North Yorkshire County Council

Audit Committee

21 March 2022

Internal Control Matters for the Central Services Directorate

Report of the Corporate Director – Strategic Resources

1.0 **Purpose of the report** 1.1 To provide an update to Members of issues and progress against governance related areas identified within Central Services (CS) Directorate. 1.2 To provide details of the latest Risk Register for the CS 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 CS Directorate, the Committee receives assurance through the work of internal audit (detailed in a separate report to the Committee), details of the areas of improvement in the Annual Governance Statement (AGS), together with the Directorate Risk Register.

3.0 **Directorate update**

3.1 **Covid-19**

3.1.1 Covid-19 continues to have a significant impact on all walks of life, this update covers the involvement of the Directorate only at a high level. Naturally, there is a lot of activity beyond this frame which cannot be covered through this report.

3.1.2 A key issue throughout the pandemic has been the access vulnerable people have to basic necessities, particularly those who have to self-isolate following a positive test or when requested to do so by NHS Test and Trace, but also those who are clinically vulnerable and were advised to self-isolate ("shielding") prior to April 2021. The Stronger Communities team has continued to support the 23 Community Support Organisations it rapidly commissioned at the start of the pandemic to coordinate community led activity in localities. The CSOs have worked with mutual aid groups, volunteers and district councils for essentials such as shopping, prescription delivery; pet walking and befriending services amongst others. The Local Assistance Fund was also extended to better facilitate support for people on low income who are self-isolating. The collaborative approach has been well received and has been extremely effective. More recently the CSOs have been supporting some people who received a lot of support during lockdowns and self-isolation to become more independent. The Stronger Communities team is now working with those CSOs who are interested in developing a longer term role in supporting their communities more broadly.

3.1.3 The Customer Service Centre and the Communications team have continued to play a key role in keeping members of the public informed throughout the period. This includes updates on how to access NYCC services, e.g. schools, transport, HWRCs, etc as well as general public information. The Council uses a variety of channels, e.g. telephone, website, social media, press conferences with local newspapers and radio, to ensure messages are clear and timely.

3.1.4 The NYCC Resilience and Emergencies Team (RET) has continued to play a key role in the response to Covid-19 including facilitating the delivery of testing. The NYCC RET, as secretariat for the North Yorkshire Local Resilience Forum (NYLRF), has also co-ordinated the strategic, tactical and operational multi-agency incident response across the county.

3.1.5 As the country started to move into the recovery phase of the pandemic, our supply chains started to see some improvements, however it was evident that there was a continued need and role for NYCC's Supply Chain Resilience Board. Working across the Council our service areas, procurement, commissioning and contract managers continued to monitor our 'at risk' suppliers and providers. The continuation of the Board has ensured a timely and transparent approach to resilience issues. The social care sector has been impacted significantly by the pandemic and we continue to see the effects on this sector in particular. In order to aid a transition into a new business as usual, governance has been developed and implemented at pace to help and support this market from a sustainability and resilience perspective.

3.1.6 The County Council has followed government guidance in respect of working arrangements throughout the course of the pandemic. Where possible staff have been advised to work from home. Where it has not been possible for staff to work from home strict Covid secure measures have been established, including social distancing, enhanced cleaning regimes and increased ventilation. It is expected that the current working arrangements will largely remain the same until the spring but that, thereafter, staff will be encouraged to adopt more hybrid working, to include a combination of home and office based working, according to the requirements of service management. The County Council's Modern Council programme will continue to review the requirements for technology and property to ensure that staff are able to work efficiently in the context of the revised working arrangements. Any Government guidance in respect of Covid mitigation will continue to be monitored to ensure the health and safety of staff and other building users.

