# Corporate Risk Register

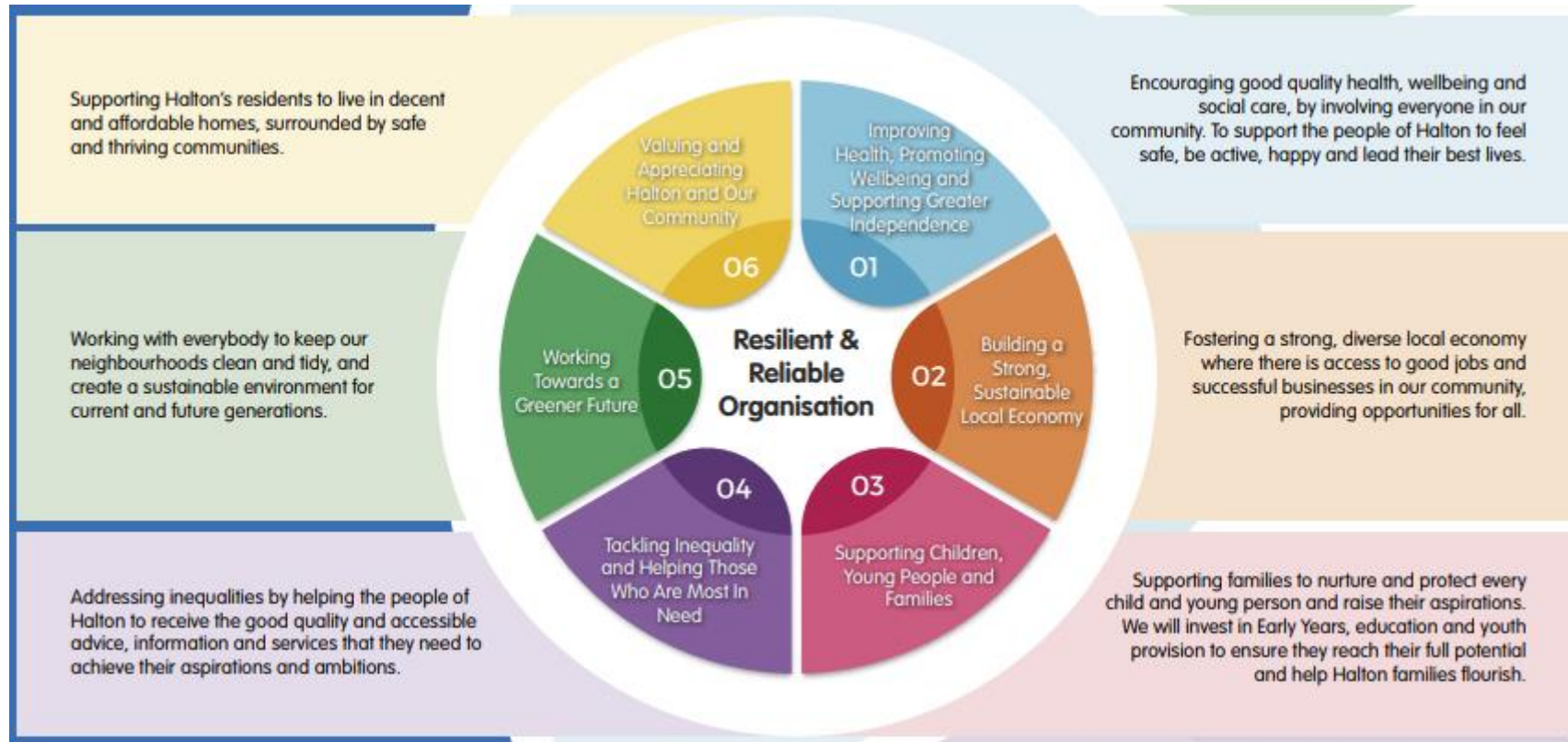| | |
|---:|:---|
| Lead Officer: | **Corporate Director** |
| Risk Management Coordinator: | **Principal H&S Officer** |
| Initial Register Implementation: | **2011** |
| Register Review Date: | **May 2024** |
| Progress update: | **September 2024** |

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**Halton Borough Council Risk Register Summary**

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| | H IMPROB | IMPROB | POSS | PROB | H PROB |
|-----|-----|-----|-----|-----|-----|
| HI | 5 | 10 | 15 | 20 | 25 |
| S | 4 | 8 | 12 | 16 | 20 |
| M | 3 | 6 | 9 | 12 | 15 |
| L | 2 | 4 | 6 | 8 | 10 |
| IM | 1 | 2 | 3 | 4 | 5 |

**HALTON BOROUGH COUNCIL CORPORATE PRIORITIES: 2024 - 29**

Supporting Halton's residents to live in decent and affordable homes, surrounded by safe and thriving communities.

