



**North Yorkshire
County Council**

Agenda

Meeting: Audit Committee

**Venue: Brierley Room, 3 Racecourse Lane,
Northallerton, DL7 8QZ**

Date: Friday 20 December 2019 at 1.30 pm

Note: Members are invited to attend a seminar concerning Counter Fraud at 1.00 pm in the Brierley Room, 3 Racecourse Lane, Northallerton, DL7 8QZ

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Business

- 1. Apologies for Absence**
- 2. Minutes of the meeting held on 25 October 2019** (Pages 5 to 9)
- 3. Any Declarations of Interest**

Enquiries relating to this agenda please contact Ruth Gladstone **Tel: 01609 532555** or e-mail ruth.gladstone@northyorks.gov.uk
www.northyorks.gov.uk

4. Public Questions or Statements

Members of the public may ask questions or make statements at this meeting if they have given notice (including the text of the question/statement) to Ruth Gladstone of Democratic Services (*contact details at the foot of page 1*) by midday on Tuesday 17 December 2019. Each speaker should limit themselves to 3 minutes on any item. Members of the public who have given notice will be invited to speak:-

- at this point in the meeting if their questions/statements relate to matters which are not otherwise on the Agenda (subject to an overall time limit of 30 minutes);
- when the relevant Agenda item is being considered if they wish to speak on a matter which is on the Agenda for this meeting.

If you are exercising your right to speak at this meeting, but do not wish to be recorded, please inform the Chairman who will instruct those taking a recording to cease while you speak.

5. **Progress on Issues Raised by the Committee** – Joint report of the Corporate Director – Strategic Resources and the Assistant Chief Executive (Legal and Democratic Services)
(Pages 10 to 11)
6. **Progress on 2019/20 Internal Audit Plan** - Report of the Head of Internal Audit
(Pages 12 to 16)
7. **Business and Environmental Services Directorate:-**
 - (a) **Internal Audit Work** - Report of the Head of Internal Audit
(Pages 17 to 25)
 - (b) **Internal Control Matters** - Report of the Corporate Director – Business and Environmental Services
(Pages 26 to 49)
8. **Risk Management - Progress Report** - Report of the Corporate Director – Strategic Resources
(Pages 50 to 77)
9. **Audit Committee Programme of Work**
(Page 78)
10. **Other business which the Chairman agrees should be considered as a matter of urgency because of special circumstances.**

Barry Khan
Assistant Chief Executive (Legal and Democratic Services)

County Hall
Northallerton

Notes:

1. The Brierley Building (main County Hall building) is closed now until July 2020. All Committee meetings will be held in either No 1 or No 3 Racecourse Lane, Northallerton, DL7 8QZ. Please note the venue above for the location of this meeting. Please report to main reception which is located in No 3 Racecourse Lane.

2. Emergency Procedures for Meetings

Fire

The fire evacuation alarm is a continuous Klaxon. On hearing this you should leave the building by the nearest safe fire exit. Once outside the building please proceed to the fire assembly point in the rear car park / L'Especk Street.

Persons should not re-enter the building until authorised to do so by the Fire and Rescue Service or the Emergency Co-ordinator.

An intermittent alarm indicates an emergency in nearby building. It is not necessary to evacuate the building but you should be ready for instructions from the Fire Warden.

Accident or Illness

First Aid treatment can be obtained by telephoning Extension 7575.

AUDIT COMMITTEE

1. Membership

County Councillors (8)					
	<i>Councillors Names</i>			<i>Political Group</i>	
1	ARTHUR, Karl			Conservative	
2	ATKINSON, Margaret	Vice-Chairman		Conservative	
3	BAKER, Robert			Conservative	
4	CLARK, Jim			Conservative	
5	HUGILL, David			Conservative	
6	LUNN, Cliff	Chairman		Conservative	
7	MACKAY, Don			NY Independents	
8	WEBBER, Geoff			Liberal Democrat	
Members other than County Councillors (Non-voting) (3)					
1	GRUBB, Nick				
2	MARSH, David				
3	PORTLOCK, David				
Total Membership – (11)				Quorum – (3) County Councillors	
Con	Lib Dem	NY Ind	Labour	Ind	Total
6	1	1	0	0	8

2. Substitute Members

Conservative		Liberal Democrat	
	<i>Councillors Names</i>		<i>Councillors Names</i>
1	COOPER, Richard	1	BROADBANK, Philip
2	THOMPSON, Angus	2	
3	PARASKOS, Andy	3	
4	PATMORE, Caroline	4	
5		5	
NY Independent			
	<i>Councillors Names</i>		
1			
2			
3			
4			
5			

The term of appointment of Independent Members to the Audit Committee shall be four years from 31 July during the year which follows a County Council election in order to provide consistency during the period for production, and subsequent approval of, the Statement of Final Accounts.

North Yorkshire County Council

Audit Committee

Minutes of the meeting held on Friday 25 October 2019 at 1.30 pm at County Hall, Northallerton

Present:-

County Councillor Members of the Committee:-

County Councillor Cliff Lunn (in the Chair); County Councillors Karl Arthur, Margaret Atkinson, Robert Baker, Don Mackay and Andy Paraskos (as Substitute for Jim Clark)

Independent Members of the Committee:-

Mr Nick Grubb, Mr David Marsh and Mr David Portlock

In Attendance:-

Deloitte Officers:- Paul Thomson and Nick Rayner

Veritau Officer: Max Thomas (Head of Internal Audit)

County Council Officers:- Gary Fielding (Corporate Director – Strategic Resources), Anton Hodge (Assistant Director – Strategic Resources), Rachel Kemp (Head of Integration, Access to Services, Care and Support, Health and Adult Services Directorate), Michael Rudd (Head of Housing Market Development, Commissioning Unit, Health and Adult Services Directorate), Simon Wright (Senior Emergency Planning Officer, Policy, Partnerships and Communities Unit, Central Services Directorate) and Ruth Gladstone (Principal Democratic Services Officer)

Apologies for absence:-

Apologies for absence were received from County Councillors David Hugill and Geoff Webber.

Copies of all documents considered are in the Minute Book

140. Minutes

Resolved -

That the Minutes of the meeting held on 22 July 2019, having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record, subject to the correction of the spelling of Paul Thomson's name in the last paragraph of the preamble of Minute 136.

141. Declarations of Interest

There were no declarations of interest.

142. Public Questions or Statements

There were no questions or statements from members of the public.

143. Progress on Issues Raised by the Committee

Considered -

The joint report of the Corporate Director - Strategic Resources and the Assistant Chief Executive (Legal and Democratic Services) which advised of progress made on issues which the Committee had raised at previous meetings, and Treasury Management matters that had arisen since the Committee's last meeting.

During discussion, it was confirmed that work was being undertaken to assess the implications of the Government's announcement that interest rates on all new loans from the Public Works Loan Board (PWLB) would be increased by 1%. However, the County Council had no current plans to borrow funds from the PWLB.

Resolved -

That the report be noted.

144. Annual Audit Letter on the 2018/19 External Audit

Considered -

The Annual Audit Letter 2018/19 which summarised the outcome from the external audit work carried out by Deloitte in respect of the year ended 31 March 2019.

During discussion, Paul Thomson (Deloitte) apologised that the Annual Audit Letter showed an incorrect postal address for North Yorkshire County Council. He advised that the Letter had been corrected and that the corrected version would be published on the website of Public Sector Audit Appointments Ltd (PSAA).

Resolved -

That the Annual Audit Letter 2018/19, as amended to show the correct postal address for the County Council, be noted.

145. Annual Report of the Audit Committee

Considered -

The report of the Chair of the Audit Committee which invited consideration of the draft of the Committee's Annual Report for the year ended 30 September 2019, prior to submission of the Annual Report to the forthcoming meeting of the County Council.

During discussion, it was suggested and agreed that the word "material" should be inserted after the words "had not identified any" within the second sentence of the paragraph numbered 3 on the second page of the report.

Resolved -

(a) That the report be noted.

(b) That the draft Annual Report of the Audit Committee, as appended to the report, be approved for submission to the County Council, subject to the word "material" being inserted after the words "had not identified any" within the second sentence of the paragraph numbered 3 on the second page of the report.

146. Progress on 2019/20 Internal Audit Plan

Considered -

The report of the Head of Internal Audit which:- advised of progress made in delivering the 2019/20 Internal Audit Plan and developments likely to impact on the Plan throughout the remainder of the financial year; and sought approval for changes to the Audit Charter.

During discussion, officers clarified the following:-

- The Head of Internal Audit had no particular concerns regarding the areas to which days were now being allocated.
- Information Governance, to which an additional 45 audit days were being allocated, remained a high risk area for the County Council. However, it was currently unknown whether an increase in days for Information Governance would be needed in future years.
- Most of the audits were being postponed to the following year, rather than being cancelled. Such postponements were considered appropriate due, in most cases, to other internal work being undertaken within the service area.
- The Head of Internal Audit was confident that there were no areas where Veritau did not follow the updated CIPFA Statement on the Role of the Head of Internal Audit.

Members asked for further training to be arranged for them in respect of counter-fraud.

Resolved -

- (a) That the progress made in delivering the 2019/20 Internal Audit programme of work, and the variations agreed by the client officer, be noted.
- (b) That the proposed changes to the Internal Audit Charter be approved.
- (c) That the updated CIPFA Statement on the Role of the Head of Internal Audit be noted.
- (d) That further training be arranged for Committee Members in respect of counter-fraud.

147. Health and Adult Services Directorate - Internal Audit Work and Internal Control Matters

Considered -

- The report of the Head of Internal Audit which advised of the internal audit work performed during the year ended 31 August 2019 in respect of the Health and Adult Services Directorate.
- The report of the Corporate Director - Health and Adult Services which outlined some of the key service risks and governance developments within the Directorate and provided details of the updated Risk Register for the Health and Adult Services Directorate.

During discussion, Members recognised the budget pressures on Adult Social Care and the role which the County Council could play in the care market.

Resolved -

- (a) That it be noted that the Committee, having considered the report of the Head of Internal Audit, is satisfied that the internal control environment operating in the Health and Adult Services Directorate is both adequate and effective.
- (b) That the updated Risk Register for the Health and Adult Services Directorate be noted.

148. Internal Audit Report on Information Technology, Corporate Themes and Contracts

Considered -

The report of the Head of Internal Audit which advised of the internal audit work performed during the year ended 31 August 2019 in respect of information technology, corporate themes, and contracts.

During discussion, officers clarified the following:-

- An annual report concerning procurement and contract management was scheduled to be submitted to the Committee's meeting in June 2020, at which time further consideration could be given to the area of contractor due diligence.
- There was no inconsistency between the audit opinion of "Limited Assurance" relating to contractor due diligence, and the content of the Committee's Annual Report, because the two issues related to different aspects of County Council activity.

Resolved -

That it be noted that the Committee, having considered the report of the Head of Internal Audit, is satisfied that the internal control environment operating in respect of information technology, corporate themes, and contract arrangements is both adequate and effective.

149. Business Continuity - Update Report

Considered -

The report of the Head of Resilience and Emergencies which provided an overview of the County Council's current business continuity arrangements and a continued assurance for the management of risk within Directorates and service areas.

During discussion, officers clarified that the County Council's Resilience and Emergencies Team worked to the County Council's Corporate Risk Register, rather than the Team having its own Risk Register.

Resolved -

That the recent challenging incidents which have been managed by County Council Directorates, overseen by the Business Continuity Champions and fully supported by the Resilience and Emergencies Team, together with the continued efforts of all service areas at North Yorkshire County Council to embed resilient practice, be noted.

150. Fees and Charges Strategy

Considered -

The report of the Corporate Director - Strategic Resources which sought comments on a proposed Fees and Charges Strategy which had been developed for North Yorkshire County Council.

The Corporate Director – Strategic Resources advised that Members could make comments on the proposed Strategy either during this meeting, or by writing or phoning him outside this meeting.

During discussion, Members commented that, at times when costs were being cut, it was necessary to look at income. The External Members of the Committee queried whether decisions on fees and charges were political, and whether different Directorates had different customer bases/markets. The Corporate Director – Strategic Resources responded that the proposed Strategy would not override policy, and that the aim of the Strategy was to require annual reviews of all fees and charges.

Resolved -

That the report, together with Members' comments made during the debate, be noted.

151. Audit Committee Work Programme

Considered -

The Committee's Programme which identified items of business scheduled to be considered at each of the Committee's forthcoming meetings.

Resolved -

- (a) That the Work Programme be noted.
- (b) That the dates of meetings of the Committee, to be held after May 2020, be included in the Work Programme once announced in November 2019.
- (c) That the Corporate Director – Strategic Resources, in consultation with the Head of Internal Audit, allocate training sessions to specific dates in respect of:-
(i) counter-fraud; (ii) Pension Governance; and (iii) Beyond 2020 including Property Rationalisation.

The meeting concluded at 2.50pm.
RAG/JR

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

20 December 2019

PROGRESS ON ISSUES RAISED BY THE COMMITTEE

**Joint Report of the Corporate Director – Strategic Resources
and the Assistant Chief Executive (Legal and Democratic Services)**

1.0 PURPOSE OF THE REPORT

1.1 To advise Members of

- (i) progress on issues which the Committee has raised at previous meetings
- (ii) other matters that have arisen since the last meeting and that relate to the work of the Committee

2.0 BACKGROUND

2.1 This report is submitted to each meeting listing the Committee's previous Resolutions and / or when it requested further information be submitted to future meetings. The table below represents the list of issues which were identified at previous Audit Committee meetings and which have not yet been resolved. The table also indicates where the issues are regarded as completed and will therefore not be carried forward to this agenda item at the next Audit Committee meeting.

Date	Minute number and subject	Audit Committee Resolution	Comment	Complete?
07.03.19	107 – Progress on Issues Raised by the Committee	That the Committee's Chairman, Vice-Chairman, Mr Nick Grubb and Mr David Portlock be appointed to comprise a group, facilitated by Max Thomas to:- Discuss how this Committee is functioning; seek feedback from others such as the CD –SR and External Audit; review the findings; submit any proposed changes to a future meeting of the Committee for decision, and Full Council if appropriate; and complete the CIPFA questionnaire with input from the CD – SR	In progress	X

Date	Minute number and subject	Audit Committee Resolution	Comment	Complete?
25.10.19	146 – Progress on 2019/20 Internal Audit Plan	That further training be arranged for Committee Members in respect of counter-fraud	This training has been arranged for 20 December 2019	✓
25.10.19	151 – Audit Committee Work Programme	That the dates of meetings of the Committee, to be held after May 2020, be included in the Work Programme once announced in November 2019.	These have now been added to the Work Programme	✓
25.10.19	151 – Audit Committee Work Programme	That the Corporate Director, Strategic Resources, in consultation with the Head of Internal Audit, allocate training sessions to specific dates in respect of:- (i) counter-fraud; (ii) Pension Governance; and (iii) Beyond 2020 including Property Rationalisation	These training sessions will be allocated specific dates.	x

3.0 TREASURY MANAGEMENT

- 3.1 The Bank of England's Monetary Policy Committee (MPC) voted to maintain Bank Rate at 0.75% when they met on 7 November 2019. However, the vote was 7-2, with two members voting to cut base rate to 0.5% immediately, due to concerns around weak global economic growth and the potential for Brexit uncertainties to become entrenched and so delay UK economic recovery.
- 3.2 Despite uncertainty relating to Brexit and the General Election, the Approved Lending List has remained largely static with very little change in terms of counterparties.

4.0 RECOMMENDATION

- 4.1 That the Committee considers whether any further follow-up action is required on any of the matters referred to in this report.

GARY FIELDING
Corporate Director – Strategic Resources

BARRY KHAN
Assistant Chief Executive
(Legal and Democratic Services)

County Hall
NORTHALLERTON

20 December 2019

Background Documents: Report to, and Minutes of, Audit Committee meetings held on 25 October

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

20 DECEMBER 2019

PROGRESS ON 2019/20 INTERNAL AUDIT PLAN

Report of the Head of Internal Audit

1.0 PURPOSE OF THE REPORT

- 1.1 To inform Members of the progress made to date in delivering the 2019/20 Internal Audit Plan and any developments likely to impact on the Plan throughout the remainder of the financial year.

2.0 BACKGROUND

- 2.1 Members approved the 2019/20 Audit Plan on the 21 June 2019. The total number of planned audit days for 2019/20 is 1,090 (plus 956 days for other work including counter fraud and information governance). The performance target for Veritau is to deliver 93% of the agreed Audit Plan.
- 2.2 This report provides details of how work on the 2019/20 Audit Plan is progressing.

3.0 INTERNAL AUDIT PLAN PROGRESS BY 30 NOVEMBER 2019

- 3.1 The internal audit performance targets for 2019/20 were set by the County Council's client officer. Progress against these performance targets, as at 30 November 2019, is detailed in **Appendix 1**.
- 3.2 Work is ongoing to complete the agreed programme of work. It is anticipated that the 93% target for the year will be exceeded by the end of April 2020 (the cut off point for 2019/20 audits). **Appendix 2** provides details of the final reports issued in the period. A further 9 audit reports have been issued but remain in draft. Fieldwork is currently underway with a number of other scheduled audits.