3.1.7 At the point of lockdown, all staff who were able to were obliged to work from home. This work from home policy has been in place, to varying degrees in line with government guidance, throughout 2020/21 and 2021/22. Support services adapted well to this new way of working and helped to ensure the Council was still able to perform as effectively as possible across all its services. In particular, ICT services have been vital to ensure staff have been able to work in an agile way throughout the pandemic and on the whole, technology has worked well and has been appreciated and well received by staff. Looking ahead, as Covid restrictions are lifted, a greater number of staff will be seeking to return to an office environment and where that occurs, it is important to do so in a safe fashion as set out above. To this end, working groups were established to develop proposals for what a 'new normal' way of working may look like and these proposals shared with staff. Implementation has been delayed due to the emergence of the Omicron variant at the end of 2021 but are expected to be rolled out further during 22/23 in line with the end of restrictions.

3.2 I.T. Security

3.2.1 Cyber-attacks on individuals and organisations continue to be a constant threat and at times we can see significant levels of activity against our network, Local Councils have been impacted by successful attacks. Notable examples exist across the Public Sector including Redcar & Cleveland and the London Borough of Hackney in 2020 with both having service delivery seriously impacted. More recently Gloucester City Council have been hit for the second time with online services affected and estimate it could take months to fully recover. We continue to follow national advice and guidance to put in a range of effective measures to protect NYCC as far as

reasonably possible, and having robust plans in the event that such an attack takes place.

3.2.2   During the year T&C continue to maintain the technical elements of our security product portfolio to improve our resilience against cyber-attack and implement any guidance produced by the National Cyber Security Centre (NCSC) to improve our overall security posture and have proactively blocked incoming traffic from several countries when we have noticed elevated malicious activity.

3.2.3   At the beginning of December 2021 a number of vulnerabilities were disclosed worldwide that affected a commonly used piece of software named Apache Log4j. This vulnerability was one of the most serious security flaws in the past decade as it is widely used in many applications and is present in many services as a dependency. Once notified of the vulnerability T&C implemented measures, including guidance provided from NCSC and service providers, to mitigate the risk to the council network and applications and continue to monitor the situation.

3.2.4   The Head of Technology Solutions and the SISCO are continuing work with our emergency planning team to run awareness sessions with service areas to consider the impact of a cyber-attack on their ability to deliver services and update their business continuity plans accordingly.

3.2.5   The Technology and Change service maintained its certification of ISO 27001:2013 Information Security Management System standards which demonstrates we continue to provide reliable documentation of how the Information Security Management System (ISMS) is achieving the intended outcomes, and how T&C continues to focus its efforts on maturing and improving the ISMS and the policies and procedures to embed information security to further optimise the business benefits.

3.2.6   All officers of the organisation play an important role in reducing the risk of a successful cyber-attack and we have rolled out two sets of training to raise awareness and guidance and test the organisations ability to identify phishing attacks and improve overall information security awareness.

3.2.7   Throughout the year there have been a few minor incidents involving users clicking on email links. No matter how good our layers of security, a small percentage of phishing emails will always get through. These emails tend to be from compromised external accounts which our security applications see as coming from a legitimate domain, has a plausible subject line, and does not obviously contain malicious attachments, which means we are reliant on the vigilance of our staff in recognising and handling these emails correctly.

3.3   Legal and Democratic Assurance

3.3.1   Part of the role of Central Services is to review risk within the Council and offer assurance against activity it undertakes. Within Legal and Democratic Services there are good measures in place to protect the Council through the Legal and Democratic Services team; including provision of clear advice being provided to all directorates, regular staff training and development and networking and forums.

3.3.2   As a result of the on going pandemic the changes brought in during 2020 for meetings and decision taking have continued throughout the past year.   The Council's Constitution has worked in enabling decision making to continue effectively with regular reviews of the position by the Council. Where appropriate changes have been made and as the regulations have become less restrictive 'in person' meetings have taken place with appropriate safeguards. The Democratic services team have been key in ensuring that the governance arrangements, virtual meetings and

recording of decisions has continued seamlessly. The legal team has also been key in ensuring the changes to the procurement regime throughout the pandemic have been implemented appropriately and the team has also provided particular support in the area of COVID relief to suppliers ensuring this is documented and state aid/ subsidy control compliant and this is still ongoing.