Working with everybody to keep our neighbourhoods clean and tidy, and create a sustainable environment for current and future generations.

Addressing inequalities by helping the people of Halton to receive the good quality and accessible advice, information and services that they need to achieve their aspirations and ambitions.

Encouraging good quality health, wellbeing and social care, by involving everyone in our community. To support the people of Halton to feel safe, be active, happy and lead their best lives.

Fostering a strong, diverse local economy where there is access to good jobs and successful businesses in our community, providing opportunities for all.

Supporting families to nurture and protect every child and young person and raise their aspirations. We will invest in Early Years, education and youth provision to ensure they reach their full potential and help Halton families flourish.

Valuing and Appreciating Halton and Our Community — 06

Improving Health, Promoting Wellbeing and Supporting Greater Independence — 01

Working Towards a Greener Future — 05

**Resilient & Reliable Organisation**

Building a Strong, Sustainable Local Economy — 02

Tackling Inequality and Helping Those Who Are Most In Need — 04

Supporting Children, Young People and Families — 03

The complete Corporate Plan can be accessed at: corporateplan.pdf (halton.gov.uk)

## DELIVERY OF SERVICES TO VULNERABLE ADULTS

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|------|-----------------|---------------------|----------------------------|--------------------------------|----------------------------|
| **1a** | Failure to deliver quality services to vulnerable adults could negatively affect their health and wellbeing i.e. increasing complex care needs, ageing population, reduction in available funding, recruitment and provider failure. Impact of COVID19 on service delivery  Care Home Sector financial sustainability due to the impact of COVID 19 and cost of living | 5 | 5 | **25** | 01 04 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|-----------------------|----------------|----------------|----------------|------------------------------|----------------|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| • Effectively allocating and using available finances and resources in the delivery of services. <br> • Integration of Health and Social Care with a view to improving the outcomes for people using the services, such as joint commissioning arrangements for services, joint strategies, e.g. Carers Strategy and Autism Strategy, etc. <br> • Transformation of provider markets so that responsive and sustainable markets in adult social care can be developed and supported, e.g. Care Home Development project and Transforming Domiciliary Care. | 4 | 4 | **16** | 6 monthly | Executive Director - Adults |

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|---|---|---|---|---|---|
| <ul><li>Delivery of prevention and early intervention to vulnerable adults through a range of services.</li><li>Effective use of alternative funding streams and community assets to provide services.</li><li>Joint approach with Health to ensure efficient quality assurance across all adult social care services.</li></ul>**COVID-19**<ul><li>Continued focus and support to Care Homes</li><li>Support the flu and COVID booster programmes</li><li>Ensure any emergency funding is allocated immediately</li><li>Continued focus on resilience</li></ul> | | | | | |

| Item | Identified risk | Impact *(Severity)* | Likelihood *(Probability)* | Unmitigated Risk Score *(I x L)* | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **1b** | Adult Social Care Charging Reforms, as announced September 2021 likely to cause a shortfall in funding to meet the full cost of care. This in turn may trigger a judicial review if Local Authority do not fully fund | 5 | 5 | **25** | 01 04 06 |

| Risk control measures | | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Residual score with measures implemented | | | | |
| | Impact *(Severity)* | Likelihood *(Probability)* | Mitigated Risk Score *(I x L)* | | |
| • ADASS regional groups to review risks and approaches and address areas of concern.<br>• Local task and finish group to fully understand risks and make recommendations to Local Authority.<br>• Reforms delayed until 2025- waiting for further information and guidance.<br>• Cost of care exercise now published. | 5 | 4 | **20** | 6 monthly | Executive Director - Adults |

**SAFEGUARDING ADULTS**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|------|-----------------|--------|------------|----------|----------------|
| 2 | Failure to support and protect the safeguarding adults could adversely impact on their health, safety and opportunity to reach their potential | 5 | 5 | 25 | 01 02 03 04 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|-----------------------|--------|------------|----------|--------|--------|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| • Halton's Safeguarding Adults Board meets on a quarterly basis, to ensure effective oversight of safeguarding in the Borough.<br>• Peer review completed in July 2023- the board will implement findings.<br>• Safeguarding Adult's Board works with strategic groups within the Borough to ensure accountability and effectiveness of safeguarding.<br>• Multiagency audits are completed and reported to the Board to ensure oversight of quality and consistency of practices.<br>• Comprehensive performance dashboard for Adults are reviewed at least monthly and compared with regional and national benchmarks. | 4 | 4 | 16 | 6 monthly | Executive Director - Adults |