Contingency and Counter Fraud Work

- 3.3 Veritau continues to handle cases of suspected fraud or malpractice. Such assignments are carried out in response to issues raised by staff or members of the public via the Whistleblower Hotline, or as a result of management raising concerns. Since the start of the current financial year, 40 cases of suspected fraud or malpractice have been referred to Veritau for investigation. 11 of these are internal fraud cases, 21 relate to social care and 8 relate to external fraud, debt recovery, or abuse of the council's financial assistance scheme. A further 8 cases relate to applications for a school place. A number of these investigations are still ongoing.

Information Governance

- 3.4 Veritau's Information Governance Team (IGT) continues to handle a significant number of information requests submitted under the Freedom of Information and Data Protection Acts. The number of FOI requests received between 1 April 2019 and 30 November 2019 is 688 compared with 824 requests received during the corresponding period in 2018/19. The County Council is currently below the performance response target of 95% for 2019/20 with approximately 75% of requests so far being answered within the statutory 20 day deadline. Actions continue to be taken to improve performance in this area. The IGT also coordinates the County Council's subject access requests (SARs) and has received 213 such requests between 1 April 2019 and 30 November 2019 compared to 150 requests received during the corresponding period in 2018/19.
- 3.5 Veritau acts as the County Council's Data Protection Officer following the implementation of the General Data Protection Regulation (GDPR) and Data Protection Act 2018. The IGT provides advice and support to the County Council on data protection matters, reviews compliance with the legislation and liaises with the regulator, the Information Commissioner's Office (ICO). Other work includes preparing data sharing agreements, recording data security incidents and investigating serious data security incidents. Veritau auditors have also continued to undertake a programme of unannounced compliance visits to County Council premises in order to assess staff awareness of the need to secure personal and confidential information.

Variations to the 2019/20 Audit Plan

- 3.6 All proposed variations to the agreed Audit Plan arising as the result of emerging issues and/or requests from directorates are subject to a Change Control process. Where the variation exceeds 5 days then the change must be authorised by the client officer. Any significant variations will then be communicated to the Audit Committee for information. There have been no variations in the period since the last Committee meeting.

Follow Up of Agreed Actions

- 3.7 Veritau follows up all agreed actions on a regular basis, taking account of the timescales previously agreed with management for implementation. An escalation process is in place for when agreed actions are not implemented or where management fail to provide adequate information to enable an assessment to be made. At this stage in the year, there are no actions which have needed to be escalated. On the basis of the follow up work undertaken during the year to date, the Head of Internal Audit is satisfied with the progress that has been made by management to implement previously agreed actions necessary to address identified control weaknesses.

4.0 **RECOMMENDATION**

Members are asked to note the progress made in delivering the 2019/20 Internal Audit programme of work.

Report prepared and presented by Max Thomas, Head of Internal Audit

Max Thomas
Head of Internal Audit
Veritau Limited
County Hall
Northallerton

5 December 2019

Background Documents: Relevant audit reports kept by Veritau at 50 South Parade, Northallerton

PROGRESS AGAINST 2019/20 PERFORMANCE TARGETS (AS AT 30/11/2019)

Indicator	Milestone	Position at 30/11/2019
To deliver 93% of the agreed Internal Audit Plan	93% by 30/4/20	33.73%
To achieve a positive customer satisfaction rating of 95%	95% by 31/3/20	100%
To ensure 95% of Priority 1 recommendations made are agreed	95% by 31/3/20	0%
To ensure at least 30% of investigations completed result in a positive outcome (management action, sanction or prosecution)	30% by 31/3/20	40.38%
To identify actual fraud savings of £50k (quantifiable savings)	£50k by 31/3/20	£48,248
To ensure 95% of FOI requests are answered within the Statutory deadline of 20 working days	95% by 31/3/19	75.30%

FINAL 2019/20 AUDIT REPORTS ISSUED TO DATE

Audit Area	Directorate	Overall Opinion
Information security compliance – Legal Services	Corporate	Substantial assurance
Information security compliance – White Rose House	Corporate	Limited assurance
Information security compliance – 8 St Helen’s Close, Morton on Swale	Corporate	High assurance
Payroll / HR	Corporate	High assurance
Customer Complaints and Compliments	Corporate	Substantial assurance
Concessionary Fares	BES	High assurance
Visits to Care Providers - Botton Village / Avalon	HAS	No opinion
Visits to Care Providers - Castle Grange (Scarborough)	HAS	No opinion
Developing Stronger Families - June claim	CYPS	No opinion
Developing Stronger Families - September claim	CYPS	No opinion

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

20 DECEMBER 2019

INTERNAL AUDIT WORK FOR THE BUSINESS AND ENVIRONMENTAL SERVICES
DIRECTORATE

Report of the Head of Internal Audit

1.0 PURPOSE OF THE REPORT

- 1.1 To inform Members of the **internal audit work** performed during the year ended 30 November 2019 for the Business and Environmental Services (BES) directorate.

2.0 BACKGROUND

- 2.1 The Audit Committee is required to assess the quality and effectiveness of the corporate governance arrangements operating within the County Council. In relation to the BES directorate, the Committee receives assurance through the work of internal audit (as provided by Veritau) as well as receiving a copy of the latest directorate risk register.
- 2.2 This agenda item is considered in two parts. This first report considers the work carried out by Veritau and is presented by the Head of Internal Audit. The second part is presented by the Corporate Director and considers the risks relevant to the directorate and the actions being taken to manage those risks.

3.0 WORK DONE DURING THE YEAR ENDED 30 NOVEMBER 2019

- 3.1 Details of the work undertaken for the directorate and the outcomes of these audits are provided in **Appendix 1**.
- 3.2 Veritau has also been involved in carrying out a number of other assignments for the directorate. This work has included;
- Providing ad-hoc advice on various control issues
 - Auditing and certifying a number of grant returns such as the Local Transport Plan, the Local Growth Fund, the LEP Growth Hub and the Local Authority Bus Subsidy Grant. We review relevant supporting information to ensure expenditure has been incurred in accordance with the grant conditions;
 - Meeting with BES management and maintaining ongoing awareness and understanding of key risk areas such as the long term waste service and the highways maintenance contract
 - Considering matters raised via 'whistleblowing' procedures

- 3.3 As with previous audit reports, an overall opinion has been given for each of the specific systems or areas under review. The opinion given has been based on an assessment of the risks associated with any weaknesses in control identified. Where weaknesses are identified then remedial actions will be agreed with management. Each agreed action has been given a priority ranking. The opinions and priority rankings used by Veritau are detailed in **Appendix 2**. Where the audits undertaken focused on value for money or the review of specific risks as requested by management then no audit opinion will be given. The work completed for the directorate and the opinions given following each audit contribute to the annual report and opinion of the Head of Internal Audit.
- 3.4 It is important that agreed actions are formally followed up to ensure that they have been implemented. Veritau follow up all agreed actions on a regular basis, taking account of the timescales previously agreed with management for implementation. **On the basis of the follow up work undertaken during the year, the Head of Internal Audit is satisfied with the progress that has been made by management to implement previously agreed actions necessary to address identified control weaknesses.**
- 3.5 The programme of audit work is risk based. Areas that are assessed as well controlled or low risk are reviewed less often with audit work instead focused on the areas of highest risk. Veritau's auditors work closely with directorate senior managers to address any areas of concern.

4.0 **RECOMMENDATION**

- 4.1 That Members consider the information provided in this report and determine whether they are satisfied that the internal control environment operating in the Business and Environment Services Directorate is both adequate and effective.

MAX THOMAS
Director and Head of Internal Audit

Veritau
County Hall
Northallerton

4 December 2019

BACKGROUND DOCUMENTS

Relevant audit reports kept by Veritau at 50 South Parade, Northallerton.

Report prepared by Stuart Cutts, Internal Audit Manager, Veritau and presented by Max Thomas, Head of Internal Audit and Director of Veritau.

FINAL AUDIT REPORTS ISSUED IN THE YEAR ENDED 30 NOVEMBER 2019

System/Area	Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
A	Highways Maintenance Contract	Substantial Assurance	December 2018	<p>There was an ongoing and appropriate plan to manage the value of work under the contract. Key risks in this area were being effectively managed.</p> <p>Work was also ongoing in deciding the future options for the delivery of highways and transportation works. A project plan had been developed, with a decision for the future provision of services planned for April 2019, subject to approval by Executive and Full Council</p> <p>Some information had been provided by Ringway but this was insufficient to allow a full cost comparison. Some further data cleansing was required to enable a suitable comparison to be made.</p>	<p>One P3 action was agreed.</p> <p>Responsible Officer: Corporate Director - Business and Environmental Services.</p> <p>Officers obtained all the information required to undertake the cost comparison. Senior management met with the Ringway regional director to discuss the price comparisons further.</p>
B	Local Enterprise Partnership	High Assurance	March 2019	<p>Good progress had been made with the government audit areas for development. Four recommendations had been fully completed. Work on the remaining two recommendations was also progressing.</p> <p>Risks to the future success of the LEP are primarily overseen by the Assistant Director. Meetings are held every 6 months with NYCC to review and update the risk register.</p>	<p>One P3 action was agreed.</p> <p>Responsible Officer: Assistant Director, Economic Partnership Unit.</p> <p>The Economic Partnership Unit's corporate risk register will be added to the existing LEP Assurance Update</p>

System/Area		Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
			<ul style="list-style-type: none"> the government audit recommendations had been implemented; risks to the continuing success of the LEP had been effectively identified, documented and managed; The LEPs/Council's arrangements around the Annual Conversation Governance and Assurance Statement were robust. 		<p>Risks are being identified and reported at monthly senior management meetings. However, the registers were not currently communicated to LEP board members.</p> <p>The 2018/19 Annual Conversation review was due to take place after our audit fieldwork. We found the evidence to be put forward to be thorough and relevant. The assurance statement was also due to be discussed and approved at the Annual Conversation. The only risk (which was outside the control of the LEP) was in regards to the short deadlines between receiving the guidelines and the annual conversation meetings.</p>	<p>(Governance and Finance) report. This is a standing agenda item at each LEP board meeting.</p> <p>Generally, the risk register will be circulated for information only. However, members may become more should any of the risks increase significantly.</p>
C	Kex Gill Realignment Scheme	High Assurance	<p>The authority has embarked on a project to re-route the A59 at Kex Gill. We reviewed the project to ensure:</p> <ul style="list-style-type: none"> robust controls were in place for the management of the project; projects risks and appropriate planned mitigating actions had been identified and documented; relevant project risks were being appropriately managed. 	March 2019	<p>Clear governance arrangements were in place for the project. Roles and responsibilities of all individuals involved within the project were clearly defined.</p> <p>For the second stage of the project, there is a clear plan of actions. For the initial stage expenditure did not exceed the budget.</p> <p>Project risks have been identified during risk workshops which took place before major project milestones had been reached. We saw how risks had changed as the project progressed, and appropriate mitigating actions were in place for these risks.</p> <p>At the time of audit fieldwork the key project risk related to future funding. The project</p>	There were no actions from this audit.

System/Area	Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
				team had submitted a business case to the Department for Transport (DfT) for approval and were awaiting further feedback.	
D	Allerton Waste Recycling Park (AWRP) - NYCC Processes	Substantial Assurance	April 2019	<p>At the time of the audit fieldwork the Management Information System (MIS) was not fully live so information was not necessarily fully up to date or accurate. This meant that the invoice checking process was both time and resource intensive to complete. However, improvements were being made to the process and these issues were being addressed.</p> <p>The working relationships between CYC and NYCC were not yet formalised. The councils were using inter-authority agreements and a Joint Waste Management Agreement signed in 2011. These agreements need to be updated to reflect the operational AWRP contract and proposed joint service arrangements. The councils do meet on a monthly basis to discuss contractual issues so any significant problems should be resolved.</p> <p>A dispute process does exist and the arrangements are satisfactory if, and when, needed.</p>	<p>One P2 and two P3 actions were agreed.</p> <p>Responsible Officer: Corporate Director - Business and Environmental Services.</p> <p>The MIS was signed off by management in early 2019. Further work to do included:</p> <ul style="list-style-type: none"> • arrange team training • resolve historic queries from the monthly reporting process • use the MIS built in query log • resolve data discrepancies • recalculate performance deduction points upon signing the Commercial Agreement • ensure monthly data is input into annual forecasting models for the financial Annual Reconciliation process

System/Area	Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
					NYCC intend to finalise and sign a new shared services agreement. The new Head of Service is to develop the service delivery model using agreed parameters from the shared services agreement.
E	Reasonable Assurance	<p>All Highways Maintenance Contract capital schemes £10k+ are categorised as NEC 3 Option D schemes. The annual value of these schemes is approximately £19m. Option D schemes are subject to a 'pain and gain' clause included to encourage improved productivity and efficiency.</p> <p>The purpose of this audit was to provide assurance that:</p> <ul style="list-style-type: none"> any delay in financial information being provided by Ringway is challenged in accordance with the contract; financial performance information is used to effectively manage 'pain and gain' schemes; contract processes, such as Project Management Instructions (PMIs) and Compensation Events (CEs) 	June 2019	<p>For every option D scheme, relevant documents should be submitted within 20 weeks. However, we found that a significant number of documents were absent. The delay in information being provided has prevented the final values from being confirmed and signed off for both 2016/17 and 2017/18. Therefore no payment has been made.</p> <p>Ringway's Managing Quantity Surveyor explained there were difficulties with their accounting system that prevented them submitting information within 20 weeks.</p> <p>Where delays in financial information were occurring the issue was not being raised with Ringway in a timely manner. Similarly NYCC had stopped regularly sharing information with Ringway.</p> <p>Due to the lack of timely financial performance information available, the Commercial Services Team was unable to pro-actively monitor the current annual value of pain/gain.</p>	<p>Four P3 actions were agreed.</p> <p>Responsible Officer: Assistant Director, Highways and Transportation.</p> <p>The Commercial Services team will produce a monthly spreadsheet that proactively tracks the Option D schemes and requests the information required to calculate the pain/gain in advance of the deadline date within the agreed 20 week settlement period.</p> <p>All schemes within the financial year are to be identified and added to the list in programme delivery order to help ensure the spreadsheet is managed correctly.</p>

System/Area	Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
		are recorded accurately and agreed in a timely manner.		We tested a sample of 10 schemes from 2017/18 that had forms, cost reports and contract systems completed. All 10 schemes had cost reports available. However we found that some forms were not authorised by both Ringway and NYCC.	We will arrange for Project Managers to attach emails to the Contract Management System (CMS) to show their agreements/communications in relation to the signing off of documentation relating to final targets and cost + fee values.
F	Concessionary Fares	High Assurance	October 2019	<p>There is an effective process in place for establishing operator's rate per concession, through the DfT calculator.</p> <p>The Senior Strategy and Performance Officer (SSPO) is responsible for calculating the RPC for each operator using the DfT calculator. All information is received on a manually completed spreadsheet from operators and 'sense checked' by the SSPO. The information is not checked against the ticket information obtained from the operators. The operators are then informed of the calculated RPC.</p> <p>Reliance is placed on the DfT guidance for carrying out the calculation. There are no internal procedures in place for staff to follow. The process is complex and good knowledge of the process is essential. Currently, the SSPO is the only officer competing the calculation. This lack of resilience represents a risk.</p>	<p>Two P3 actions were agreed.</p> <p>Responsible Officer: Assistant Director, Highways and Transportation.</p> <p>Some additional written procedures are to be prepared covering what to do in respect of operators supplying and not supplying local operational data.</p> <p>A number of operators do not use electronic ticket machines, so there will continue to be a reliance on spreadsheet data. For those operators that do operate electronic ticket machines we will establish a process for reimbursement based on the HOPs journey data.</p>

System/Area	Audit Opinion	Areas Reviewed	Date Finalised	Comments	Action Taken
			correct amounts were paid to bus operators.	We reviewed the payment information to ensure the appropriate RPC was applied to the reimbursement to the operator. No issues were noted. A reconciliation between the monitoring spreadsheet and Oracle is carried out half yearly to ensure the correct payments are being made. The monthly payments are monitored to identify any anomalies, or any unusual peaks.	

Audit Opinions and Priorities for Actions

Audit Opinions	
<p>Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit.</p> <p>Our overall audit opinion is based on 5 grades of opinion, as set out below.</p>	
Opinion	Assessment of internal control
High Assurance	Overall, very good management of risk. An effective control environment appears to be in operation.
Substantial Assurance	Overall, good management of risk with few weaknesses identified. An effective control environment is in operation but there is scope for further improvement in the areas identified.
Reasonable Assurance	Overall, satisfactory management of risk with a number of weaknesses identified. An acceptable control environment is in operation but there are a number of improvements that could be made.
Limited Assurance	Overall, poor management of risk with significant control weaknesses in key areas and major improvements required before an effective control environment will be in operation.
No Assurance	Overall, there is a fundamental failure in control and risks are not being effectively managed. A number of key areas require substantial improvement to protect the system from error and abuse.

