanism	3	4	12	Specific group set up to look at implications arising from the cost of living crisis and impact/support.	Assistant Director Communities	Ongoing	