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|---|---|---|---|---|
| <ul><li>Improving the health and wellbeing of adults through early intervention and prevention services.</li><li>Providing efficient safeguards to support vulnerable adults who lack capacity and require the support of the Deprivation of Liberty Safeguards and the Court of Protection.</li><li>Support local care home and community providers to drive up the quality of care within their services to ensure positive outcomes for vulnerable adults.</li><li>Regular reports to health PPB.</li><li>Quarterly assurance meetings with the leader, chief executive and chair of the board.</li></ul>**COVID-19**<ul><li>Continue to monitor concerns in relation to care home outbreaks</li><li>Maintain focus on quality</li><li>Maintain focus on ensuring visiting is available to all care home residents, including families and other professionals.</li></ul> | | | | |

**CHILDREN SERVICES**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **3a** | Death or serious harm to a child that was or should have been in receipt of services, either from the council (or a partner agency).<br>There is an on-going need to ensure that services to all vulnerable children and young people have a focus on safeguarding and prevention of harm.<br>Failure to support and protect children could adversely impact on their health and safety and compromise their ability to fulfil their potential. | 5 | 5 | **25** | 01<br>02<br>03<br>04<br>06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |

| Risk control measures | Impact | Likelihood | Mitigated Risk Score | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| • Leadership system across children's services and the wider corporate council are connected to the child's voice by the golden thread<br>• Children are seen and heard and their assessed needs and voice are used to inform SMART plans for them<br>• Management oversight and intervention is strong<br>• Quality Assurance processes including audit, supervision and performance data management provide oversight and assurance<br>• DfE Improvement Notice Jan 2022: Children's Improvement Board in place | 4 | 4 | **16** | 6 monthly | Executive Director - Childrens |

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|---|---|---|---|---|---|
| • Halton's Children's and Young People Safeguarding Partnership Board fully operational connecting partners across the Borough<br>• Attendance of CYP in education is monitored, supported, challenged and shared with appropriate services to ensure children are seen, supported and safe | | | | | |

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **3b** | Overspend in Children's Services<br>a. Demand at the front door and throughout the 'child's journey' in the child services system has been exacerbated by a risk averse approach which is being challenged to ensure an appropriate intervention at the right (earliest) time<br><br>Extensive additional resources have been provided to address this inflated demand, but resources are finite and cannot be continued beyond the next year<br>b. The number of children with an Education Health and Care plan is, proportionally, significantly higher than regionally and the needs of this large cohort cannot be met through 'in Borough' placements alone. Transport to 'out of Borough' placements is a consequence and is extremely costly | 5 | 5 | **25** | 01<br>02<br>03<br>04<br>06<br>Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | **Impact** (*Severity*) | **Likelihood** (*Probability*) | **Mitigated Risk Score** (I x L) | | |
| a. Children's social care<br>• Staffing Establishment 'as is' position<br>• Analysis of the demand for HBC children's services | 4 | 4 | **16** | 6 monthly | Executive Director - Childrens |

|  |  |  |  |  |
|---|---|---|---|---|
| • TDU Children Services Transformation Programme<br>• Desired position established and budget control system introduced<br><br>b. SEND - Out of Borough Placements and Transport<br>   • Baseline position established providing tracking data for children 'in the system'<br>   • Review of EHCP assessment process and further development of graduated approach to identify, assess and intervene/ meet need earlier<br>   • Sufficiency strategy and JSNA to inform provision required and work with wider stakeholders to develop further specialist provision in borough<br>   • Management oversight, monitoring and analysis of data to inform future planning, development and training of workforce<br>   • Partnership working with health, social care and multi-agency services to share and learn effective practice whilst providing scrutiny and challenge to partner agencies as appropriate to meet need<br>   • Analysis of effective implementation of transport policy and practice; review of promotion for independence and preparation for adulthood with partners, wider council services, parent/carers and young people |  |  |  |  |