Priorities for Actions	
Priority 1	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Priority 2	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Priority 3	The system objectives are not exposed to significant risk, but the issue merits attention by management.

North Yorkshire County Council

Audit Committee

20 December 2019

Internal Control Matters for the Business and Environmental Services Directorate

Report of the Corporate Director – Business & Environmental Services

1.0 Purpose of the report

- 1.1 To provide an update to members of progress against the areas for improvement identified through internal procedures.
- 1.2 To provide details of the latest Risk Register for the Business and Environmental Services (BES) Directorate.

2.0 Background

- 2.1 The Audit Committee is required to assess the quality and effectiveness of the corporate governance arrangements operating within the County Council. In relation to the BES Directorate, the Committee receives assurance through the work of internal audit (detailed in a separate report to the Committee) and the Directorate Risk Register.
- 2.2 To ensure governance and internal control matters are monitored on an on-going basis the BES Management Team receives and considers a report on a quarterly basis.

3.0 Directorate Update

- 3.1 The main areas of note for the Directorate are:
- I. Following the Council's decision to move the Highways & Transportation (H&T) operational delivery from an outsourced model to a 'Teckal' entity, the Directorate has now constructed the project team to implement this change. The existing contract is due to conclude in March 2021 and therefore the project is arranged to deliver against those time scales. Given this is a significant undertaking for the organisation and in order to ensure a successful transition, the project has a robust governance arrangement wrapped around it. The main features are:
 - a. Project Board – chaired by Corporate Director, BES, with representation from key functions including Legal, Finance, HR and the H&T service. The Board steers the project and acts as the main decision making body.
 - b. Project Team – chaired by Assistant Director, Resources, with representation from a wider set of stakeholders where all areas supporting the project have an input. The Team drives and delivers the project and generates the options appraisal for Board decision.
 - c. Work streams – below the Project Team are 5 work streams which consolidate all aspects of delivery (naturally with some overlap). These 5 streams are:
 - i. Staff engagement and communication
 - ii. Health & Safety and HR

- iii. Legal and contractual
 - iv. Operating model
 - v. Finance and technology
- II. York, North Yorkshire, East Riding (YNYER) and Hull, Directors of Development is a group which meets no less than five times a year to consider shared issues and opportunities relating to the wider economic and land use development across the sub-region. The Group consists of Local Authority Directors, including National Parks, Local Enterprise Partnership and Homes England. The group reports to the YNYER Chief Executives Group and through that to Local Government North Yorkshire and York Leaders Group.

This group has been allocated surplus funding from the 2019/20 West and North Yorkshire business rates pool pilot, amounting to an estimated £370k in the financial year. The group has identified a number of areas that would benefit from this funding, including – for example – investment into town master planning.

- III. Governance for the York, North Yorkshire and East Riding Local Enterprise Partnerships (YNYER LEP) continues to be reviewed, however given the firm stance by MHCLG/BEIS in respect of over lapping boundaries, the future arrangement needs to be considered and a swift conclusion reached. Over the preceding twelve month the LEP Board has reviewed a number of options regarding their future state, however have not yet concluded a preferred option. NYCC, as the accountable body, is working closely with them and Government to help manage both the transition to any future status and also any implications of a potential delay beyond Government's target date of April 2020.
- IV. Capital Programme, whilst this is identified separately within the Directorate Risk Register there are key items of note:
- a. There is a significant amount of uncertainty surrounding the future funding of highways capital works at a national level, so whilst NYCC are not unique in the issue, BES Directorate is taking proactive steps to help address it. Currently there is no visibility on any funding for the financial year 2021/22 or beyond. However through the Capital Projects Board, the Highways team have been asked to consider what types of schemes would be progressed if the funding is retained at a similar level to 2020/21 (forecast circa £50m); this is to ensure that if funding does come forward, there is no break in delivery.
 - b. Through oversight at Project Board level, the A59 Kex Gill Diversion project has currently been developed to business case stage. It is anticipated this will be approved late 2019 or early 2020 and that planning is to be determined Q1 2020. On that basis the scheme will begin construction Q2/Q3 2020 and is scheduled to be complete and open to traffic by Q3/Q4 2021.
 - c. A1 Junction 47 – all funding contributions have now been received by NYCC. Developer contribution of £1 million was secured in February 2019 to enable an enhanced LEP-plus scheme at Junction 47 A1(M) to go ahead. Tenders will be sought in December 2019 via the NYCC Civil Engineering Contractors Framework 2016 (CECF2106). The current programme for the works is to start on site in March 2020 with anticipated construction period of up to 12 months. The estimated scheme cost is £5.19m and the breakdown of the funding contribution is:
 - £2.47m - YNYER LEP/LGF
 - £1.16m – NYCC/NPIF

- £0.56m - Highways England Growth & Housing Fund
- £1.0m - Developer

It was agreed in October 2019 with DfT that the National Productivity Investment Fund (NPIF) grant can be carried over with a new funding deadline of 31st March 2021.

- V. In addition to the Tour de Yorkshire in May 2019, the UCI World Cycling Championships took place in Yorkshire between Saturday 21 and Sunday 29 September 2019.

Despite the weather conditions at the time and the need to alter the route at short notice, overall the event was deemed to be a success. However there is always an opportunity to learn and improve and as such a lessons learned exercise has been undertaken. This has culminated in a multi-agency debrief report which is planned to be discussed at the Yorkshire 2019 Board in December 2019, the Board includes representation from NYCC. Once the report is agreed it will be available to partner agencies, it is expected this will be complete by Q2 2020.

The process was facilitated by the Senior Resilience and Emergencies Officer from NYCC who is a qualified debriefer by the National College of Policing. The report aims to identify those lessons which could be utilised by future Yorkshire and National Events. It will also provide an overall view on how Y2019 performed against its own goals. And whilst the report will provide recommendations, it will be for specific agencies to consider how best to learn from the event.

4.0 Directorate Risk Register

- 4.1 The Directorate Risk Register (DRR) is produced initially from a review of risks at Service level, which are then aggregated via a sieving process to Directorate level. This end product similarly aggregates these Directorate level risks into the Corporate Risk Register.
- 4.2 The Risk Prioritisation System adopted to derive risk registers categorises risks as follows:
 Category 1 and 2 are high risk (RED)
 Category 3 and 4 are medium risk (AMBER)
 Category 5 is low risk (GREEN)

These categories are relative and not absolute assessments. The DRR represents the principal risks being managed in BES that may materially impact on the performance, financial and reputational outcomes of the Directorate.

- 4.3 The latest detailed DRR is shown at **Appendix A**. This shows a range of key risks and the risk reduction actions designed to minimise them together with a ranking of the risks both at the present time and after mitigating action.
- 4.4 A summary of the DRR is also attached at **Appendix B**. As well as providing a quick overview of the risks and their ranking, it also provides details of the change or movement in the ranking of the risk since the last review in the left hand column.
- 4.5 A review of the BES DRR took place at the end of September and was signed off by the Directorate Management Team. A further formal update review of the register will take place in Q4 of 2018/19.

- 4.6 One new risk has been added to the DRR since December 2018 (date of last progress report to the Committee). This relates to the Highways Teckal arrangements that are in progress. There is a separate risk register being developed solely for this key project to provide highways maintenance services throughout the county
- 4.7 All other risks have been updated and their overall ranking has remained the same, apart from the Statutory Duties risk that has reduced. The probability for this risk has been reduced from M to L as it is felt that the risk is under control but if it happened there would still be an impact.
Two risks have slightly changed as follows:
- i. Long Term Waste Service Strategy – this risk was updated to provide a focus on a single system for waste.
 - ii. Delivering Change – this risk has been updated to reflect Beyond 2020 as well as the present 2020 Programme.

5.0 Recommendations

5.1 That the Committee:

- i) Note the Directorate update salient points; and
- ii) Note the Directorate Risk Register for the Business & Environmental Services Directorate; and
- iii) Provide feedback and comments on the Directorate Risk Register and any other related internal control issues.

DAVID BOWE
Corporate Director – Business & Environmental Services

Report prepared by Michael Leah

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/174	Risk Title	7/174 - Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority				Risk Owner	CD BES	Manager	CD BES	
Description	Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on the growth and jobs across North Yorkshire.					Risk Group	Strategic	Risk Type	EPU 176/211		
Phase 2 - Current Assessment											
Current Control Measures		Devolution proposals submitted to Govt., LEP strategic economic plan in place; NYCC retains the Infrastructure Delivery Steering Group; NYCC wide co-ordination of development needs linked to District plans; local authorities are moving towards a joint committee & considering a combined authority; LA Director group in place; plan detailing powers and funding developed; consensus of Yorkshire local authorities on Devolution geography and opportunities;									
Probability	H	Objectives	H	Financial		Services	M	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/1968 - Develop a York/North Yorkshire proposition including a combined authority, in response to Govt. continuing to reject One Yorkshire						Chief Exec	Tue-31-Mar-20			
Reduction	7/1969 - Carry out consultation on a York/North Yorkshire proposition and following approval, submit to Parliament and obtain relevant Powers.						Chief Exec	Wed-31-Mar-21			
Reduction	13/533 - Continue to monitor the Devolution agenda and communication with stakeholders to maximise opportunities (ongoing); the greater Yorkshire geography is being used in some areas of growth work						BES AD GP&TS	Fri-31-Jul-20			
Reduction	176/280 - Gain political support both locally and nationally (ongoing)						Chief Exec	Fri-31-Jul-20			
Reduction	176/320 - Negotiate the economic barriers and opportunities which Devolution can take advantage of with Government including interim devolution deals (consensus of Yorkshire local authorities achieved, support from Govt Minister required)						CD BES	Fri-31-Jul-20			
Reduction	176/460 - Establish the geography on which to secure Devolution (consensus of Yorkshire local authorities achieved, support from Govt Minister required)						Chief Exec	Fri-31-Jul-20			
Reduction	176/469 - Develop detailed business cases for different geographies						Chief Exec	Fri-31-Jul-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	L	Financial		Services	L	Reputation	M	Category	4
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	176/544 - Consider a North Yorkshire deal								CD BES		

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/173	Risk Title	7/173 - Minerals and Waste Joint Plan				Risk Owner	CD BES	Manager	BES AD GP&TS	
Description	Failure to complete the examination process and then adopt the Minerals and Waste Joint Plan by the end of March 2020 as the basis for development control decision-making resulting in risk of legal challenge through judicial review, appeals with resulting financial and workload implications, adverse implications for the local economy, risk of National Government passing on European fines					Risk Group	Performance	Risk Type	GP&TS 13/31		
Phase 2 - Current Assessment											
Current Control Measures			Performance monitoring; awareness of new developments; resource monitoring; briefing of BESMT; delivery of in house sustainability appraisal work and appointment of consultants to support the work; memorandum of understanding to govern principles of joint working; Exec approval to move date; preferred options consultation completed; publication version of plan launched								
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	7/267 - Work closely with City of York Council and the North Yorks Moors National Park Authority on joint Minerals and Waste Local Plan					BES AD GP&TS	Tue-31-Mar-20				
Reduction	13/54 - Continue to review progress against milestones, review and update milestones as necessary					BES AD GP&TS	Tue-31-Mar-20				
Reduction	13/519 - Continue to keep budget priorities under review					BES AD GP&TS	Tue-31-Mar-20				
Reduction	13/523 - Continue to monitor new developments eg fracking, using planning officers society and peer groups					BES AD GP&TS	Tue-31-Mar-20				
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
								Action Manager			
Fallback Plan	13/553 - If plan is deemed to be unsound we would need to recommence the local plan work							BES AD GP&TS			

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/189	Risk Title	7/189 - Delivery of transport schemes within the LEP's Strategic Economic Plan					Risk Owner	CD BES	Manager	BES AD H&T
Description	Failure to deliver the programme of transport schemes within the LEP's Strategic Economic Plan results in reputational damage to the County Council and impacts upon the potential to secure funding for transport schemes in future rounds of the Local Growth Fund. There is a direct role for H&T to deliver the schemes promoted by the County Council and support the LEP in the Transport role, but also a supporting role to assist third party scheme promoters specifically the district councils.						Risk Group	Performance	Risk Type	Dir Only	
Phase 2 - Current Assessment											
Current Control Measures			Programme in place for delivery of County Council promoted schemes; support being provided to the third party scheme promoters; risk analysis for each scheme undertaken; effective engagement with LEP; Senior Transport Planning Officer (Transport projects) now in post to support the LEP and NYCC in delivery of SEP funded schemes; necessary local contributions secured for the schemes in the LEP programme that are being delivered (Mar 2019);								
Probability	M	Objectives	M	Financial	H	Services	L	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/318 - Continue to engage with the LEP and support them to manage risks associated with specific scheme programmes (ongoing)						CD BES	Wed-30-Sep-20			
Reduction	7/436 - Continue to ensure sufficient resource in H&T to effectively promote County Council schemes (ongoing)						BES AD H&T	Wed-30-Sep-20			
Reduction	9/538 - Complete review of the major schemes reserve list complete and agreed by Exec Members in June 2019						BES H&T HoNS	Wed-30-Sep-20			
Reduction	9/583 - Ensure NYCC identify appropriate sources of funding to provide at least a minimum of 15% local capital contribution to the scheme implementation costs; ongoing						BES AD H&T BES H&T HoNS	Tue-31-Mar-20			
Reduction	9/585 - Continue to work closely with WSP to ensure that resources match programme of transport schemes requirements (ongoing)						BES AD H&T	Tue-31-Mar-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	L	Reputation	H	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	7/537 - LEP to consider re-profiling Local Growth Fund programme									CD BES	

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/18	Risk Title	7/18 - Long Term Waste Service Strategy				Risk Owner	CD BES	Manager	BES AD TW&CS	
Description	Failure to further develop the long term waste service strategy (including total system efficiency, realisation of commercial opportunities through increasing recycling, reducing residual household waste, maximising potential through flexibility and reconfiguration to take advantage of opportunities through changes in market conditions, changes in waste composition and changes in consumer behaviour) following delivery of AWRP results in lost efficiencies, inflexibility, reputational damage, poor value for money and ineffectiveness of AWRP					Risk Group	Performance	Risk Type	W&CS 14/168		
Phase 2 - Current Assessment											
Current Control Measures			Waste Strategy in place; NYCC/CoY/Yorwaste working group in place; AWRP; consultants advising on systems; intelligence through networking; network of waste transfer stations; access to external advisors; Contract Management Manual/Register of Obligations; suite of monitoring documents in place; Project Board in place; monthly project team meetings; S106 and S278 delivery arrangements in place; network of Amey Cespa clients; monthly compliance monitoring check; regular review of key dates schedules / programme: agreed approach with districts; existing contracts in place; extensive modelling; agreement for Teckal; feasibility with consultants and modelling of opportunities of single system for waste and incentive for reduced residual waste bin capacity completed; Single System project identified as high priority (awaiting allocation of project manager); agreement on settlement of disputes relating to first contract year;								
Probability	M	Objectives	L	Financial	H	Services	L	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/373 - Complete feasibility with consultants and modelling of opportunities of single system for waste and incentive for reduced residual waste bin capacity						BES AD TW&CS	Wed-31-Oct-18	Thu-28-Feb-19		
Reduction	7/375 - Engage with Districts and partners to understand constraints and incentives for delivery of a single system for waste						BES AD TW&CS	Sun-31-Mar-19	Mon-31-Dec-18		
Reduction	7/376 - Develop and implement a business case for a single system for waste						BES AD TW&CS	Tue-31-Dec-19			
Reduction	7/377 - Review Government resources and waste strategy including food waste collections (published Dec 2018), take part in initial consultation (May 2019) and further consultations and assess impacts and opportunities						BES AD TW&CS	Tue-31-Mar-20			
Reduction	7/419 - Continually review appetite and benefit for separate food waste collections (work with Yorwaste) (ongoing)						BES AD TW&CS	Tue-31-Mar-20			
Reduction	14/501 - Develop a more collaborative culture to ensure openness and transparency in decision making and continuous improvement						BES TW&CS HoS(W)	Fri-31-Jul-20			
Reduction	14/1961 - Discuss and resolve specific performance failures and disputes such as level of insurance saving to be shared, vehicle delays at AWRP						BES TW&CS HoS(W)	Fri-31-Jul-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	M	Category	3

Risk Register: **Month 0 (August 2019) – detailed**

Next Review due: **February 2020**

Report Date: **10th September 2019 (pw)**

Phase 5 - Fallback Plan		Action Manager
Fallback Plan	7/73 - Rely short term on recently procured arrangements, review strategy, media management	CD BES