3.3.3   The Council can be subject to prosecution, but no new prosecutions have been brought against the authority in the past 2 years.

3.4   Carbon Reduction

A Carbon Reduction Plan has been agreed by the Executive which sets out the Council's aspirations and actions in relation to carbon reduction in the context of national and regional commitments. Central Services teams are part of a dedicated project team driving the 'Beyond Carbon' change programme for North Yorkshire County Council and to this end a specific risk in relation to Carbon neutrality is included on the Central Services Risk Register and it is also highlighted as a corporate objective. A climate change impact assessment tool has been introduced to enable managers and decision makers to understand and take appropriate action regarding the carbon implications of the policy and work of the Council. A one-off £1m pump-priming fund was committed in the Council's 2021-22 budget and has enabled the appointment of a dedicated officer and is supporting the development of business cases to reduce the Council's carbon footprint.

3.5   Commercial Agenda

North Yorkshire Highways Limited

Central Services teams have played key roles in the successful set up, go live and ongoing service support to North Yorkshire County Council's newest wholly owned teckal company which has been established to deliver highways maintenance services. This project took significant time and resource from Finance, T&C, HR, BSS, Legal, Property and Procurement to ensure a successful company could go live on 1 June 2021 with the appropriate governance and internal control processes in place. Since go live, central services teams have continued to provide day to day support to the company through service level agreements and essential support in resolving issues including system and governance procedures. A new financial system has been built including coding structures, systems, processes, onboarding of new suppliers and ensuring software systems communicate with each other.

3.6   Other Issues

3.6.1   Capacity and prioritisation continue to be significant issues in the Directorate, particularly in light of the challenges that have continued to be presented by Covid throughout the year and the decision to move forward with Local Government Reorganisation. In addition to the existing capacity pressures presented by continuing to deliver Value for Money services, the Beyond 2020 Programme (including the ongoing need to achieve savings) and the various risks & issues outlined in this report; the Directorate will play a key supporting role in a range of wider council initiatives, particularly Local Government Review and Devolution.

3.6.2   Other key issues facing the Directorate, however the detail of those having been covered elsewhere through the Audit Committee programme of work, include:
- Property portfolio and rationalisation
- Information security
- Beyond 2020

4.0   Directorate Risk Register

4.1   The Directorate Risk Register (DRR) is the end product of a systematic process that initially identifies risks at Service level, which then aggregates these via a sieving process to Directorate level. A similar process sieves Directorate level risks into the Corporate Risk Register.

4.2   The Risk Prioritisation System used to derive risk registers across the County Council 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)

The DRR represents the principal risks that may materially impact on the performance and financial outcomes of the Directorate.

4.3   A summary of the DRR is attached at Appendix A. 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.

4.4   The latest detailed DRR is shown at Appendix B showing a range of key risks with existing controls and additional actions to minimise them. The detail also shows a ranking of the risks both at the present time and after mitigating action.

4.5   An annual and interim review of the Risk Register has taken place since the last report to this Committee. The last review was carried out in February 2022. The Risk Register reflects the range of services but also includes many corporate initiatives given the leadership role of Central Services on such issues as the Information Governance and Security and Health and Safety risks.

4.6   The Risk Register continues with many risks that have previously been present but there has been the following changes since the last progress report to this Committee:

New risks
North Yorkshire Transformation Programme risk – this risk is effectively a new risk as it changed its title and emphasis from the Beyond 2020 Change Programme and now particularly focusses on the Local Government Reorganisation (LGR) transition work which is substantial. However transformational work continues as time allows alongside LGR.

Deleted risks
No risks have been deleted.