**HEALTH AND WELLBEING**

| Item | Identified risk | Impact[i] (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|------|-----------------|----------------------|--------------------------|--------------------------------|----------------------------|
| 4a | Failure to respond to emerging public health threats (infectious diseases, environmental hazards, major emergencies) resulting in harm to the Population in Halton | 3 | 3 | 9 | 01 02 03 04 05 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|-----------------------|-------------------|------------------------|---------------------------------|------------------------------|----------------|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| Key Public health staff engaged appropriately with wider public health systems for early alerts, advice, mutual support. Halton Health Protection Board established. Work redistributed; Agency staff and cover from other senior staff | 2 | 2 | 4 | Ongoing | Director of Public Health |
| Contribution to and development of multi agency joint response plans; development of local contingency plans ( heatwave , floods etc) and environmental plans | 2 | 2 | 4 | ongoing | Director of Public Health |

| Item | Identified risk | Impact[ii] *(Severity)* | Likelihood *(Probability)* | Unmitigated Risk Score *(I x L)* | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **4b** | Work force pressures in team due to staff not in post /off | 3 | 3 | **9** | 01 02 03 04 05 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact *(Severity)* | Likelihood *(Probability)* | Mitigated Risk Score *(I x L)* | | |
| Posts have been recruited to and some posts still out to recruitment | 2 | 1 | **2** | 4 monthly | Director of Public Health |

| Item | Identified risk | Impact[iii] *(Severity)* | Likelihood *(Probability)* | Unmitigated Risk Score *(I x L)* | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **4c** | Sexual Health contract providers have issues with estates and may not be able to provide service | 3 | 3 | **9** | 01 02 03 04 05 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| Ongoing discussions with providers and legal and estates and finance | 2 | 3 | 6 | Ongoing | Director of Public Health |

**CYBER RISK**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **5** | Risk of adverse business Impact as a result of the failure of key business systems brought about by cyber incidents | 5 | 5 | **25** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| • The Council adopts a range of activities to manage the risk of loss of services as a result of Cyber threats, which includes risk reduction (mitigation), Risk retention (acceptance), Risk avoidance, Risk transfer<br>• A dedicated service within ICT Services that has the responsibility of managing the cyber risk facing the Council<br>• Clear reporting lines to senior management allowing the risk to be managed.<br>• Numerous Compliance regimes that provide the necessary assurance frameworks to demonstrate how the Council complies with industry standards<br>• Ongoing education and awareness programme for key staff<br>• Ongoing adoption and implementation of advice and guidance from NCSC<br>• Continuous improvement - ongoing upskilling of security and Information Governance teams to expand their capabilities against the prevailing cyber climate through training and certification | 5 | 4 | **20** | 6 monthly | Operational Director – IT and Support Services |

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|---|---|---|---|---|---|
| • Migration to office 365 will significantly enhance security posture | | | <span style="background-color:red">     </span> | | |

# DATA PROTECTION

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|------|-----------------|--------|------------|----------------|----------------------------|
| 6 | Data Protection: Risk of breach of data caused by mishandling of personal data by inadequate data handling and not adequately preventing and minimising security incidents, including ICT incidents, resulting in loss of data, unlawful sharing of data, reputational damage and significant financial penalties levied by the Information Commissioner's Office <br><br> Failure to comply with information governance requirements, e.g. Data Protection Act (General Data Protection Regulation); Freedom of Information Act | 5 | 5 | **25** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|-----------------------|--------|------------|-------------|------------------------------|----------------|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| <ul><li>Policies and procedures for council staff including Data Protection</li><li>Policy and Information Governance Handbook</li><li>Wide range of guidance about handling personal data available to council staff on the internal intranet site</li><li>Mandatory training for council staff via E-Learning module</li><li>Reporting to senior Management Team Reviews and internal audits</li></ul> | 5 | 3 | **15** | 6 monthly | Operational Director – IT and Support Services |

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|---|---|---|---|---|---|
| • Privacy Impact Assessments for new technologies or where processing is likely to result in a high risk to individuals<br><br>• Contractor's compliance<br><br>• Management controls, including effective logging and tracking, complaints and appeals procedures<br><br>• Effective use of technology<br><br>• The model publication scheme approved by the Information Commissioner adopted<br><br>• Improvement plan developed and being implemented | | | | | |