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/247	Risk Title	7/247 - Highways Teckal				Risk Owner	CD BES	Manager	BES AD H&T	
Description	Failure to have arrangements for Highways Maintenance Services in place by end of current contracts (April 2021) resulting in service disruption, increased costs and criticism Risk Owner/Manager/Group all the same as this risk					Risk Group	Contracts	Risk Type	H&T 9/246		
Phase 2 - Current Assessment											
Current Control Measures			Governance arrangements in place; Initial project meeting held; project manager appointed; project governance established via project board, team and workstream groups: detailed scoping completed; draft blueprint documents in place; initial operating model completed;								
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/440 - Further review and develop the company's operating model (v2 Oct 2019)						BES Teckal Proj Off	Thu-31-Dec-20			
Reduction	9/233 - Continue to complete the draft blueprint documents with services, and further develop the detailed project plans						BES Teckal Proj Off	Tue-31-Dec-19			
Reduction	9/235 - Maintain effective engagement with RIS at Board level to ensure continued positive working relationships						CD BES	Fri-31-Jul-20			
Reduction	9/244 - Start to engage with RIS at detailed level – joint staff comms, detailed information 'ask'						BES AD H&T	Fri-31-Jul-20			
Reduction	9/560 - Develop detailed definition of new company's operating model						BES Teckal Proj Off	Sat-31-Aug-19	Sat-31-Aug-19		
Reduction	9/561 - Put support service arrangements in place between NYCC and new company						BES Teckal Proj Off	Sat-31-Oct-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	H	Services	H	Reputation	H	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	9/559 - Consider extension of existing arrangements or retender								BES H&T HoCS		

Risk Register: **Month 0 (August 2019) – detailed**
 Next Review due: **February 2020**
 Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/232	Risk Title	7/232 - Growth				Risk Owner	CD BES	Manager	CSD AD SR (ML) BES AD GP&TS	
Description	Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage, and within the context and partnership arrangements of two-tier local government structure and wider macro-economic policy and processes. This results in an inability to attract, retain and grow businesses, increase the house building rate, raise living standards and increase spending power.					Risk Group	Strategic	Risk Type	GP&TS 13/233		
Phase 2 - Current Assessment											
Current Control Measures			Direct contribution and support, including through provision of accountable body function, to the YNER Local Enterprise Partnership; maintenance of an Economic Growth Function within BES; Proactive engagement in LGNYYP partnership working including through Directors of Development, Chief Housing Officers, Heads of Planning and Economic Development Officer Groups; Lead role in enabling and further developing YNERH Spatial Framework; Lead role in supporting and developing the NYCC Growth Plan Steering Group and sub-ordinate arrangements; Lead role in initiating and developing the NYCC Economic Growth Plan and annual Delivery Framework (endorsed by Executive); Work to monitor and support opportunities to secure alternative governance arrangements including a Devolution deal with Government; collaborative working arrangements with District Councils in place								
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/1502 - Carry out an annual review of progress of the NYCC Economic Growth and Delivery Plan and Action Plan (ongoing) (Need to work towards a new NYCC Economic Growth and Delivery Plan being in place by 31 Mar 20)						BES AD GP&TS BES GP&TS HoSP&EG	Tue-31-Mar-20			
Reduction	7/1958 - Embed enhanced collaborative working arrangements with District Councils (annual review of progress) - ongoing						BES AD GP&TS	Fri-31-Jul-20			
Reduction	7/1959 - Complete YNERH Spatial Framework SDZ Long Term Development Statements to enable effective long-term planning and investment of infrastructure for growth; approval by LGNYYP Board / Leaders for publication and open release of the framework						BES AD GP&TS	Fri-31-Jul-20			
Reduction	7/1960 - Maintain good working relationship with the LEP (ongoing)						CD BES	Fri-31-Jul-20			
Reduction	7/1961 - Understand and investigate any impacts of Brexit and ensure opportunities are taken						BES AD EPU CD BES	Thu-31-Oct-19			
Reduction	13/532 - Deliver strategic natural capital investment via the Local Nature Partnership (LEP/LNP lead) Taking forward phase 2 implementation options with partners (Local Authorities, DEFRA, Universities, Business) with link to 25 Year Environment plan and government policy changes (planning net gain, agriculture ELMs, Local Industrial Strategy & Natural Capital plans).						BES AD GP&TS	Tue-31-Mar-20			
Reduction	13/533 - Continue to monitor the Devolution agenda and communication with stakeholders to maximise opportunities (ongoing); the greater Yorkshire geography is being used in some areas of growth work						BES AD GP&TS	Fri-31-Jul-20			

Risk Register: **Month 0 (August 2019) – detailed**
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Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	H	Services	H	Reputation	L	Category	3
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	7/551 - Review and revise existing arrangements for sustainable economic growth									BES AD GP&TS	

Risk Register: **Month 0 (August 2019) – detailed**Next Review due: **February 2020**Report Date: **10th September 2019 (pw)**

Phase 1 - Identification											
Risk Number	7/244	Risk Title	7/244 - Cycling Events in North Yorkshire				Risk Owner	CD BES	Manager	BES AD H&T	
Description	Failure to effectively deliver the County Council's responsibilities associated with hosting the Tour de Yorkshire and UCI World Championship in North Yorkshire in 2019 &/or significant adverse publicity around hosting these events resulting in potential reputational, legal and financial impact upon the County Council.					Risk Group	Performance	Risk Type	H&T 9/196		
Phase 2 - Current Assessment											
Current Control Measures			NYCC currently awaiting discussions with WtY to understand the full extent and implications of the TdY2019; NYCC are aware that discussions are ongoing between WtY and local authorities to identify host towns for the TdY 2019 race; Initial route planning will take place summer 2018, with details on the route to be confirmed for internal planning purposes in Autumn 2018; Report will be taken to Exec in summer 2018 to seek funding for TdY 2019; Draft UCI World Cycling Championship in 2019 (Y2019) routes have been developed; NYCC officers are working closely with Yorkshire 2019 Ltd on traffic management and communications								
Probability	L	Objectives	L	Financial	M	Services	M	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/177 - Continue to work & engage with all key partners across the race routes (inc National Park(s), Forestry) once route details are known						CD BES	Mon-30-Sep-19			
Reduction	7/420 - Ensure detailed engagement with Welcome to Yorkshire around how they will operate following the resignation of the Chief Executive. Carry out preparations through 'what if' scenarios.						CD BES	Mon-30-Sep-19			
Reduction	9/39 - NYCC Risk management & Delivery Group established for Y2019 to update throughout the planning process (including Comms unit)						BES AD H&T	Mon-30-Sep-19			
Reduction	9/192 - Working closely with Partner Authorities to assist with event planning and coordinate TM planning						BES AD H&T	Mon-30-Sep-19			
Reduction	9/357 - Route preparation including implementing required highway works, and working with statutory undertakers to ensure all utilities apparatus is not causing any risks to the race						BES AD H&T	Mon-30-Sep-19			
Reduction	9/361 - Develop the project plan for tasks to be completed to deliver the event & the associated delivery of the key tasks in accordance with the project plan involving NYCC Directorates as appropriate;						BES AD H&T	Mon-30-Sep-19			
Reduction	9/491 - Work closely with Y2019 Ltd as event organisers to develop an extensive publicity campaign to warn residents / road users / businesses of potential disruption across the race route, particularly in and around the Harrogate area;						BES AD H&T Comms Unit	Mon-30-Sep-19			
Reduction	9/492 - Coordinate the development of an appropriate C3 structure in partnership with other key event delivery organisations for Yorkshire 2019 (Y2019 Ltd, WtY, NY Police, District Councils and other Cat 1 & 2 responders); C3 in place for both and subject to ongoing review and update						CSD AD P&P	Mon-30-Sep-19			
Reduction	9/552 - Working closely with Y2019 Ltd as event organiser to coordinate TM requirements across the event						BES AD H&T	Mon-30-Sep-19			
Reduction	9/553 - Put in place appropriate staffing arrangements to fulfil the necessary roles for the safe and successful delivery of Y2019						BES AD H&T	Mon-30-Sep-19			
Reduction	9/558 - Work closely alongside Police and other emergency services to assist in planning to help to mitigate against any potential security threats etc						BES AD H&T	Mon-30-Sep-19			

Risk Register: **Month 0 (August 2019) – detailed**
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Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	M	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	9/101 - Manage media issues however the current control measures and risk reduction actions are considered adequate to ensure the County Council delivers its responsibilities in relation to Yorkshire 2019									Action Manager	CD BES

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Phase 1 - Identification											
Risk Number	7/23	Risk Title	7/23 - Major Incident and Business Continuity					Risk Owner	CD BES	Manager	CD BES
Description	Failure to plan and respond effectively to a major incident without major impact upon routine service performance or longer term impact on service delivery. Such incidents may include animal health disease, flooding and other severe weather, Service breakdown including critical resources (eg property, people and ICT) resulting in the need to deliver additional service in order to ensure effective enforcement/containment and minimal disruption to critical services.						Risk Group	Performance	Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			Leadership of BES Management Team and appropriate lead manager; work with other appropriate partners; appropriate major incident and emergency plans; inspection monitoring programmes; systems resilience & back up arrangements in place; business impact analyses and incident management plans are in place; disaster recovery plan; NYCC silver command exercises carried out; implementation of solutions based upon lessons learned from previous major incidents; BES RMG; biannual multi-agency training events; command structure / information flow for business continuity incidents finalised; emergency protocol agreed with Kier and Yorwaste in the event that sites to be open on days when they may otherwise be shut; critical infrastructure network in line with HMEP recommendations in place;								
Probability	L	Objectives	M	Financial	H	Services	H	Reputation	M	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/374 - Ensure that resources are flexible enough to manage unexpected major and business continuity incidents (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/444 - Continually review procedures plans and training in relation to major incidents (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/446 - Annual live or desk top exercises to test plans (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/1970 - Consider recent significant natural events relative to the impact of climate change						BES MT	Wed-30-Sep-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	H	Reputation	M	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	7/75 - Review the plans, media management, advise Members								CD BES		

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Phase 1 - Identification											
Risk Number	7/7	Risk Title	7/7 - Statutory Duties				Risk Owner	CD BES	Manager	CD BES	
Description	Failure to carry out statutory duties or meet statutory deadlines (e.g. Health and Safety, safe guarding, information governance, prevention of waste pollution, planning responsibilities, statutory property related issues, driver/vehicle guidance) resulting in Corporate Manslaughter, increased cost/claims, fines/prosecution and criticism.					Risk Group	Performance	Risk Type	Dir Only		
Phase 2 - Current Assessment											
Current Control Measures			Service plans; service unit risk registers; allocation of responsibility training for key staff; prof. bodies incl. HSE; CPD; CDM; RMWGs; routine inspecs; contractor selection proc; NYCC legal and safety advisers; annual contractor training; Designated Directorate H&S Manager and support; regular item on BESMT; SMTs; Partnership and contract managers group; Directorate H&S working group; risk assessment; incident feedback; previous risk assessment on most sites; landfill gas perimeter controls; annual review of all sites (monitoring results); regular monitoring; use of consultants; agency staff; documented proc; record of dec. actions; audit and review of proc/compliance, inspecs, actions and training; corporate policies, procedures and champions; services to employ sufficient numbers of professionally trained/qualified officers; prioritisation matrix for resources in place in Trad Stds; training relating to new CDM Regulations for construction work; Incident plan for former landfill sites;								
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/458 - Ensure that the current H&S procedures are audited to ensure compliance (ongoing)						CD BES	Wed-30-Sep-20			
Reduction	7/459 - Review the H&S arrangements of Contractors and Partner organisations (ongoing)						BES AD H&T	Wed-30-Sep-20			
Reduction	7/461 - To monitor all service plans and risk registers and ensure they are checked on a regular basis (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/462 - Review incidents and claims statistics including large losses and develop action plans (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/483 - Continue to source and deliver relevant contracts to TS work to mitigate against budget cuts and maintain service resilience (ongoing)						BES AD GP&TS	Wed-30-Sep-20			
Reduction	7/1965 - Work closely with the Data Governance team in Strategic Support to review and update local information governance arrangements (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/1966 - Continue to implement awareness raising campaign for information governance (ongoing)						BES MT	Wed-30-Sep-20			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3

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Phase 5 - Fallback Plan		Action Manager
Fallback Plan	7/78 - Implement appropriate management and contingency plans; review priorities and reprioritise service delivery; media management	CD BES

Risk Register: Month 0 (August 2019) – detailed

Next Review due: February 2020

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Phase 1 - Identification											
Risk Number	7/24	Risk Title	7/24 - Capital Programme				Risk Owner	CD BES	Manager	CSD AD SR (ML)	
Description	Ineffective management of capital programme including major schemes, LEP, LTP, Waste Management and projects resulting in significant overspend/underspend, weak use of resources, loss of reputation and performance.					Risk Group	Financial	Risk Type	H&T 9/195		
Phase 2 - Current Assessment											
Current Control Measures		Project managers/sponsors for each project; regular financial and programme and project monitoring and reporting of the programmes; operational and strategic management/monitoring, project planning; Gateway training carried out; Capital Projects Board in operation; sub group of Capital Projects Board in place when required, risk assessment carried out in Capital Plan reports feed into MTFs; Finance Officer support to Capital; risk register for major schemes and schemes in the capital works programme; project board for major schemes; Infrastructure Delivery Working Group; Development Management Working Group; appropriate actions and contingencies dependent on risks established and reported to BESMT on a regular basis; risk assessment for major schemes; additional and effective highways capital programme resource / manager to drive delivery of the programme implemented; Specific and ongoing training in financial and project management for key BES staff; PIR of major projects; Schemes portal, assurance framework for LEP in place, contract management health measurement and reporting in place; 3 year rolling works programme with realistic targets and alignment of internal and external delivery resources; assurance framework for LEP in place; Improved strategic capital programme monitoring with reporting through hNY tripartite arrangement and H&T service management/reporting structures; specific monitoring of separately funded capital works, eg Pothole Action Fund, LGF and GWB funded works; substantial assurance audit report; LEAN review of Capital Programme completed; timely reports to Capital Projects Board and Exec members covering key service and financial risk items; introduction of efficiency measures for capital projects and programmes where relevant;									
Probability	L	Objectives	M	Financial	H	Services	M	Reputation	M	Category	3
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	9/352 - Continue project management and gateway approach for relevant capital schemes; gateway aspect now managed centrally					BES AD H&T	Fri-31-Jul-20				
Reduction	9/353 - Establish appropriate actions and contingencies dependent upon risks including recommendations from LEAN review					BES AD H&T	Fri-31-Jul-20				
Reduction	9/354 - PIR of major projects and lessons learnt/implemented					BES AD H&T	Fri-31-Jul-20				
Reduction	9/355 - Ensure appropriate level of resources is allocated in line with budget expectations					BES AD H&T	Fri-31-Jul-20				
Reduction	9/472 - Ensure effective engagement with Veritau and production of a suitable post audit response.					BES H&T HoNS	Fri-31-Jul-20				
Reduction	9/551 - hNY Improvement Action Plan: End to end External Review of the Capital Programme; review of the Capital Programme is on-going to date a Highway Maintenance Investment Tool has been approved; Scheme identification element of the review will be in place for Capital Works Programme schemes for 2020/21; external review was completed in Nov 2018, the 20/21 capital works programme was developed using HMIT					BES H&T HoNS	Fri-31-Jul-20				
Reduction	11/182 - Continue to assess current capabilities and put in place any requirements necessary to enable effective delivery of capital projects (ongoing)					CSD AD SR (ML)	Tue-31-Mar-20				

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Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	M	Reputation	M	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	7/72 - Review of all resources and procedures; media management; member engagement; intervention by Capital Projects Board									Action Manager	CD BES

Risk Register: Month 0 (August 2019) – detailed

Next Review due: February 2020

Report Date: 10th September 2019 (pw)

Phase 1 - Identification											
Risk Number	7/175	Risk Title	7/175 - Delivering Change Programmes within BES					Risk Owner	CD BES	Manager	BES MT
Description	Failure to embed a strong change culture, processes and supporting capacity to deliver ongoing programmes of change in BES e.g. the BES Beyond 2020 Change Programme. This could result in adverse impact on service delivery, inability to fully meet current and future financial requirements, internal and external criticism.						Risk Group	Change Mgt	Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			CD BES Staff Updates; reps on 2020NY workstreams; key messages; cascade of 2020NY vision and approach; monitoring of impacts on performance; monitoring of impacts on savings target; 2020 North Yorkshire plans submitted; Savings programme developed; political agreement and acknowledgement of risks; Performance Management framework development; BES Transformation Steering Group; Performance Management Review in BES; BES MT engagement on budget and 2020NY approach; Transformation and VFM; 4 year programme; ICT Strategy; staff survey outcomes partly implemented; Programme transformational rather than savings focussed; ideas generation and review process established; new programme of changes identified and agreed;								
Probability	L	Objectives	H	Financial	H	Services	H	Reputation	M	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	7/93 - Continue communication/engagement arrangements with staff on 2020 North Yorkshire programme (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/260 - Continue to monitor impacts of BES 2020 Programme (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/265 - Promote and embed cultural change (including Modern Council) through key messages, KITs, manager and non-manager objectives, regular reporting on progress of change projects and impacts of daily operations on delivery of aims (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/450 - Continue to provide the support to innovate new ideas to cover the shortfall in expected savings in line with the budget report, and the anticipated MTFS gap (ongoing)						CSD AD SR (ML)	Wed-30-Sep-20			
Reduction	7/451 - Ensure appropriate allocation of resources to deliver change projects (ongoing)						CSD AD SR (ML)	Wed-30-Sep-20			
Reduction	7/568 - Ensure that the emergence of Beyond 2020 is taken into account						BES MT	Tue-31-Mar-20			
Reduction	7/1504 - Continue with implementation of the action plan developed following the staff survey (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/1962 - Continually challenge process and procedure for 2020 to ensure relevant bureaucracy and impact on service delivery is constrained (ongoing)						BES MT	Wed-30-Sep-20			
Reduction	7/1967 - Integrate the BEST process into service planning						CSD AD SR (ML) CSD SR HoS&P	Sun-31-Mar-19	Sun-31-Mar-19		
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	L	Category	5