Other Notable Changes/Actions Information Governance and Security risk – this risk has been expanded and includes further emphasis on cyber security and also includes reference to the Brierley Group companies.
i)   Effectiveness, Capacity and Skills of Staff and Workplace Health and Wellbeing risk – previously this risk was expanded to include workplace health and wellbeing. The risk has further expanded to include the impact of LGR and transition work.
ii)   Commercial Strategy risk – this risk has changed emphasis to the governance arrangements and commercial financial issues of Brierley Group companies.
iii)   Significant Incidents risk – this risk includes reference to supporting the refugee resettlement in the County and closer partnership working with the City of York Council.

5.0   Recommendation

5.1   That the Committee:
   i)   Note the position on the Central Services Directorate key governance issues;
   ii)   Note the Directorate Risk Register for the Central Services Directorate; and
   iii)   Provide feedback and comments on the Directorate Risk Register and any other related internal control issues.

GARY FIELDING
Corporate Director, Strategic Resources
March 2022

Risk Register: **month 6 (February 2022) – summary**
Next review due**: July 2022**
Report Date: **24th February2022 (pw)**

Identity				Person		Classification																Fallback Plan	
						Pre						RR		Post									
Change	Risk Title	Risk Description		Risk Owner	Risk Manager	Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		FBPlan	Action Manager
◀▶	**15/161 - Information Governance and Security (corporate risk)**	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 (including Brierley Group companies) Failure to put in place the appropriate cyber security arrangements could potentially lead to data breach, loss of data, loss of systems, loss of reputation		Chief Exec	CD SR	H	L	M	L	H	1	12	30/04/2022	M	L	M	L	H	2		Y	CD SR
◀▶	**15/11 - North Yorkshire Transformation Programme**	Failure to deliver a coherent NY transformation programme which meets the needs of LGR transition, service operational requirements and savings requirements		Chief Exec	CD SR	H	H	H	H	H	1	5	31/03/2022	M	H	H	H	H	2		Y	All Mgt Board
◀▶	**15/162 - Effectiveness, Capacity and Skills of Staff and Workplace Health and Wellbeing (including impact of LGR)**	A lack of capacity and skills within Central Services together with insufficiently supported staff leads to a significant decline in effectiveness, service quality &/or insufficient progress in carrying out multiple priority areas including the LGR transition, Covid and Covid recovery alongside existing responsibilities.		Chief Exec	CSD Mgt Team	H	M	L	M	M	2	10	31/07/2022	H	M	L	M	L	2		Y	CSD Mgt Team
◀▶	**15/201 - Commercial Strategy**	Failure to both put effective governance arrangements in place (including transparency and oversight for commercial operations) and appropriately influence commercial financial targets (eg. NY Brierley Group companies and NYES) commercial investments and commercial ventures particularly arising through LGR leading to poor decision making and financial loss.		Chief Exec	CSD Mgt Team	M	M	M	M	H	2	6	31/03/2022	M	M	M	M	H	2		Y	CSD Mgt Team
◀▶	**15/184 - Central Services Savings Plan**	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		Chief Exec	CSD Mgt Team	M	M	H	M	M	2	5	30/09/2022	L	M	H	M	M	3		Y	Chief Exec