**CAPACITY AND RESILIENCE**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **7a** | Reduced capacity to sustain the delivery of services and respond to emergency situations in line with Council Priorities | 5 | 4 | **20** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| • Maintaining a supportive working environment through shared service organisational ethos, pride and value across Members, staff, management, Unions and partners. Work on values and branding completed and launched May 2024.<br>• Focusing delivery of performance on the council's corporate vision and key strategic priorities leading to a clearly understood and shared set of priorities<br>• Revised priorities and new Corporate Plan launched April 2024<br>• Emphasis on management and leadership standards with recognition of the challenges faced by the Authority leading to managers who are able to direct, inform, develop and support staff. This also enables a focus on succession planning<br>• Maintaining a workforce that are skilled, informed, flexible and competent in order to ensure that they deliver efficient and effective services | 4 | 4 | **16** | 6 monthly | All Directors |

| | | Impact (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | |
|---|---|---|---|---|---|
| | • Deliver the Council's Transformation Programme 2023-26 to align service provision to resources and provide prioritised resilient services in the community<br>• Utilise learning from the management of working practices during the pandemic to inform future ways of working and optimise resources. This will be done in a controlled way, alongside an accommodation review, sponsored by Management Team and delivered in a structured way using programme management principles | | | | |

| Item | Identified risk | Impact (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| 7b | Reduced capacity to continue service provision across various services due to recruitment and / or retention difficulties and high sickness absence levels | 5 | 4 | 20 | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| • Development of a medium-term strategic approach to resourcing in order to address the issue of an ageing workforce, facilitated through Transformation Delivery Unit.<br>• Development of a short-term strategic approach to resourcing in order to address emerging labour market difficulties, recruitment to hard-to-recruit professional roles, and recruitment to a growing number of vacant posts | 4 | 4 | 16 | 6 monthly | Corporate Director - CXDU |

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| • Design and implementation of career pathways to attract younger potential employees to the workforce<br>• Collaborative working with LCR CA and LA's to implement broader projects and initiatives to attract potential employees to the sub-regional Local Government Sector<br>• Development of broader projects and initiatives to retain employees within the Council (e.g. flexible working)<br>• Develop a more robust model for the provision and management of Flexible Workforce through a joint venture arrangement.<br>• Develop a new 'Employer Value Proposition' as part of the Council's Transformation Programme<br>• Development of short term/long term plans to improve management of employee absences | | | | | |

**COUNCIL FINANCES**

| Item | Identified risk | Impact[iv] (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **8a** | The Council's funding available from Government grant and/or locally raised business rates/council tax, is not sufficient to meet increasing service demands and associated costs, which may lead to an inability to deliver the Council's key service priorities, especially those services essential for the support of the most vulnerable members of the community | 5 | 5 | **25** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| • Financial Planning is undertaken to compare available financial resources with spending requirements over the medium term (3 years), resulting in preparation of the Medium-Term Financial Strategy which allows overall budget gaps to be identified at an early stage and appropriate plans put in place to tackle them<br>• Proposed developments regarding the future funding of Local Government nationally are monitored, to assess the potential impact for the Council and take account of this within the Medium-Term Financial Strategy.<br>• The Government once again announced only a one-year grant settlement for 2024/25. In addition, the proposed review of the Local | 5 | 4 | **20** | Monthly | Operational Director – Finance |

Government funding regime has been postponed until at least the next Parliament. This continues to provide great uncertainty in terms of medium term financial planning

- Following the grant settlement, Council on 6th March 2024 set a balanced revenue budget for 2024/25. The budget assumes full delivery of £2.7m efficiency savings and £4m transformation programme savings for 2024/25, with further savings required in each subsequent year. Additional budget provision has been made to address current overspending areas, except for agency staffing costs over and above budget. This creates a significant risk for the Council, if the required savings are not achieved or spending is not contained within budget.

- Budget monitoring and progress with the delivery of savings is being reported quarterly to Management Team, Executive Board and the relevant Policy and Performance Boards.

- Governance arrangements for the Transformation Programme are being led by the Executive Board, with regular briefings for the Scrutiny Chairs Group and all Members.

- Effective business planning is undertaken to ensure that appropriate resources are directed towards the Council's key strategic priorities.

- Budget setting is aligned to the annual business planning cycle in order to ensure that the value of financial resources is maximised.