Risk Register: **Month 0 (August 2019) – detailed**
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Phase 5 - Fallback Plan		Action Manager
Fallback Plan	7/539 - Review approach to the delivery of change programmes and cultural change management within BES	CD BES

Risk Register: Month 0 (August 2019) – summary

Next Review due: February 2020

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Identity			Person		Classification												Fallback Plan			
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR		Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		
◀	7/174 - Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority	Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on the growth and jobs across North Yorkshire.	CD BES	CD BES	H	H	H	M	H	1	7	31/03/2020	M	L	M	L	M	4	Y	CD BES
◀	7/173 - Minerals and Waste Joint Plan	Failure to complete the examination process and then adopt the Minerals and Waste Joint Plan by the end of March 2020 as the basis for development control decision-making resulting in risk of legal challenge through judicial review, appeals with resulting financial and workload implications, adverse implications for the local economy, risk of National Government passing on European fines	CD BES	BES AD GP&TS	M	M	M	M	H	2	4	31/03/2020	L	M	M	M	H	3	Y	BES AD GP&TS
◀	7/189 - Delivery of transport schemes within the LEP's Strategic Economic Plan	Failure to deliver the programme of transport schemes within the LEP's Strategic Economic Plan results in reputational damage to the County Council and impacts upon the potential to secure funding for transport schemes in future rounds of the Local Growth Fund. There is a direct role for H&T to deliver the schemes promoted by the County Council and support the LEP in the Transport role, but also a supporting role to assist third party scheme promoters specifically the district councils.	CD BES	BES AD H&T	M	M	H	L	H	2	5	31/03/2020	L	M	H	L	H	3	Y	CD BES
◀	7/18 - Long Term Waste Service Strategy	Failure to further develop the long term waste service strategy (including total system efficiency, realisation of commercial opportunities through increasing recycling, reducing residual household waste, maximising potential through flexibility and reconfiguration to take advantage of opportunities through changes in market conditions, changes in waste composition and changes in consumer behaviour) following delivery of AWRP results in lost efficiencies, inflexibility, reputational damage, poor value for money and ineffectiveness of AWRP	CD BES	BES AD TW&CS	M	L	H	L	H	2	7	31/12/2019	L	L	H	L	M	3	Y	CD BES
- new -	7/247 - Highways Teckal	Failure to have arrangements for Highways Maintenance Services in place by end of current contracts (April 2021) resulting in service disruption, increased costs and criticism Risk Owner/Manager/Group all the same as this risk	CD BES	BES AD H&T	M	H	H	H	H	2	6	31/12/2019	L	H	H	H	H	3	Y	BES H&T HoCS


Risk Register: **Month 0 (August 2019) – summary**
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Identity			Person		Classification												Fallback Plan			
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR		Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		
◀	7/232 - Growth	Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage, and within the context and partnership arrangements of two-tier local government structure and wider macro-economic policy and processes. This results in an inability to attract, retain and grow businesses, increase the house building rate, raise living standards and increase spending power.	CD BES	CSD AD SR (ML) BES AD GP&TS	M	H	H	H	M	2	7	31/10/2019	L	H	H	H	L	3	Y	BES AD GP&TS
◀	7/244 - Cycling Events in North Yorkshire	Failure to effectively deliver the County Council's responsibilities associated with hosting the Tour de Yorkshire and UCI World Championship in North Yorkshire in 2019 &/or significant adverse publicity around hosting these events resulting in potential reputational, legal and financial impact upon the County Council.	CD BES	BES AD H&T	L	L	M	M	H	3	11	30/09/2019	L	L	M	M	H	3	Y	CD BES
◀	7/23 - Major Incident and Business Continuity	Failure to plan and respond effectively to a major incident without major impact upon routine service performance or longer term impact on service delivery. Such incidents may include animal health disease, flooding and other severe weather, Service breakdown including critical resources (eg property, people and ICT) resulting in the need to deliver additional service in order to ensure effective enforcement/containment and minimal disruption to critical services.	CD BES	CD BES	L	M	H	H	M	3	4	30/09/2020	L	M	H	H	M	3	Y	CD BES
▼	7/7 - Statutory Duties	Failure to carry out statutory duties or meet statutory deadlines (e.g. Health and Safety, safe guarding, information governance, prevention of waste pollution, planning responsibilities, statutory property related issues, driver/vehicle guidance) resulting in Corporate Manslaughter, increased cost/claims, fines/prosecution and criticism.	CD BES	CD BES	L	M	M	M	H	3	7	30/09/2020	L	M	M	M	H	3	Y	CD BES
◀	7/24 - Capital Programme	Ineffective management of capital programme including major schemes, LEP, LTP, Waste Management and projects resulting in significant overspend/underspend, weak use of resources, loss of reputation and performance.	CD BES	CSD AD SR (ML)	L	M	H	M	M	3	7	31/03/2020	L	M	H	M	M	3	Y	CD BES

Risk Register: **Month 0 (August 2019) – summary**

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Identity			Person		Classification												Fallback Plan			
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR		Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		
	7/175 - Delivering Change Programmes within BES	Failure to embed a strong change culture, processes and supporting capacity to deliver ongoing programmes of change in BES e.g. the BES Beyond 2020 Change Programme. This could result in adverse impact on service delivery, inability to fully meet current and future financial requirements, internal and external criticism.	CD BES	BES MT	L	H	H	H	M	3	9	31/03/2020	L	M	M	M	L	5	Y	CD BES

Key	
	Risk Ranking has worsened since last review.
	Risk Ranking has improved since last review
	Risk Ranking is same as last review
- new -	New or significantly altered risk

AUDIT COMMITTEE

20 December 2019

RISK MANAGEMENT – PROGRESS REPORT**Report of the Corporate Director – Strategic Resources****1.0 PURPOSE OF THE REPORT**

- 1.1 To receive details of the updated Corporate Risk Register.
- 1.2 To note progress on other Risk Management related matters

2.0 BACKGROUND

- 2.1 According to the Terms of Reference of the Audit Committee, its role in risk management is:
 - (i) to assess the effectiveness of the authority's risk management arrangements and
 - (ii) to review progress on the implementation of risk management throughout the authority.
- 2.2 Following a recommendation by this Committee, the Leader and Chief Executive of the County Council formally approved a revised Corporate Risk Management Policy earlier this year with a provision that it will be reviewed and updated every three years.
- 2.3 Regular reports to this Committee therefore cover the implementation of the Policy and associated Strategy as well as other related risk management matters in order to fulfill this role.

3.0 CORPORATE RISK REGISTER

- 3.1 The Corporate Risk Register (CRR) is fully reviewed every year and updated by the Chief Executive and Management Board in October/November. A six monthly review is also carried out in March/May.
- 3.3 Since the last report to this Committee in December 2018, 2 reviews and updates of the Corporate Risk Register have been carried out. There have been changes made and particularly at the six monthly review in April – see attached at **Appendix A**. The updates involved reviewing the risks, risk controls, risk reductions and risk rankings that had been identified for each of the risks and making amendments to the Register where necessary.
At the annual review in November, we also reviewed and revised the corporate financial impact thresholds/risk appetite of the Council. In the present financial

climate and Council's landscape of activities it seemed appropriate to increase them. The financial thresholds/risk appetite have/has changed as follows:

	Previously		Current
Low	up to £500,000	→	up to £2m
Medium	up to £2.5m	→	up to £5m
High	over £2.5 m	→	over £5m

3.3 The significant amendments that were made to the Register since December 2018 are as follows:

New risks

- Schools Funding Challenges – this risk was added to the register in April as a result of the funding pressures facing schools, although this risk dovetails with the overall Funding Challenges risk for the Council. It is worth noting that the ranking has decreased at the review in November as the financial impact for the Council is now considered Medium.

Deleted risks

- Schools Organisation and Funding – this risk has been retained at Directorate level, and the emphasis at corporate level is on the funding challenges for schools.

Significantly Changed Risks

- None.....although the Committee may wish to note the following:
 - The Information Governance risk has increased its 2nd ranking to 2 due to an increase in the impacts to High, as it is considered necessary to move the probability to High because breaches continue to occur.
 - The Transformation Programme risk is moving into the Beyond 2020 stage with transformational themes and business cases of Assess and Decide; Resilience and Wellbeing; Modern Council + and Environment being developed.

The rankings of all the remaining risks stayed the same (as shown on the summary in the left hand column of **Appendix A**). Please see the table at the bottom of **Appendix A** for an explanation of the left hand column.

3.4 To assist Members interpret **Appendix A**

- Risks are identified by Management Board during a prep meeting and further discussion
- Each risk has then to be ranked based on the following:
 - existing risk controls in place
 - probability of the risk occurring (based on existing controls)
 - impact of the risk occurring (based on existing controls)
 - further risk controls which may reduce current probability or impact
- The prioritisation system follows a fairly traditional risk evaluation approach in that the **probability** and **severity** of risks is measured using High, Medium and Low categories

➤ However, to facilitate the assessment of the severity of each risk this is done in relation to 4 distinct **impact areas**:-

- failure to meet key **service objectives** and standards – reflecting current service plans
- **financial** impact
- **service** delivery
- loss of image or **reputation**

As each risk is ranked with reference to current controls and then future controls, the risk prioritisation system can compute a “score” in the range of 1 to 5

- 1 and 2 being a ‘red’ risk
- 3 and 4 being an ‘amber’ risk and
- 5 being a ‘green’ risk

One of the key things to look for in the Register is the movement of the score (described as Classification on the summary in **Appendix A**) as between the ‘Pre’ (i.e. present stage) and ‘Post’ (i.e. after risk mitigations are in place). For certain risks, however, this does not change as the risk mitigations cannot prevent the risk from happening but can address/reduce its impact.

4.0 LINKS BETWEEN CORPORATE AND DIRECTORATE RISK REGISTERS

4.1 As indicated previously, the Corporate Risk Register is the culmination of the identification of key significant risks that are identified at Directorate and Service levels. For information and out of interest, an exercise is carried out to identify the links between Directorate Risk Registers and the Corporate Risk Register. Please find attached a diagram showing these links at **Appendix B**.

5.0 ADDITIONAL RISK PRIORITISATION EXERCISES

5.1 As well as the bi-annual update of Corporate, Directorate and Service risk registers, additional workshops are also carried out to develop risk registers for specific areas of activity in the County Council. At this time these include:

- UCI Cycling World Championships - the hosting of the prestigious championships centred on Harrogate in September was supported by regular risk workshops throughout the planning period. Key risks identified were communication and engagement with local residents and businesses, preparation and management of the race route and ensuring that essential council services continued to be provided throughout the event.
- Highways Teckal - support was provided to the project management team in developing the risk management arrangements for this key development involving the setting up of a Teckal company to provide highways maintenance services throughout the county. Key risks identified were timescales to ensure the services would be ready in time for the ending of the existing contract, communication with internal and partner staff, TUPE issues and project budget.
- Harrogate Care Village - a risk register was developed to be included in the business case for building a facility for dementia patients in partnership with

Tees Esk Wear Valley NHS Trust. Initial risks included access to appropriately skilled internal resources, considerations of staffing arrangements for the facility given local care labour market issues and ensuring effective partnership working with the NHS Trust.

6.0 RISK MANAGEMENT BENCHMARKING EXERCISE

6.1 The Council took part in a risk management benchmarking exercise this year. The comparison was made with 5 other similar Benchmarking Club members. This exercise has been designed as a performance improvement tool and its purpose is to help to raise the standards of risk management within an organisation. The model used breaks down risk management activity into seven strands:

- A. Leadership and management
- B. Policy and strategy
- C. People
- D. Partnerships and shared resources
- E. Processes
- F. Risk handling and assurance
- G. Outcomes and delivery

6.2 The results can be interpreted as the basis of evidence and assurance of the standard of risk management that the Council has reached, along with a comparison with others within the public sector.

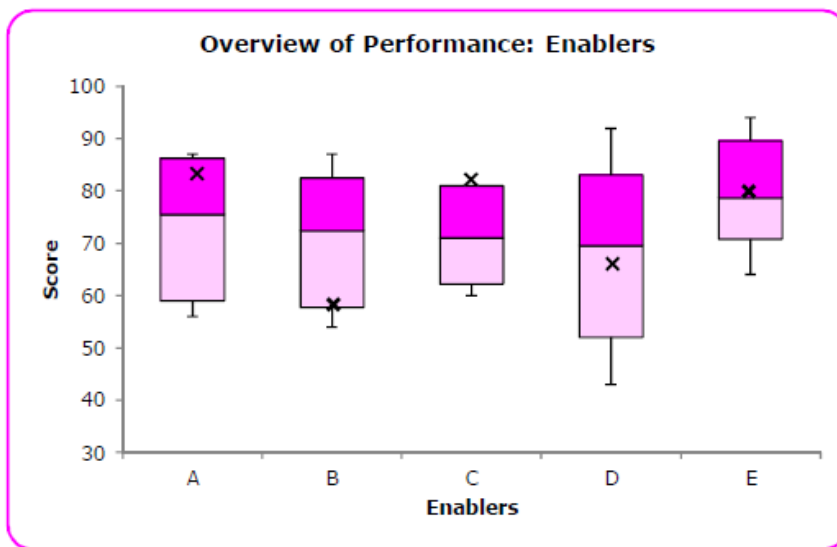
The different maturity bands are Awareness, Happening, Working, Embedded & Integrated and Driving. A summary of the results for the Council is as follows:

Enablers		Awareness	Happening	Working	Embedded & Integrated	Driving
Leadership & Management		Awareness	Happening	Working	Embedded & Integrated	Driving
Policy & Strategy		Awareness	Happening	Working	Embedded & Integrated	Driving
People		Awareness	Happening	Working	Embedded & Integrated	Driving
Partnerships & Shared Resources		Awareness	Happening	Working	Embedded & Integrated	Driving
Processes		Awareness	Happening	Working	Embedded & Integrated	Driving
Results		Awareness	Happening	Working	Embedded & Integrated	Driving
Risk Handling & Assurance		Awareness	Happening	Working	Embedded & Integrated	Driving
Outcomes & Delivery		Awareness	Happening	Working	Embedded & Integrated	Driving

The Council's only lower scoring strand at 59% compared to other Councils is in Policy and Strategy. This related primarily to not referencing the Council's risk appetite in both the Policy and Strategy. However in practice we do refer to risk appetite and use the thresholds as described in **paragraph 3.4** above.

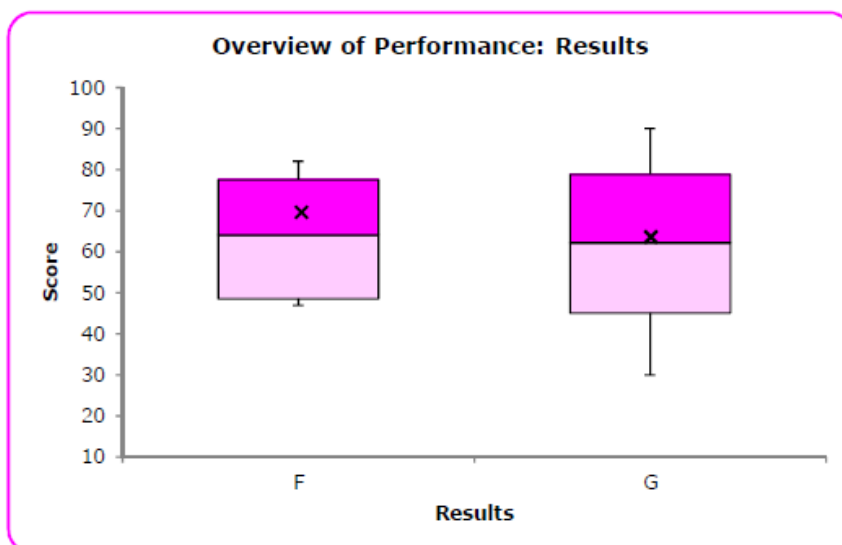
Management Board agree the corporate risk appetite/thresholds each year as part of their major risk review exercise. Each Directorate is then able to set their risk appetite/thresholds up to but not exceeding the Corporate cap. Services within each Directorate are able to set their own risk appetite/thresholds up to but not exceeding their Directorate cap. This enables Directorates and Services to decide appropriate and proportionate boundaries for risk taking, whilst also ensuring that Services are clear that managed risk taking is an acceptable part of service delivery and are encouraged to not be over cautious. In order to improve in the Policy and Strategy strand in future, we will make particular reference to risk appetite.