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	Identity		Person		Classification														Fallback Plan	
					Pre						RR		Post							
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat	FBPlan	Action Manager
◄►	**15/183 - Health & Safety**	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution (this includes the impact of Covid, associated emerging variants and LGR)	Chief Exec	CD SR	L	M	M	M	H	**3**	7	31/03/2022	L	M	M	M	H	**3**	Y	CSD SR HoHSRM
◄►	**15/200 - Significant Incidents (Corporate)**	Failure to plan, respond to and recover effectively from significant incidents in the community resulting in risk to life and limb, impact on statutory responsibilities, impact on financial stability and reputation	Chief Exec	Chief Exec	L	L	H	L	H	**3**	8	30/04/2022	L	L	H	L	M	**3**	Y	Chief Exec
◄►	**15/243 - Carbon Neutral**	Failure to support the Council's aspiration to achieve carbon neutrality by 2030 resulting in unmet public expectation and missed opportunities for energy spend reduction	Chief Exec	CSD AD PPC	L	L	M	L	H	**3**	3	31/03/2022	L	L	M	L	H	**3**	N	
◄►	**15/29 - Corporate Governance and Ensuring Legality**	Failure to ensure adequate Corporate Governance arrangements across the County Council to ensure that the Council acts lawfully in its operations and decision making resulting in inadequate control and stewardship; given the environment of greater risk taking and expansion of the types of activities the Council is now involved in resulting in challenge and non delivery of decisions, financial implications and loss of reputation particularly given service and statutory obligations	Chief Exec	CSD ACE LDS	M	L	M	M	M	**4**	13	31/07/2022	M	L	M	M	M	**4**	Y	CSD ACE LDS

Key	
▲ (red)	Risk Ranking has worsened since last review.
▼ (green)	Risk Ranking has improved since last review
◄► (orange)	Risk Ranking is same as last review
- new -	New or significantly altered risk

North Yorkshire County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/161	Risk Title	15/161 - Information Governance and Security (corporate risk)	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 (including Brierley Group companies) Failure to put in place the appropriate cyber security arrangements could potentially lead to data breach, loss of data, loss of systems, loss of reputation			**Risk Group**	Legislative	**Risk Type**	Corp 20/187

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 Brierley Group companies' information governance procedures in place; 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; Veritau investigate significant data breaches; CIGG consider reasons for data breaches and cascade lessons learned; secure physical storage and internal info transfer issues resolved; e learning training packages refreshed; 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; Data Quality Improvement Action Plan agreed; DPIAs in place; Cyber Security - application of all the features of the Information Security Management System (ISMS);cyber prevention tools are kept up to date; security team in place; Non NYCC Network Access Policy produced; e learning training packages refreshed; targeted phishing campaign; Directorates' discussion on the potential outcome of a cyber-attack carried out; regular updates and awareness communications to staff;

Probability	H	Objectives	L	Financial	M	Services	L	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	Wed-31-Aug-22	
Reduction	15/424 - Continue to review information asset registers and target training where appropriate (ongoing) (Info Gov)	CSD SR AD T&C Ho Int Audit	Wed-31-Aug-22	
Reduction	15/426 - Continue to ensure individual information sharing agreements completed for each data sharing activity - (ongoing) (Info Gov)	Ho Int Audit	Wed-31-Aug-22	
Reduction	15/431 - Continue to work within services in a prioritised order to ensure information (electronic and physical) is secure and transferred securely (ongoing) (linked to Microsoft 365 roll out)	CSD SR AD T&C	Wed-31-Aug-22	
Reduction	15/433 - Put in place a system to ensure regular communications to staff to ensure good Information Governance including messages from Management Board and associated campaigns	CSD SR AD T&C	Wed-31-Aug-22	
Reduction	15/611 - Ensure Data Protection risks are managed to comply with UK GDPR (ongoing)	CSD SR AD T&C	Wed-31-Aug-22	

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Next review due**: July 2022**
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Reduction	15/612 - Data Quality Improvement - 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 (Info Gov)	CSD SR AD T&C	Fri-30-Sep-22	
Reduction	15/613 - Documents and Record Management - implement the approach to document and records management and storage with the Council that encompasses both physical and electronic information (linked to Microsoft 365 roll out) (Info Gov)	CSD SR AD T&C	Wed-31-Aug-22	
Reduction	15/636 - Review existing training and continue to develop and implement appropriate training relating to quality and security of information	CSD SR AD T&C Ho Int Audit	Wed-31-Aug-22	
Reduction	15/793 - Review impact on Veritau and audit days required and implement actions required (ongoing)	CD SR	Wed-31-Aug-22	
Reduction	15/1105 - Review and revise Business Continuity Plans with Directorates to take into account actions required following a cyber-attack (Cyber Security)	CSD SR AD T&C	Thu-30-Jun-22	
Reduction	15/1956 - Ensure information governance requirements are in place for wholly owned companies (review Information Governance Procedures in place for each of the Brierley Group companies to ensure they are up to date and fit for purpose)	CSD AD SR (VD)	Sat-30-Apr-22	