- A budget risk register is maintained which works in conjunction with the budget setting cycle to ensure that emerging budget risks are identified together with relevant mitigating measures.

| Item | Identified risk | Impact[v] (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| 8b | Total Council spending for the year significantly exceeds available budget provision and thereby requires funding from useable reserves | 5 | 5 | 25 | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| • Budget monitoring information is provided to budget managers on a monthly basis, with support and advice provided by Finance Officers<br>• Spending is monitored closely, and exceptions highlighted in order that corrective action can be taken as soon as possible.<br>• Monthly monitoring of key overspending areas is carried out by Management Team.<br>• Action is being taken to reduce key high spending areas including; agency staff placements, adults community care (residential, domiciliary and direct payments), children's placements, independent foster care placements, home to school transport, high needs special education.<br>• The forecast outturn position is updated on a monthly basis. | 5 | 4 | 20 | Monthly | Operational Director – Finance |

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|---|---|---|
| • Where significant overspend positions emerge, action plans are put in place to address the situation, with close monitoring by relevant budget managers and Management Team<br>• Budget monitoring reports for each Department are presented to the relevant Policy and Performance Boards on a quarterly basis and the overall council wide position is reported quarterly to Executive Board. These reports include forecasts of the likely outturn position.<br>• When Council sets the annual budget, a central contingency budget is included to provide for unexpected and excessive costs.<br>• The Medium Term Financial Strategy includes provision to replenish reserves during 2025/26 and 2026/27, given that useable reserves are now virtually depleted as a result of having to fund overspends in recent years. | | |

| Item | Identified risk | Impact[vi] (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| 9 | A failure to monitor and appropriately manage the risks created by global, national and local events, and how these might impact on local community tensions, could potentially lead to a threat to security and have an adverse effect on the stability of Halton's communities. | 5 | 3 | **15** | 01 05 06 |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| • The Safer Halton Partnership (SHP) involves joint working, clear communications and information sharing across various partner agencies, including emergency services. The partnership works to ensure that there is community cohesion with safe and secure neighbourhood environments<br>• Multi agency Community Safety team that addresses anti-social behaviour and crime thus supporting the SHP agenda<br>• The Channel Panel is a multi-agency group which provides support for those who are vulnerable to be drawn into terrorism through a programme of early intervention and diversion | 4 | 3 | **12** | Quarterly to MT | Operational Director – Community and Greenspace |

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| • Emergency Planning team have developed and tested Multi-Agency Response plans to mitigate a number of risks within the borough<br>• In response to 'Major Accident' cloudburst incidents occurring at Upper Tier COMAH sites; Emergency Planning Team have tested and validated Emergency COMAH Plans for all 9 sites<br>• Emergency Planning Teamwork in partnership with the Cheshire Resilience Forum to provide an integrated approach for facilitating and responding with emergencies across Cheshire<br>• Emergency Planning Teamwork with cross border organisations and responding agencies within the Liverpool City Region regarding cross border risks and resilience planning<br>• Critical Incident Management procedures, including 'lockdown', have been developed, communicated and tested for Council buildings and schools.<br>• Security surveys conducted for main council buildings and schools | | | | | |

**CHANGES TO GOVERNMENT ARRANGEMENTS**

| Item | Identified risk | Impact (Severity) | Likelihood (Probability) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **10** | Changes to Government arrangements and other public sector organisations could potentially lead to a deterioration of local services | 5 | 5 | **25** | 01 02 03 04 05 06 Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (Severity) | Likelihood (Probability) | Mitigated Risk Score (I x L) | | |
| • Ensuring that both Members and officers from the Council play an active role in the Combined Authority for the Liverpool City Region <br> • Through 'One Halton' work the Authority is ensuring a smooth interaction between Health and Halton Council colleagues, to ensure that Halton's interests are recognised and looked after in the governance arrangements of the Integrated Care System | 5 | 3 | **15** | 6 monthly | Chief Executive |

**FRAUD**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **11** | Large-scale fraud and/or corruption may lead to significant financial loss and reputational damage | 4 | 5 | **20** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| The Audit and Governance Board monitors and reviews the adequacy of the Council's anti-fraud and corruption policies and arrangements. These arrangements include:<br><br>• Maintenance of an effective system of internal control<br>• Rigorous pre-employment checks of new employees<br>• Officers' Code of Conduct<br>• Members' Code of Conduct<br>• Gifts and Hospitality Policy<br>• Registration of Interests<br>• Local Code of Corporate Governance<br>• Whistleblowing arrangements<br>• Finance Standing Orders | 2 | 2 | **4** | 6 monthly | Operational Director – Finance |