- 6.3 For information the graphs below portray a general overview of performance for Enablers and Results for the Council, compared with the other 5 members of the Benchmarking Club. The graphs show the minimum score, lower quarter, average, upper quarter and maximum score. The Council's position is marked with a black "x".



Level Guide:

Awareness	<20%
Happening	20 - 45%
Working	45 - 70%
Embedded & Integrated	70 - 85%
Driving	85%+



7.0 RISK MANAGEMENT AWARD

7.1 Finally, the Council submitted an entry for the Operational Risk award as part of the ALARM International Risk Awards this year.

The Operational Risk Award recognises innovative management of operational risk including risks that affect an organisation's day-to-day service delivery, those that impact on efficiency, health and safety, governance, insurable risk and effective business continuity.

Our entry was based upon the Transformation Programme which made the key decision to put risk at the heart of its endeavours. As we know...the Council has delivered a significant cultural change and made significant savings over the past five years, all whilst protecting the provision of essential front line services.

The esteemed ALARM Risk Awards are highly regarded as a measure of excellence in the management of risk and insurance in the public service and community organisations. The Awards are an invaluable opportunity for recognition; and in this particular case for North Yorkshire County Council.

7.0 RECOMMENDATIONS

That the Committee:

- (i) notes the updated Corporate Risk Register (**Appendix A**).
- (ii) notes the position on other Risk Management related matters

GARY FIELDING

Corporate Director – Strategic Resources

County Hall, Northallerton

December 2019

Author of report: Fiona Sowerby, Corporate Risk and Insurance Manager
Tel 01609 532400

Corporate Risk Register

Appendix A

Risk Register: **month 0 (November 2019) – summary**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Change	Risk Title	Identity Risk Description	Person		Classification												Fallback Plan			
			Risk Owner	Risk Manager	Pre					RR		Post					FBPlan	Action Manager		
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv			Rep	Cat
◀▶	20/235 - Brexit Arrangements	The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.	Chief Exec	All Mgt Board	H	H	H	H	M	1	24	31/01/2020	H	H	H	H	M	1	Y	Chief Exec
▲	20/187 - Information Governance	Ineffective information governance arrangements lead to unacceptable levels of unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies resulting in loss of reputation, poor decision making, fine, etc	Chief Exec	CD SR	H	M	M	M	H	1	9	31/12/2019	H	L	M	L	M	2	Y	CD SR
◀▶	20/207 - Transformation Programme	Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts	Chief Exec	CD SR	H	H	H	H	H	1	14	31/01/2020	M	H	H	H	H	2	Y	All Mgt Board
◀▶	20/1 - Funding Challenges	Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade resulting in legal challenge, unbalanced budget and public dissatisfaction	Chief Exec	CD SR	H	H	H	H	H	1	9	31/01/2020	M	H	H	M	M	2	Y	All Mgt Board
◀▶	20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market	Major failure of provider/key results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention. The impact could include loss of trust in the Care Market, increased budgetary implications and issues of service user safety.	Chief Exec	CD HAS	H	M	H	M	H	1	15	30/04/2020	H	M	M	M	M	2	Y	CD HAS
◀▶	20/236 - Opportunities for Devolution and Growth in North Yorkshire	Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage, resulting in reduced investment and impact on the growth and jobs, inability to attract, retain and grow businesses and raise living standards across North Yorkshire	Chief Exec	CD BES	H	M	H	H	H	1	13	31/03/2020	M	M	M	M	M	4	Y	CD BES Chief Exec
▼	20/239 - Schools Funding Challenges	Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools; poor financial management or failure to act in a timely manner by governors/head teachers DfE impose further restrictions on LA financial freedoms, results in potential accumulated deficits. Lack of investment in special provision such as special schools results in potential increased costs.	Chief Exec	CD CYPS	H	M	M	H	H	1	10	31/12/2019	M	M	M	M	M	4	Y	CD CYPS
◀▶	20/47 - Partnership and Integration with Health	Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact	Chief Exec	CD HAS	M	M	H	M	M	2	17	31/01/2020	M	M	H	M	M	2	Y	CD HAS


Corporate Risk Register

Appendix A

Risk Register: **month 0 (November 2019) – summary**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Identity			Person		Classification											Fallback Plan				
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR	Next Action	Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs		Prob	Obj	Fin	Serv	Rep	Cat		
		on the customer experience and the possibility of fragmented care and poor outcomes																		
	20/189 - Safeguarding Arrangements	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.	Chief Exec	CD HAS CD CYPS	M	H	M	M	H	2	16	31/03/2020	L	H	M	M	H	3	Y	CD CYPS CD HAS

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/235	Risk Title	20/235 - Brexit Arrangements			Risk Owner	Chief Exec	Manager	All Mgt Board		
Description	The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.			Risk Group	Strategic	Risk Type					
Phase 2 - Current Assessment											
Current Control Measures											
<p>Guidance on how to prepare for Brexit issued on specific areas such as trade and procurement, and funding programmes by the Government; NYLRF; regular LRF sitreps returns to MHCLG; regular sitreps from council to MHCLG (collated regionally), business continuity plans in place; review by LRF of reasonable worst case scenarios</p> <p>Workforce - LGA submission on care sector recruitment put forward; no change in employment law; confirmation that EU citizens can work in the UK until Dec 2020 with wrap around reassurance and support for applications for settled status being provided by NYCC;</p> <p>LEP - guarantee of continued funding agreed for projects before Brexit including rural development; domestic legislation to preserve EU law in relation to farm payment to be put in place;</p> <p>State Aid - current approvals for state aid will continue to apply and such acceptances by the European Commission will remain valid and will be transposed into UK law.</p> <p>Public Health - domestic legislation to preserve EU law in relation to labelling tobacco products and e cigarettes local policies with partners to continue delivery in place;</p> <p>Procurement – Many of the processes and procedures will remain the same, but with the Minister for the Cabinet Office replacing current EU reporting/governance. The requirement for fair, open and transparent competition will remain so no favoured nations and use of 'local' may not be widened. A strategy sub theme group on Brexit in place; contract variation gateway in place for contracts over certain values;</p> <p>Trading Standards - Continue to monitor new and amended legislation and identify changes with significant impact for business or consumers; continue to review relevant technical notices and begin to develop new advice or procedures as required. Staff attending BEIS, DEFRA and MHCLG briefing sessions across the range of their statutory duties. Sharing BEIS business readiness information (https://euexitbusiness.campaign.gov.uk/) via social media channels.</p> <p>Environmental Standards - domestic legislation to preserve EU law in relation to environmental standards (Environment Bill) to be put in place; contractors encouraged to consider Brexit risks and seek mitigation; light touch enforcement for food and animal products;</p> <p>Data Protection – Data Protection Act including GDPR; NYCC data held on UK servers</p> <p>Catering – change menus to suit availability of food; maintain frozen food stock;</p> <p>Customer Contact Centre – multi agency partnership working in place and embedded for major incidents including the contact centre;</p> <p>RET – full 24 hour rota cover in place;</p> <p>Adult Social Care – work ongoing with providers to ensure mutual support is in place;</p> <p>EU Settlement Scheme – Registration Service support applicants without access to Android phone</p>											
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	M	Category	I
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/250 - Workforce: Monitor the potential impact on recruitment including the care sector in particular and put together an appropriate action plan if required					CSD ACE BS	Fri-31-Jan-20				
Reduction	20/400 - Business support funding programmes – monitor likely changes and ensure that changes are well communicated					CD BES	Fri-31-Jan-20				
Reduction	20/405 - Farming support funding programmes – monitor likely changes and ensure that changes are well communicated					CD BES	Fri-31-Jan-20				

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Reduction	20/454 - State Aid: Monitor details of future trading relationships, and understand the local implications of any guidance provided relating to State Aid. Act upon guidance issued by the Competition and Markets Authority when more detail is provided on the new regulatory function and how State Aid rules will be enforced.	CSD ACE LDS	Fri-31-Jan-20	
Reduction	20/461 - Public Health: Continue to maintain the same high standards in promoting and protecting the health of the public. Continue to monitor variations post Brexit and put local arrangements in place.	CD HAS	Fri-31-Jan-20	
Reduction	20/465 - Procurement: Monitor the potential impact on public procurement regulations and action any changes to law and NYCC process as they occur. Links made with Cabinet Office EU/International Procurement Policy Team. Put in place additional contract variation scrutiny for lower value contracts.	CD SR	Fri-31-Jan-20	
Reduction	20/467 - Trading Standards: Develop generic and specialist business advice packages to complement existing business advice strategy. Liaise with Citizens Advice Consumer Service (CACS) to determine their contingency plans and make any necessary adjustments to the NYCC/CACS protocol. Review whether changes are required to the trading standards tasking filter and matrix and report to BES Executive Members. Review animal disease plans and amend as necessary.	CD BES	Fri-31-Jan-20	
Reduction	20/470 - Environmental Standards and Waste: continue to keep a watching brief, through attendance at relevant groups and receiving updates and briefings. Monitor the progression of the Environment Bill, assess the impact when enacted and put together an action plan for approval by Management Board. Monitor cross border waste movements and tariffs and put together an action plan for local arrangements. Work with Yorwaste on waste issues and carry out scenario planning.	CD BES	Fri-31-Jan-20	
Reduction	20/472 - Data Protection: Put controls in place for data transferred into and out of the UK. Review current cloud service contract and ensure controls are in place to ensure data is held in the UK. Monitor changes to the legal framework governing transfers of personal data. Monitor for EU decision to share data from the EU. Carry out changes to NYCC's privacy notice and contracts dependent on what deal is made.	CD SR	Fri-31-Jan-20	
Reduction	20/478 - Guidance on Brexit – continue to receive notification on emerging guidance on areas affecting Local Government, review impact on the Council and report regularly on this to Management Board.	CSD AD PPC	Fri-31-Jan-20	
Reduction	20/480 - Take part in engagements arranged by and with the DExEU and MHCLG through the County Councils Network, review impact on the Council and report regularly on this to Management Board.	CSD AD PPC	Fri-31-Jan-20	
Reduction	20/730 - Work as part of North Yorkshire Local Resilience Forum to ensure that civil contingencies issues are identified, evaluated and appropriate planning undertaken.	CSD AD PPC	Fri-31-Jan-20	
Reduction	20/737 - Catering - Evaluate capacity for frozen food storage. Discuss availability of food with suppliers (HAS).	CD SR	Fri-31-Jan-20	
Reduction	20/738 - Customer Contact Centre - explore ability to increase capacity if needed and put plans in place	CSD SR AD T&C CSD SR CSCM	Fri-31-Jan-20	
Reduction	20/739 - Communications – ensure contingency plans for sufficient capacity, and plans are in place for a daily rota across the county and district councils	CSD HoC LRF Comms Group	Fri-31-Jan-20	
Reduction	20/740 - Human resources – ensure manager and staff cover/availability. Provide advice to WFH where appropriate (fuel shortage). Monitor potential knock on effect on workforce due to increase in wages to mitigate against EU citizens leaving	All Mgt Board	Fri-31-Jan-20	
Reduction	20/741 - Resources – monitor availability of fuel, ensure Ringways maintaining contractually required stocks and ideally more, and investigate potential for storage	BES AD H&T	Fri-31-Jan-20	
Reduction	20/742 - Adult Social Care – carry out mapping of staff/skills across the county to ensure safety of people. Monitor availability of medicines.	CD HAS	Fri-31-Jan-20	
Reduction	20/743 - Highways – Monitor availability and cost increase of vehicles and vehicle parts	CD BES	Fri-31-Jan-20	

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Reduction	20/744 - BES strategic planning/heritage – obtain clarity around the loss of ESF and how its replacement will work	CD BES	Fri-31-Jan-20								
Reduction	20/745 - Council Wide – discuss contingency plans and ensure robustness	All Mgt Board	Fri-31-Jan-20								
Reduction	20/746 - Communications with Members	Chief Exec	Fri-31-Jan-20								
Reduction	20/747 - Continue to work with District Councils to gather intelligence around businesses particularly exposed to risk		Fri-31-Jan-20								
Reduction	20/1190 - EU Settlement Scheme – Registration Service to support applicants without access to Android phone	CSD PPC GM RA&C	Fri-31-Jan-20								
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	M	Category	I
Phase 5 - Fallback Plan											
											Action Manager
Fallback Plan	20/573 - Revisit and look at emergency measures that need to be put in place.										Chief Exec

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/187	Risk Title	20/187 - Information Governance				Risk Owner	Chief Exec	Manager	CD SR	
Description	Ineffective information governance arrangements lead to unacceptable levels of unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies resulting in loss of reputation, poor decision making, fine, etc					Risk Group	Legislative	Risk Type	CS 15/161		
Phase 2 - Current Assessment											
Current Control Measures			Information Governance Strategy including the associated Policy and Procedure Framework; CIGG Action Plan; data breach process; messages from senior management; on-line training; staff induction; Information Asset Owners identified; information asset registers regularly updated; Internal Data Governance team with an identified representative for each Directorate (replacing DIGCs); Veritau appointed as DPO; posters; intranet information; regular monitoring of electronic communication by T&C; series of unannounced security compliance visits by internal audit; application of all the features of the Information Security Management System (ISMS); FoI – controls include central monitoring of receipt and progress, regular review by Veritau and review of outstanding cases by the Chief Exec on a monthly basis; proactive monitoring of all data; terms of reference reviewed; virtual Directorate Group; Veritau investigate significant data breaches; CIGG consider reasons for data breaches and cascade lessons learned; secure physical storage and internal info transfer issues resolved; Non NYCC Network Access Policy produced; e learning training packages refreshed; targeted phishing campaign; Information Sharing Protocol in place; SAR - controls include central monitoring of receipt and progress; refreshed Information Governance page on intranet; Information Governance risk register completed;								
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	15/423 - Continue to emphasise personal responsibility of staff for all information in this area and consider disciplinary action in cases of data breaches					CD SR CSD ACE BS	Mon-31- Aug-20				
Reduction	15/424 - Continue to review information asset registers and target training where appropriate (ongoing)					CSD SR AD T&C Ho Int Audit	Mon-31- Aug-20				
Reduction	15/426 - Continue to ensure individual information sharing agreements completed for each data sharing activity - (ongoing)					Ho Int Audit	Mon-31- Aug-20				
Reduction	15/431 - Continue to work within services in a prioritised order to ensure information (electronic and physical) is secure and transferred securely (ongoing)					CSD SR AD T&C	Mon-31- Aug-20				
Reduction	15/433 - Continue communications to staff to ensure good Information Governance including messages from Management Board and associated campaigns (ongoing)					CSD SR AD T&C Ho Int Audit	Mon-31- Aug-20				
Reduction	15/611 - Ensure Data Protection risks are managed to comply with GDPR (ongoing)					CSD SR AD T&C	Mon-31- Aug-20				
Reduction	15/612 - Data Quality Improvement - develop and implement an action plan to address the Data Quality issues that are impacting on the accuracy of operational management information, performance reports, transparency publications and statutory returns (action plan to be agreed by Sept 2019)					CSD SR AD T&C	Mon-31- Aug-20				
Reduction	15/613 - Documents and Record Management - develop and implement an approach to document and records management and storage with the Council that encompasses both physical and electronic information (action plan to be agreed by end of August 2019)					CSD SR AD T&C	Mon-31- Aug-20				

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Reduction	15/844 - Carry out a corporate cyber-attack simulation exercise					CSD SR AD T&C	Tue-31- Dec-19				
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	L	Financial	M	Services	L	Reputation	M	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	15/514 - Review Action Plan and new technology and continue to raise awareness. Invite ICO to carry out an audit of NYCC IG systems							Action Manager			
								CD SR			