Phase 4 - Post Risk Reduction Assessment								
Probability	M	**Objectives**	L	**Financial**	M	**Services**	L	**Reputation** H **Category** 2

Phase 5 - Fallback Plan	
	Action Manager
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	CD SR

North Yorkshire County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/11	**Risk Title**	15/11 - North Yorkshire Transformation Programme	**Risk Owner**	Chief Exec	**Manager**	CD SR
Description			Failure to deliver a coherent NY transformation programme which meets the needs of LGR transition, service operational requirements and savings requirements	**Risk Group**	Strategic	**Risk Type**	Corp 20/207

Phase 2 - Current Assessment

| **Current Control Measures** | | Transformation programme; 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 Home to School transport carried out; BEST approach embedded into service planning; performance monitoring through Q reports; emerging LGR transition work streams; PMO in place; LGR governance agreed; |

Probability	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	1

Phase 3 - Risk Reduction Actions

		Action Manager	**Action by**	**Completed**
Reduction	15/634 - Continue to identify the output from LGR transition work streams and resource accordingly	CSD SR AD T&C	Fri-31-Mar-23	
Reduction	15/635 - Identify all statutory and policy driven initiatives across the Council which require some form of transformation	CSD ACE LDS	Fri-31-Mar-23	
Reduction	15/831 - Develop a consolidated programme plan	CSD SR AD T&C	Thu-31-Mar-22	
Reduction	15/865 - Deliver a consolidated programme plan	All Mgt Board	Fri-31-Mar-23	
Reduction	15/867 - Continue to review and transform operational service requirements as part of the Programme in order to maximise efficiency	All Mgt Board	Fri-31-Mar-23	

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 a full review and ensure an effective revision of the programme plan	All Mgt Board

NORTH YORKSHIRE County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/162	Risk Title	15/162 - Effectiveness, Capacity and Skills of Staff and Workplace Health and Wellbeing (including impact of LGR)	Risk Owner	Chief Exec	Manager	CSD Mgt Team
Description	A lack of capacity and skills within Central Services together with insufficiently supported staff leads to a significant decline in effectiveness, service quality &/or insufficient progress in carrying out multiple priority areas including the LGR transition, Covid and Covid recovery alongside existing responsibilities.			Risk Group	Capacity	Risk Type	

Phase 2 - Current Assessment

Current Control Measures	Reviewing of Transformation resources; savings re-profiled and included in budget/MTFS report; Looking After You North Yorkshire intranet area; #askSAL; return to office based work risk assessments and induction; Corporate Workplace Health and Wellbeing Group established including Directorate representatives; Boost H&W intranet pages; Health Assured 24 staff care network helpline; post established within H&W to lead on development of H&W promotion materials for the workforce; communications plan established including regular intranet communications on health and wellbeing campaigns and initiatives, 6 weekly blog; regular updates to HRSMT and Corporate Management Board; procurement of extra resources for LGR transition; review priorities of systems and projects across the Council; funding secured for LGR transition additional support; support groups and diversity networks protected characteristics established and process in place to add further groups and networks;