| | | | | |
|---|---|---|---|---|
| • Procurement Standing Orders<br>• Anti-Fraud, Bribery & Corruption Strategy<br>• Fraud Response Plan<br>• Fraud Sanction and Prosecution Policy<br>• Anti-Facilitation of Tax Evasion Policy<br>• Fraud, corruption and bribery awareness training<br>• A continuous internal audit of the Council's systems and services<br>• A corporate fraud investigation team, which receives fraud referrals, investigates allegations, recovers losses and sanctions fraudsters<br>• External testing and assurance over the Council's cyber security arrangements<br>• Crime insurance policy to indemnify the Council against significant financial loss resulting from fraud<br>• Participation in the National Fraud Initiative<br>• Fraud awareness campaigns encouraging members of the public and employees to raise any concerns about fraud and corruption<br>• Collaboration with other local authorities and sharing of best practice in regard to tackling fraud and corruption<br>• Formal arrangements with the DWP to participate in joint criminal fraud investigations relating to the Council Tax Reduction Scheme (CTRS) and social security benefit fraud<br>• Membership of the National Anti-Fraud Network (NAFN), which is the largest shared service in the country and provides data, intelligence and best practice in support of fraud and investigation work | | | | |

**FUNDING AND INCOME GENERATION**

| Item | Identified risk | Impact (*Severity*) | Likelihood (*Probability*) | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|------|-----------------|---------------------|----------------------------|---------------------------------|-----------------------------|
| 12 | Failure to maximise and identify funding opportunities in light of government cuts resulting in a potential challenge of the Councils capacity to delivery its priorities | 4 | 4 | **16** | 02 04 Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|------------------------|------------------------------------------|---|---|------------------------------|----------------|
| | Impact (*Severity*) | Likelihood (*Probability*) | Mitigated Risk Score (I x L) | | |
| • Continuing to identify funding streams and income generating options through horizon scanning, alternative untapped funding opportunities and shared partnerships with 3rd sector, private sector, and other public sector bodies<br>• Review team structures and redeploy staff to respond to emerging funding<br>• streams e.g. housing, climate change and town centre funding.<br>• During the budget setting process Directorates identify and prioritise funding requirements biannually including ensuring that there are systems to capture and report when funding comes to an end<br>• Corporate reports to Executive Board and Management Team to highlight services the Team can offer and meets with Departments to | 3 | 4 | **12** | 6 monthly | All Executive Directors |

| | | | | |
|---|---|---|---|---|
| identify funding requirements; regularly signposts Council services to specific funding streams<br><br>• Commercially focussed through establishing trading and income generation possibilities in order to protect and effectively use funds, pilot Charging Policy for bid-writing introduced September 2018 and has been made permanent.<br><br>• Continue to work with colleagues to improve the methods of dissemination and ensure prioritisation of/submission to relevant funding streams | | | | |

**DISRUPTION TO ELECTORAL PROCESS**

| Item | Identified risk | Impact (*Severity*) | Likelihood *(Probability)* | Unmitigated Risk Score (I x L) | Corporate Priority Area(s) |
|---|---|---|---|---|---|
| **13** | Criminals and nation-state actors may seek to deliberately disrupt or sabotage the electoral process, resulting in a failure to deliver all or part of an election outcome in line with legislation. | 5 | 3 | **15** | Reliable & Resilient Organisation |

| Risk control measures | Residual score with measures implemented | | | Timescale / Review frequency | Lead Officer/s |
|---|---|---|---|---|---|
| | Impact (*Severity*) | Likelihood *(Probability)* | Mitigated Risk Score (I x L) | | |
| <ul><li>Up-to-date cyber security measures in place around Electoral Management Software (links to broader Cyber Security and Data Protection risks and measures in sections 5 and 6 of register).</li><li>Elections staff briefed on security and personal safety.</li><li>Physical security measures in place for electoral assets (documentation, ballot boxes, premises).</li><li>Electoral staff and Returning Officer alert to IT threats, such as phishing.</li><li>Electoral candidates and agents briefed on security and personal safety.</li><li>Adherence to Electoral Commission and LGA guidelines.</li></ul> | 5 | 2 | **10** | 6 monthly | Electoral Services Manager / Chief Executive |

# Version Control Record

| Version | Date Created | Date of Amendment: | Nature of Amendment | Date of Next Review: |
|---|---|---|---|---|
| 1.0 | 13.10.11 | | | |
| 1.1 | | 28.08.12 | Progress Commentary. | |
| 2.0 | | 13.03.13 | Reviewed and updated. | 13.10.13 |
| 2.1 | | 20.09.13 | Progress Commentary. | |
| 3.0 | | 31.03.14 | Reviewed and updated in line with the Corporate Peer Challenge and the revised Business Planning Process and associated guidance notes. | 13.10.14 |
| 3.1 | | 15.09.14 | Progress Commentary. | |
| 4.0 | | 10.04.15 | Reviewed and updated. | 12.10.15 |
| 4.1 | | 10.09.15 | Progress Commentary. | |
| 5.0 | | 01.04.16 | Reviewed and updated. | 01.04.17 |
| 5.1 | | 10.09.16 | Progress Commentary. | |