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/207	Risk Title	20/207 - Transformation Programme				Risk Owner	Chief Exec		Manager	CD SR
Description	Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts					Risk Group	Strategic		Risk Type	CS 15/11	
Phase 2 - Current Assessment											
Current Control Measures			Transformation programme; alignment with Council Plan and corporate priorities; Members workshops & political group sessions completed; briefings of Cabinet; regular Mgt Board/Programme Board meetings; staff communication constantly reviewed and cross cutting themes programme board continue to meet and follow the governance structure; quarterly meetings with finance ADs and programme managers to align savings against programme budgets; review carried out of governance and areas of future focus for Programme Board; all major change programmes are captured within this Programme to better manage dependencies and resources; Enhanced Strategic Support service to ensure high quality and robust service and team planning; action plan following peer review monitored; intensive review of areas of overspend and actions to mitigate; review (deep dives) into specific high-risk base budgets such as HAS Care and Support, SEN Transport and School Improvement carried out (2018/19); fundamental review of the organisation's design and development programme carried out (Mar2019);								
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
Reduction	15/634 - Further shape the emerging Beyond 2020 Programme to lead to identifying new areas of cross cutting programmes for implementation in 2020/21 onwards					Action Manager	CSD SR AD T&C		Action by	Tue-31-Mar-20	
Reduction	15/635 - Continue to carry out fundamental review of projects, reassessment of priority and agree outcomes					Action Manager	CD SR CSD SR AD T&C		Action by	Mon-31-Aug-20	
Reduction	15/636 - Continue to deliver existing Programme including Directorate and cross cutting programmes					Action Manager	CD SR CSD SR AD T&C		Action by	Mon-31-Aug-20	
Reduction	15/637 - Embed the BEST approach into service planning to identify yearly efficiency savings					Action Manager	CD SR CSD Mgt Team CSD PPC HoS&P		Action by	Tue-31-Mar-20	
Reduction	15/639 - Continue to carry out focussed reviews on areas of overspend, poor performance and/or opportunities for improvement					Action Manager	CD SR CSD SR AD T&C		Action by	Mon-31-Aug-20	
Reduction	15/831 - Continue to monitor delay of Programmes and the effect on benefits (ongoing)					Action Manager	CSD SR AD T&C		Action by	Mon-31-Aug-20	
Reduction	20/52 - Refresh and carry out a revised plan for reviewing base budgets in 2019/20 on a risk based assessment and linked to focussed reviews					Action Manager	CD SR		Action by	Tue-31-Mar-20	
Reduction	20/386 - Approve detailed business plans all businesses within the Brierley Group. by Shareholder Committee and Brierley Board and put in place a monitoring regime (Forward Plan) for progress					Action Manager	CD SR		Action by	Tue-31-Mar-20	
Reduction	20/403 - Carry out monthly monitoring of communications and engagement plan including key messages and themes (ongoing)					Action Manager	CSD HoC		Action by	Mon-31-Aug-20	
Reduction	20/491 - Identify and target additional savings through corporate Procurement Strategy (ongoing)					Action Manager	CD SR		Action by	Wed-30-Sep-20	

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Reduction	20/526 - Continue to develop effective Commercial operations (ongoing)	All Mgt Board Chief Exec	Mon-31- Aug-20								
Reduction	20/551 - Develop and implement an action plan to change the identified approach and activities across a range of areas, notably staff engagement, following the fundamental review of the organisation's design and development programme	CSD ACE BS	Tue-31- Mar-20								
Reduction	20/595 - Develop transformational themes and produce outline business cases for Assess and Decide; Resilience and Wellbeing; Modern Council +; Environment	All Mgt Board	Tue-31- Mar-20								
Reduction	20/599 - Produce and launch a strategic narrative for the Beyond 2020 Programme.	Chief Exec	Fri-31-Jan- 20								
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	15/561 - Carry out service cuts										All Mgt Board

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/1	Risk Title	20/1 - Funding Challenges				Risk Owner	Chief Exec	Manager	CD SR	
Description	Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade resulting in legal challenge, unbalanced budget and public dissatisfaction					Risk Group	Resources	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures			Existing MTFs; Members Budget seminars; 2020 North Yorkshire Programme & constituent elements including service reviews; review of 2020NY in Members seminars, Cabinet, and Overview and Scrutiny Committees where Directorate based; 2020NY Programme Governance; modelling on implications of external funding levels (eg Spending Review Settlement); next phase of savings ideas generated; meetings with traded services' managers completed; interim NYES business plan in place; sustainable additional social care funding; advocacy work including with MPs, CCN and professional networks; initial review of the impact of the 1 year spending round (linked to action20/617);								
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	15/638 - Deliver against areas identified as housekeeping (negative RSG, fairer funding review, fees and charges, business rates) Continue to feed in to the fairer funding review and make the case for additional funding as part of the Spending Review					CSD SR AD T&C	Tue-31-Mar-20				
Reduction	20/46 - Ensure effective consultation/communication with staff, public and Members about ongoing savings requirements					All Mgt Board	Fri-31-Jan-20				
Reduction	20/402 - Review arrangements relating to time limited additional social care funding					CD HAS CD SR	Fri-31-Jan-20				
Reduction	20/616 - Ensure active participation in professional networks and LG pressure groups (for example CCN and LGA) to shape activity in relation to advocacy (ongoing)					All Mgt Board	Fri-31-Jan-20				
Reduction	20/617 - Continue to lobby MPs and Govt for additional funding particularly in relation to adults and children's social care, High Needs, Schools Capital and rural costs (ongoing)					CD HAS CD SR	Tue-31-Mar-20				
Reduction	20/618 - Implement Beyond 2020 Change Programme to address ongoing savings for the new MTFs.					All Mgt Board	Fri-28-Feb-20				
Reduction	20/728 - Communicate and consult with the public to ensure understanding of financial position and consequences					CD SR	Tue-31-Mar-20				
Reduction	20/750 - Ensure regular monitoring at management board and CYPS Overview and scrutiny committee of financial challenges for schools to highlight the present financial position to ensure immediate and emerging challenges are addressed. (ongoing)					CD CYPS CSD AD SR (HE)	Fri-31-Jul-20				
Reduction	20/751 - Identify and implement potential efficiencies as part of the strategic plan for high needs (ongoing)					CSD AD SR (HE) CYPS AD Incl	Wed-30-Sep-20				
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

		Action Manager
Fallback Plan	20/504 - Further fundamental review in order to discharge statutory responsibilities	All Mgt Board

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/194	Risk Title	20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market				Risk Owner	Chief Exec		Manager	CD HAS
Description	Major failure of provider/key providers results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention. The impact could include loss of trust in the Care Market, increased budgetary implications and issues of service user safety.					Risk Group	Legislative		Risk Type	HAS Dir 3/162	
Phase 2 - Current Assessment											
Current Control Measures			Regular review and monitoring contracts; standard contract terms; approvals process; regular meetings to share best practice; experienced staff; regular communication with providers; bulletins; customer feedback; Engagement Group; legal services; CQC; Financial Services & insurance consultation; Independent Sector Partnership B (ISPB); market analysis and mapping and information analysis (Locality Provider group); capacity planning; alerts system including brokerage; Service Unit & provider BCPs; QA Framework developed; guidance and ongoing training for purchasing staff; engage with AD ASS; reg meetings with Q&M, Health Commissioner and police; robust comms with CCGs; quality monitoring embedded in Dir perf monitoring; market position statement; Recruitment Hub implemented, Learning4Care training delivery for independent sector providers; recommendations from the actual cost of care exercise implemented; QI team in place; funding for market improvement team agreed through BCF;								
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	H	Category	I
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/468 - Continue to revise and update a market position statement; this is now an online statement with different aspects being updated as and when required						HAS AD C&Q	Tue-30-Jun-20			
Reduction	20/469 - Jointly with Health continue to monitor baseline assessments QA framework and risk profiles of providers; targets are reviewed at quarterly officer meetings and info fed into engagement group; pursue opportunities for joint working between HAS and NHS with plans in place for health brokerage (brokerage pilots in place)						HAS AD C&Q	Tue-30-Jun-20			
Reduction	20/471 - Continue with regular engagement meetings with CQC locally and engage with CQCs national programme of identifying providers where there is significant risk of failure						HAS AD C&Q	Tue-30-Jun-20			
Reduction	20/473 - Continue to engage in ADASS work to manage major problems occurring, such as financial issues in the care provider market and ensure robust contingency planning and to learn lessons from serious case reviews at a national level; more work being done to enhance regional ways of working; this continues, working through any remaining data sharing issues with Data Governance						HAS AD C&Q	Tue-30-Jun-20			
Reduction	20/474 - Work with Veritau on audits of individual suppliers (ongoing)						HAS AD C&Q	Tue-30-Jun-20			
Reduction	20/486 - Implement action plan following outcome of state of the market exercise and ensure inclusion of NHS and Partners - ongoing (Make Care Matter; IBCF monies used for Recruitment Hub and Learning4Care) and regularly report to ISPB						HAS HoHR	Wed-30-Sep-20			
Reduction	20/492 - Review any opportunities to stabilise the market through additional Govt funding given to social care for this purpose (review position each year for next 3 years of funding); IBCF being used for piloting an approach to rural dom care, supporting recruitment and training						CSD AD SR (AH) HAS AD C&Q	Thu-30-Apr-20			
Reduction	20/523 - 2020 Market shaping/development around micro enterprises						HAS AD C&Q	Mon-30-Sep-19	Mon-30-Sep-19		

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

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Reduction	20/538 - Developing a quality pathway, revising processes and procedure and incorporating best practice adopting a risk based / predictive approach	HAS C&Q Ho Q&M	Thu-30-Apr-20								
Reduction	20/539 - Rewriting policies with input from Veritau	HAS C&Q Ho Q&M	Tue-30-Jun-20								
Reduction	20/540 - Ensure clarity around commissioning intentions using place based intelligence	HAS AD C&Q	Tue-30-Jun-20								
Reduction	20/541 - Work with ICG to ensure provider BCPs are in place (complete) and evidence of testing can be provided	HAS AD C&Q	Tue-30-Jun-20								
Reduction	20/542 - Consideration of market interventions, including development of a provider arm or a proposal to bring organisations together	HAS AD C&Q	Wed-30-Sep-20								
Reduction	20/1188 - Monitor issues caused by the complex partner relationships, meetings and structures and raise at HASLT where appropriate - ongoing	HAS AD C&Q	Tue-30-Jun-20								
Reduction	20/1197 - Begin the preparation for next Actual Cost of Care exercise and then develop revised commissioning model to help address affordability issues; started the process, Health & Social Care systems approach	HAS AD C&Q	Mon-30-Sep-19	Mon-30-Sep-19							
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	20/548 - Make client safe, crisis meeting, implement relevant steps, consultation with senior staff and relevant organisations (e.g. Police CQC). Effective communication to relevant parties, utilise established failure plan.										Action Manager
											CD HAS

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/236	Risk Title	20/236 - Opportunities for Devolution and Growth in North Yorkshire				Risk Owner	Chief Exec	Manager	CD BES	
Description	Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage, resulting in reduced investment and impact on the growth and jobs, inability to attract, retain and grow businesses and raise living standards across North Yorkshire					Risk Group	Strategic	Risk Type	BES 7/174		
Phase 2 - Current Assessment											
Current Control Measures			<p>Devolution - proposals submitted to Govt., LEP strategic economic plan in place; NYCC retains the Infrastructure Delivery Steering Group; NYCC wide co-ordination of development needs linked to District plans; local authorities are moving towards a joint committee & considering a combined authority; LA Director group in place; plan detailing powers and funding developed; consensus of Yorkshire local authorities on Devolution geography and opportunities;</p> <p>Growth - Direct contribution and support, including through provision of accountable body function, to the YNYER Local Enterprise Partnership; maintenance of an Economic Growth Function within BES; Proactive engagement in LGNYYP partnership working including through Directors of Development, Chief Housing Officers, Heads of Planning and Economic Development Officer Groups; Lead role in enabling and further developing YNYERH Spatial Framework; Lead role in supporting and developing the NYCC Growth Plan Steering Group and sub-ordinate arrangements; Lead role in initiating and developing the NYCC Economic Growth Plan and annual Delivery Framework (endorsed by Executive); Work to monitor and support opportunities to secure alternative governance arrangements including a Devolution deal with Government; collaborative working arrangements with District Councils in place</p>								
Probability	H	Objectives	M	Financial	H	Services	H	Reputation	H	Category	I
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/246 - Continue to monitor the Devolution agenda and communication with stakeholders to maximise opportunities (ongoing); the greater Yorkshire geography is being used in some areas of growth work					BES AD GP&TS	Fri-31-Jul-20				
Reduction	20/364 - Devolution - Gain political support both locally and nationally (ongoing)					Chief Exec	Fri-31-Jul-20				
Reduction	20/549 - Growth - Carry out an annual review of progress of the NYCC Economic Growth and Delivery Plan and Action Plan (ongoing) (Need to work towards a new NYCC Economic Growth and Delivery Plan being in place by 31 Mar 20)					BES AD GP&TS BES GP&TS HoSP&EG	Tue-31-Mar-20				
Reduction	20/550 - Growth - Embed enhanced collaborative working arrangements with District Councils (annual review of progress) - ongoing					BES AD GP&TS	Fri-31-Jul-20				
Reduction	20/552 - Growth - Maintain good working relationship with the LEP (ongoing)					CD BES	Fri-31-Jul-20				
Reduction	20/553 - Growth - Understand and investigate any impacts of Brexit and ensure opportunities are taken					BES AD EPU CD BES	Tue-31-Mar-20				
Reduction	20/597 - Growth - Complete YNYERH Spatial Framework SDZ Long Term Development Statements to enable effective long-term planning and investment of infrastructure for growth; approval by LGNYYP Board / Leaders for publication and open release of the framework					BES AD GP&TS	Fri-31-Jul-20				

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

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Reduction	20/598 - Growth - Deliver strategic natural capital investment via the Local Nature Partnership (LEP/LNP lead); Taking forward phase 2 implementation options with partners (Local Authorities, DEFRA, Universities, Business) with link to 25 Year Environment plan and government policy changes (planning net gain, agriculture ELMs, Local Industrial Strategy & Natural Capital plans).	BES AD GP&TS	Tue-31-Mar-20								
Reduction	20/723 - Devolution - Develop a York/North Yorkshire proposition including a combined authority, in response to Govt. continuing to reject One Yorkshire	Chief Exec	Tue-31-Mar-20								
Reduction	20/725 - Devolution - Carry out consultation on a York/North Yorkshire proposition and following approval, submit to Parliament and obtain relevant Powers.	Chief Exec	Wed-31-Mar-21								
Reduction	20/916 - Devolution - Establish the geography on which to secure Devolution (consensus of Yorkshire local authorities achieved, support from Govt Minister required)	Chief Exec	Fri-31-Jul-20								
Reduction	20/917 - Devolution - Develop detailed business cases for different geographies	Chief Exec	Fri-31-Jul-20								
Reduction	20/1397 - Devolution - Negotiate the economic barriers and opportunities which Devolution can take advantage of with Government including interim devolution deals (consensus of Yorkshire local authorities achieved, support from Govt Minister required)	CD BES	Fri-31-Jul-20								
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	M	Category	4
Phase 5 - Fallback Plan											
											Action Manager
Fallback Plan	20/572 - Consider a North Yorkshire deal and review and revise existing arrangements for sustainable economic growth										CD BES Chief Exec

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/239	Risk Title	20/239 - Schools Funding Challenges				Risk Owner	Chief Exec	Manager	CD CYPs	
Description	Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools; poor financial management or failure to act in a timely manner by governors/head teachers DfE impose further restrictions on LA financial freedoms, results in potential accumulated deficits. Lack of investment in special provision such as special schools results in potential increased costs.					Risk Group	Resources	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures			Support challenge and intervention framework in place; survey of all schools to benchmark their position on issues such as staff reduction, increased class sizes and commercial activities; licence to deficits; recovery plans, financial benchmarking; primary and secondary finance conferences; individual discussions with schools; Schools Forum engagement; governor briefings; Lobbying of Govt and MPs regarding schools' financial position carried out;								
Probability	H	Objectives	M	Financial	M	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/750 - Ensure regular monitoring at management board and CYPs Overview and scrutiny committee of financial challenges for schools to highlight the present financial position to ensure immediate and emerging challenges are addressed. (ongoing)					CD CYPs CSD AD SR (HE)	Fri-31-Jul-20				
Reduction	20/752 - Implement a support challenge and intervention framework to assist/instruct schools to take measures to address their financial position.					CSD AD SR (HE)	Tue-31-Mar-20				
Reduction	20/753 - Continue to lobby Ministers, local MP and through F40 Group (ongoing)					CD CYPs	Fri-31-Jul-20				
Reduction	20/754 - Carry out press release and lobby Govt and MPs following outcome of survey benchmarking of schools positions					CD CYPs	Sun-30-Jun-19	Sun-30-Jun-19			
Reduction	20/755 - Deploy finance staff into schools with the biggest financial challenges to undertake financial consultancy to ensure schools balance their budget within 3 years.					CSD AD SR (HE)	Wed-30-Sep-20				
Reduction	20/756 - Develop and implement an approach to integrated curriculum and financial planning and support and encourage collaboration and federation					CSD AD SR (HE)	Wed-30-Sep-20				
Reduction	20/757 - Develop a business case for special provision across the County to ensure value for money					CSD AD SR (HE) CYPs AD Incl	Tue-31-Mar-20				
Reduction	20/759 - Implement outcome of review of special provision					CSD AD SR (HE) CYPs AD Incl	Wed-31-Mar-21				
Reduction	20/1166 - Present outcome of schools survey benchmarking at Schools Forum (completed Sept 2019) and encourage a larger take-up for a further regional survey in order to provide 'real' information to Government					CSD AD SR (HE)	Tue-31-Dec-19				
Reduction	20/1189 - Define and secure appropriately experienced resources to provide a support and challenge function for schools and academies					CSD AD SR (HE)	Wed-30-Sep-20				
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	M	Category	4