| 6.0 | | 01.04.17 | Reviewed and updated. | 01.09.17 |
|------|---|----------|-----------------------|----------|
| 6.1 | | 10.09.17 | Progress Commentary. | |
| 7.0 | | 01.04.18 | Reviewed and updated. | 01.09.18 |
| 7.1 | | 01.09.18 | Progress Commentary. | |
| 8.0 | | 01.04.19 | Reviewed and updated. | 01.09.19 |
| 8.1 | | 01.09.19 | Progress Commentary. | |
| 9.0 | | 01.05.20 | Reviewed and updated. | 01.05.20 |
| 9.1 | | 01.09.20 | Progress Commentary. | |
| 10.0 | | 01.04.21 | Reviewed and updated. | 01.09.21 |
| 10.1 | | 01.09.21 | Progress Commentary. | |
| 11.0 | | 01.04.22 | Reviewed and updated. | 01.09.22 |
| 11.1 | | 01.09.22 | Progress Commentary. | |
| 12.0 | | 01.04.23 | Reviewed and updated in line with Zurich Municipal 1st review. 2nd review will progress on September | 01.09.23 |

**37 |** P a g e       *CP-REP-FRM-92.12.1*       *Strategic Risk Register*

*Hardcopies of this document are considered uncontrolled please refer to the Council website or intranet for latest version.*

| | | | | |
|---|---|---|---|---|
| | | | update. Mersey Gateway and Community Expectations removed after consultation with relevant managers/directors. Education risk removed as being dealt with as a separate matter at the request of the interim Executive Director for Adults/Childrens Services. Depleted staffing resource for Emergency Planning added to 'Keeping Halton's Community Safe'. | |
| **12.1** | | **01.09.23** | **Reviewed and updated in line with Zurich Municipal 2<sup>nd</sup> review. Risk Register summary and matrix added at beginning of document as a quick reference. Safeguarding of adults and Childrens split into 2 separate sections at request of Executive Director of Adults Services. Information for the new section, Children's Services now included.** | **01.04.24** |

| | | | Partnerships removed after consultation with DM Community Safety. Keeping Halton's community safe updated with new EPO's on call and rota agreement. | |
|---|---|---|---|---|
| **13.0** | | **01.05.2024** | **EPO staffing concerns removed from Keeping Halton's Community Safe risk by DM Community Safety.**<br><br>**Updates to Health & Wellbeing risks and risk mitigation measures by Dir. Public Health.**<br><br>**Updates to Capacity & Resilience risk mitigation measures by CD Chief Executive's Delivery Unit.**<br><br>**Updates to Council Finances risk mitigation measures by OD Finance.** | **01.09.2024** |

| | | | Updates to Council Finances risk mitigation measures by OD Finance.<br><br>Addition of Risk to Electoral Process and risk mitigation measures by Chief Executive.<br><br>New Corporate Priorities added as illustration on page 4 and cross-referencing to those priorities updated throughout. | |
|---|---|---|---|---|

**Appendix 'A'**

**Scoring Mechanism**

Once the business risks are identified and analysed, they are scored by multiplying the impact and likelihood. They will then establish a final score (or significance rating) for that risk:

**See below.**

| IMPACT | | H IMPROB | IMPROB | POSS | PROB | H PROB |
|---|---|---|---|---|---|---|
| | HI | 5 | 10 | 15 | 20 | 25 |
| | S | 4 | 8 | 12 | 16 | 20 |
| | M | 3 | 6 | 9 | 12 | 15 |
| | L | 2 | 4 | 6 | 8 | 10 |
| | IM | 1 | 2 | 3 | 4 | 5 |

**LIKELIHOOD**

Those that have been placed in the red boxes are the primary or Top Risks followed by lower risks leading to improbable risks

Measures to control the risks are identified from the following options;

1. Reducing the likelihood; or
2. Reducing the impact; or
3. Changing the consequences of the risks by,
   - Avoidance
   - Reduction
   - Retention
   - Transference; or
4. Devising Contingencies, i.e. Business Continuity Planning

The risks are scored again to establish the effects the measures have once implemented on reducing the risks and identify a score rating for residual risks.

**Colin Hill**
**Principal H & S Adviser and Risk Management Co-Ordinator**
**May 2024**