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Phase 5 - Fallback Plan		Action Manager
Fallback Plan	20/574 - Further fundamental review to ensure control of accumulated deficits	CD CYPs

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Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification									
Risk Number	20/47	Risk Title	20/47 - Partnership and Integration with Health			Risk Owner	Chief Exec	Manager	CD HAS
Description	Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes				Risk Group	Partnerships	Risk Type	CYPS 24/221 HAS 3/180	

Phase 2 - Current Assessment											
Current Control Measures			<p>HAS: Effective HWB partnership with clear reviewed and revised - governance providing strategic leadership regarding H&W across the County; chief Officer representation influencing the development of STP/ICs; HASLT locality delivery model in place actively shaping local integration plans; Joint leadership in Harrogate developing a new model of care building on the work of Vanguard; joint commissioning boards in Hamb/Rich and Scarborough/Ryedale CCGs underpinned by s75 agreements; investment of IBCF and BCF to protect social care; Joint Health and Well-being Strategy in place; corporate task and finish group for DToC in place; HWB development sessions; Integration and Better Care Fund Plan developed with CCGs and agreed at Health and Wellbeing Board; 2020 Health Programme focussing on integration established; York and North Yorkshire SLE in place with a work programme of 10 priorities; joint commissioning boards for HRW and Scarborough in place (but in abeyance pending re-organisation of NY CCGs);</p> <p>CYPS: H&W Board; CYPLT; Management Board; CYPS Plan; Health and Well-being Strategy; JSNA; services commissioned for 0-5 and 5 - 19 Healthy Child Programme to ensure close alignment with CYPS Services; Childhood Futures governance arrangements in place;</p>								
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2

Phase 3 - Risk Reduction Actions					
			Action Manager	Action by	Completed
Reduction	20/60 - Ensure that we account for the BCF and IBCF funding as per the Regulations on a quarterly basis		CSD AD SR (AH)	Tue-31-Mar-20	
Reduction	20/362 - Ensure NHS partners are fully aware of the democratic and political environment they are operating within and liaise with Scrutiny colleagues to ensure a positive outcome (ongoing)		CD HAS	Tue-30-Jun-20	
Reduction	20/363 - Actively monitor relationships, priorities and communications and ensure that HAS managers are fully engaged at appropriate level and review at HAS WLT on a regular basis (ongoing)		CD HAS	Tue-30-Jun-20	
Reduction	20/399 - Develop proposals to align to the emerging new Primary Care Networks which will be established.		HAS AD HI	Thu-30-Apr-20	
Reduction	20/402 - Review arrangements relating to time limited additional social care funding		CD HA SCD SR	Fri-31-Jan-20	
Reduction	20/451 - Agree and implement Harrogate and Rural Alliance (Sept 2019) integration of community health and social care services and also further new models of care when emerging new Primary Care Networks are established		CD HAS	Tue-31-Mar-20	
Reduction	20/452 - Engage wider HASLT in testing the implications of different integration models (ongoing)		HAS AD C&Q HAS AD HI	Tue-30-Jun-20	
Reduction	20/457 - Improve the DToC (Delayed Transfer of Care) performance to avoid financial penalties and reputational issues. Implement the work programme of the Transfers of Care Board. – HI overview with C&S delivery, continued progress on the social care element but still reliant on the NHS areas		HAS AD C&Q HAS AD C&S	Tue-30-Jun-20	
Reduction	20/458 - Consider MoUs for STP / ICS across the County that explicitly define the Council's involvement and engagement in these arrangements		CSD AD SR (AH) HAS AD HI	Tue-30-Jun-20	

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

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Reduction	20/477 - Ensure Healthy Child team and CYPS services collaborate effectively and at the earliest stage to prevent family and education breakdown and to delivering improved outcomes of Children, Young People and Families (ongoing)	CYPS C&F HoEP (PIP)	Wed-30-Sep-20								
Reduction	20/481 - Continue to contribute to the delivery of the workplan for the Health and Well-being Board in relation to children's health priorities and ensure strategic decision making in Health is influenced through alignment with the JSNA and the Children and Young People's Plan (ongoing)	CD CYPS	Wed-30-Sep-20								
Reduction	20/528 - Ensure employment of an 'Invest to Save' post for joint commissioning between Health and the Local Authority in terms of meeting the needs of children with SEND	CSD AD SR (AH) CYPS AD Incl	Tue-31-Mar-20								
Reduction	20/565 - Actively work with Partners on a new way for the health system to work in North Yorkshire	HAS AD HI	Tue-31-Mar-20								
Reduction	20/724 - Ensure full participation across Health and the Local Authority in the Childhood Futures Programme	CYPS Comm Mgr Health	Wed-30-Sep-20								
Reduction	20/733 - Manage relationships at Trust and CCG level as a result of leadership changes (ongoing)	CD HAS	Tue-31-Mar-20								
Reduction	20/735 - Discuss with Health Partners how to re-establish fair and effective partnership working in relation to Continuing Healthcare	CSD AD SR (AH) HAS AD C&S (Prov.)	Mon-31-Aug-20								
Reduction	20/748 - Carry out a post implementation review of HARA	HAS AD HI	Tue-30-Jun-20								
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/210 - Escalation to CMB and Executive Members, further engagement with senior tiers in NHS locally, regionally and nationally.									CD HAS	

Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19th November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/189	Risk Title	20/189 - Safeguarding Arrangements				Risk Owner	Chief Exec	Manager	CD HAS CD CYPS	
Description	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.					Risk Group	Safeguarding	Risk Type	CYPS 24/250 HAS 3/27		
Phase 2 - Current Assessment											
Current Control Measures											
<p>CYPS – LSCB Safeguarding website; regularly reviewed procedures; practice standards issued to teams to support consistent practice; monthly performance data which is monitored regularly to seek assurance over key performance headlines; case file audit process; manager authorisation of all assessments; ICS; newly formed integrated family support service; training strategy; clear supervision process which is audited on a regular basis; strengthened Multi agency screening team (MAST); OFSTED 'outstanding' categorisation; delivery and implementation of the VEMT approach with the LSCB; working with colleagues and the CCG lead to ensure appropriate resources available for complex young people; Mgt file audit of case files against established assessment standards and staff supervision files; monitoring and management of performance against agreed targets in the SMT action plan</p> <p>HAS - Detailed action plan; Safeguarding general manager and team; strengthening of Safeguarding policy team; case file audit and review; independent chair to Safeguarding Board in place; risk enablement panel in place and being reviewed; countywide safeguarding general manager in place; testing of initial performance metrics for Safeguarding Board has taken place further developing performance activity; initial safeguarding procedures reviewed linked to consultation in light of the Care Act and are being reviewed again; safeguarding board performance framework; Q&E [protocol for the relationship between Adults Social Care (and Children's Trust) and the Health and Wellbeing Board agreed and implemented;] information framework for serious incident data, eg drug death etc in place; recommendations from the commissioned independent review of safeguarding practice taken into consideration as part of the preparations for the implementation of the latest policy and procedures; local arrangements with Children's Safeguarding Board and Community Safety Partnerships reviewed; training for in house provider; new safeguarding policies and procedures implemented;</p>											
Probability	M	Objectives	H	Financial	M	Services	M	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/374 - Ensure compliance with Safeguarding Board and Children and Families' procedures [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
Reduction	20/376 - Continue the work with the MAST to strengthen responses to children and young people who are vulnerable to CSE and CCE by improved intelligence and information sharing arrangements [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
Reduction	20/377 - Ensure where there is a concern that a young person is being exploited that the CSE risk assessment tool is always completed [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
Reduction	20/382 - Continue to feed into review of EDT arrangements (adult lead) as required [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
Reduction	20/384 - Continuation of 'Practice Weeks' where managers will visit locations to observe and review practice; Progress: These are now in place and in order to make these stronger the teams will need to be involved in the planning to make these more effective, however the feedback is positive. [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
Reduction	20/385 - Use and further development of performance dashboards to support individual managers [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
Reduction	20/456 - Continue to report regularly to HASLT, Care and Independence O&S Committee and Health and Wellbeing Board particularly in light of preparation for the latest policy and procedures. [HAS]						HAS AD HI	Tue-31-Mar-20			

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Reduction	20/487 - Continue to work with Commissioning and Quality team to improve quality assurance (development of new approaches and tools around working with providers on quality assurance issues); including work and regular meetings with CQC, Health and Healthwatch [HAS]	HAS AD C&S (Asmt.) HAS AD HI	Tue-30-Jun-20								
Reduction	20/490 - Ensure training in respect of latest policies and procedures for elected Members, staff and Partners is reviewed and delivered [HAS]	HAS AD C&S (Asmt.)	Tue-31-Mar-20								
Reduction	20/534 - Continue to carry out the supervisory body role for DoLS to ensure the system is as effective as possible within existing resources and prepare for Liberty Protection Safeguarding Bill, details expected Jan 2020 and will become law by June 2020 (linked to action 20/615) [HAS]	HAS AD HI	Tue-30-Jun-20								
Reduction	20/535 - Continue to ensure Partners are fully engaged with Safeguarding Boards centrally and locally, particularly new health partners (CCGs). [HAS]	HAS AD C&S (Asmt.) HAS AD HI	Tue-30-Jun-20								
Reduction	20/536 - Continue to embed safeguarding work to deliver the Transforming Care programme incl. embedding the care act role of Principal Social Worker and Safeguarding Board Manager with closer scrutiny of Transforming Care work [HAS]	HAS AD C&S (Asmt.)	Tue-30-Jun-20								
Reduction	20/596 - Continue to strengthen Governance arrangements in HAS following consideration of North Yorkshire and national safeguarding adult reviews (ongoing) [HAS]	HAS AD C&S (Asmt.)	Tue-30-Jun-20								
Reduction	20/615 - Continue with scoping work in preparation of implementing the Law Commission proposals (linked to action 20/534) [HAS]	HAS AD C&S (Prov.) HAS AD HI	Thu-30-Apr-20								
Reduction	20/726 - Implement the new safeguarding policies and procedures (internal SG board is leading to ensure operational guidance is in place) [HAS]	HAS AD HI	Thu-31-Oct-19	Mon-30-Sep-19							
Reduction	20/736 - Consider whether new procedures could be established to give a more proportionate response to notifications [HAS]	HAS AD C&S (Prov.)	Thu-31-Oct-19	Mon-30-Sep-19							
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	M	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/545 - Carry out necessary review of approach, target underperforming areas and take on lessons learned from any serious case reviews									Action Manager	
										CD CYPS CD HAS	

Linking of Directorate risks to the Corporate risk register November 2019

Central Services Risk Register
<p>Information Governance</p> <p>Ineffective information governance arrangements lead to unacceptable levels of unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies resulting in loss of reputation, poor decision making, fine, etc</p>
<p>Transformation Programme</p> <p>Failure to design and implement a coherent savings and transformation programme "Beyond 2020" which delivers the forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts</p>
<p>Central Services Savings Plan</p> <p>Failure to deliver the Central Services savings plan as set out in the MTFS resulting in inability to meet the budget, rationalise support services and enable the programme</p>

Health and Adult Services Risk Register
<p>Information Governance and Health and Safety</p> <p>Failure to ensure that good and safe governance arrangements in respect of data security and health and safety are in place throughout the Directorate.</p>
<p>Confident and consistent practice</p> <p>Failure to establish the workstreams and processes needed to embed the confident and consistent practice programme across the county resulting in poor outcomes for individuals, missed opportunities to change and improve the service, inability to realise budgetary savings and criticism</p>
<p>Financial Pressures</p> <p>Financial pressures arising from difficulties in delivering MTFS Savings requirements, managing in year financial overspends, Better Care Fund contributions, market pressure and complexity of client needs leading to service impact or additional savings needing to be identified within HAS or corporately.</p>
<p>Major Failure due to Quality and/or Economic Issues in the Care Market</p> <p>Major failure of provider/key providers results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention.</p>
<p>Partnership and Integration with the Health</p> <p>Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes.</p>
<p>Safeguarding Arrangements</p> <p>Failure to have an effectively monitored, robust, Safeguarding regime and partnership arrangements in place and ensure that we fulfil our wider lead authority role (under the Care Act).</p>

Corporate Risk Register	Rank	
<p>Brexit Arrangements</p> <p>The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.</p>	1	1
<p>Information Governance</p> <p>Ineffective information governance arrangements lead to unacceptable levels of unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies</p>	1	2
<p>Transformation Programme</p> <p>Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts</p>	1	2
<p>Funding Challenges</p> <p>Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade.</p>	1	2
<p>Major Failure due to Quality and/or Economic Issues in the Care Market</p> <p>Major failure of provider/key providers results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention.</p>	1	2
<p>Opportunities for Devolution and Growth in North Yorkshire</p> <p>Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage</p>	1	4
<p>Schools Funding Challenges</p> <p>Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools</p>	1	4
<p>Partnership and Integration with Health</p> <p>Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes</p>	2	2
<p>Safeguarding Arrangements</p> <p>Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from</p>	2	3

Business and Environmental Services Risk Register
<p>Statutory Duties</p> <p>Failure to carry out statutory duties or meet statutory deadlines (e.g. Health and Safety, safe guarding, information governance, prevention of waste pollution, planning responsibilities, statutory property related issues, driver/vehicle guidance) resulting in Corporate Manslaughter, increased cost/claims, fines/prosecution and criticism.</p>
<p>Delivering Change Programmes within BES</p> <p>Failure to embed a strong change culture, processes and supporting capacity to deliver ongoing programmes of change in BES e.g. the BES Beyond 2020 Change Programme.</p>
<p>Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority</p> <p>Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on growth and jobs across North Yorkshire.</p>
<p>Growth</p> <p>Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage</p>

Children and Young People's Service Risk Register
<p>Information Governance and Health and Safety</p> <p>Failure to ensure that good and safe governance arrangements in respect of data security and health and safety are in place throughout the Directorate</p>
<p>Cultural Change and Beyond 2020</p> <p>Failure to maintain a strong culture, processes and supporting capacity within CYPS to deliver Beyond 2020, savings targets and address national funding and policy changes</p>
<p>Schools Funding Challenges</p> <p>Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools</p>
<p>Partnership and Integration with Health</p> <p>Failure to develop and implement new models of care that will provide better outcomes for children and young people and local communities.</p>
<p>Safeguarding Arrangements</p> <p>Failure to have a robust approach to Safeguarding in place results in risk to vulnerable children and families and not protecting them from harm.</p>

AUDIT COMMITTEE - PROGRAMME OF WORK 2019 / 20

	ANNUAL WORKPLAN	JULY 19	OCT 19	DEC 19	MAR 20	JUNE 20	JULY 20	OCT 20	DEC 20
A	Audit Committee Agenda Items								
	Training for Members (as necessary)			1					
	Annual Internal Audit Plan				*	*			
	Annual report of Head of Internal Audit					*			
	Progress Report on Annual Internal Audit Plan		*	*	*			*	*
	Internal Audit report on Children and YP's Service					*			
	Internal Audit report on Computer Audit/Corporate Themes/Contracts		*					*	
	Internal Audit report on Health and Adult Services		*					*	
	Internal Audit report on BES			*					*
	Internal Audit report on Central Services				*				
B	Annual Audit Letter		*					*	
	Annual Audit Plan (NYCC & NYPF)				*				
	Annual Report / Letter of the External Auditor (ISA 260)	*					*		
	Interim Audit Report					*			
C	Statement of Final Accounts including AGS (NYCC + NYPF)	*				*	*		
	Letter of Representation	*					*		
	Chairman's Annual Report		*					*	
	Audit Committee - terms of reference / effectiveness				*				
	Changes in Accounting Policies				*				
	Corporate Governance – review of Local Code + AGS				*	*			
	– annual report inc re AGS					*			
	Risk Management (inc Corporate R/R) – annual report			*	*				*
	Partnership Governance – annual report					*			
	Information Governance – annual report				*				
	Review of Finance./Contract/Property Procedure Rules	TBA	TBA	TBA		TBA	TBA	TBA	TBA
	Business Continuity – annual report		*					*	
	Counter Fraud (inc risk assessment) – annual report					*			
	Procurement and Contract Management – annual report					*			
Treasury Management – Executive February					*				
VFM – annual assurance review					*				
D	Work Programme	*	*	*	*	*	*	*	*
	Progress on issues raised by the Committee (inc Treasury Management)		*	*	*	*		*	*
E	Agenda planning / briefing meeting								
	Audit Committee Agenda/Reports deadline								
	Audit Committee Meeting Dates	22/07	25/10	20/12	27/03	22/06	27/07	26/10	14/12

- A = Internal Audit
- B = External Audit
- C = Statement of Final Accounts / Governance
- D = Other
- E = Dates

- before formal meeting
- 1 Counter-Fraud
- 2
- 3
- Sessions to be sorted
- Pension Governance
- Beyond 2020 including Property rationalisation