Probability	H	Objectives	M	Financial		L	Services	M	Reputation	M	Category	2

Phase 3 - Risk Reduction Actions

		Action Manager	Action by	Completed
Reduction	15/111 - Regularly perform skills gap analysis and review succession planning based on current and future requirements and use to inform CS workforce training plan and monitor effectiveness	CSD Mgt Team	Wed-31-Aug-22	
Reduction	15/475 - Continue to prioritise and manage pressures on services on an ongoing basis	CSD Mgt Team	Wed-31-Aug-22	
Reduction	15/520 - Identify and secure additional capacity following procurement to support the LGR transition (start Nov 2021)	CSD SR AD T&C	Fri-31-Mar-23	
Reduction	15/591 - Collaborative working between District and County Councils' staff to address transition work	CSD Mgt Team	Fri-31-Mar-23	
Reduction	18/819 - Continue to enable staff to initiate and develop initiatives to improve their health and wellbeing at work including the long term effect of Covid	HAS HoHR	Sun-31-Jul-22	
Reduction	18/820 - Progress a series of health and wellbeing initiatives (eg. Introduction of eBikes; wellbeing roadshows; local yoga classes; craft groups; green gym; walking / running groups etc including the long term effect of Covid	HAS HoHR	Sun-31-Jul-22	
Reduction	18/821 - Continued promotion of good mental health including Mental Health Awareness week activities	HAS HoHR	Sun-31-Jul-22	
Reduction	18/823 - Establish new post of Workplace Health Improvement Adviser within the Health and Wellbeing Team to develop and deliver a proactive health and wellbeing offer.	HAS HoHR	Sat-31-Jul-21	Wed-30-Jun-21
Reduction	18/824 - Develop wellbeing spaces in major offices and workplaces	HAS HoHR	Sun-31-Jul-22	
Reduction	18/825 - Establish diversity networks protected characteristics and a range of support groups for staff including: Parenting; Carers; Parents of Children with Autism; Menopause; Mens Health	HAS HoHR	Sat-31-Jul-21	Wed-30-Jun-21

Phase 4 - Post Risk Reduction Assessment

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Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Probability	H	Objectives	M	Financial		L	Services		M	Reputation	L	Category	2

Phase 5 - Fallback Plan		
		Action Manager
Fallback Plan	15/515 - Review and revise resource allocation where possible and consider additional funding and capacity where required	CSD Mgt Team

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Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/201	Risk Title	15/201 - Commercial Strategy	Risk Owner	Chief Exec	Manager	CSD Mgt Team
Description	Failure to both put effective governance arrangements in place (including transparency and oversight for commercial operations) and appropriately influence commercial financial targets (eg. NY Brierley Group companies and NYES) commercial investments and commercial ventures particularly arising through LGR leading to poor decision making and financial loss.			Risk Group	Strategic	Risk Type	

Phase 2 - Current Assessment

Current Control Measures	Brierley Group of Companies (including NYES); Brierley Group Board; Shareholder Committee; regular reports to Overview and Scrutiny Committee; Brierley Group companies business plans in place; commercial challenge sessions for each company on an annual basis; Brierley Group Performance report on a quarterly basis; selection criteria for commercial opportunities; NYCC Commercial: Commercial strategy; service plan challenge sessions on an annual basis; Commercial Investments Board; investment decisions scrutinised; decision process for investments in place; internal communications plan to publicise the Commercial Strategy; LGR work streams and governance processes;

Probability	M	Objectives	M	Financial	M	Services	M	Reputation	H	Category	2

Phase 3 - Risk Reduction Actions

		Action Manager	Action by	Completed
Reduction	15/609 - Review and refresh training modules on commercial and take appropriate actions	CSD AD SR (VD)	Thu-31-Mar-22	
Reduction	15/610 - Ensure appropriate visibility around commercial decision making eg purchase of asset for dementia village	CSD AD SR (VD)	Sat-31-Dec-22	
Reduction	15/721 - Ensure the Council takes advantage of available central government incentives such as grants and any potential funding is monitored, together with engagement in relevant consultations	CD SR CSD ACE BS CSD AD SR (VD)	Fri-31-Mar-23	
Reduction	15/781 - Ensure full awareness of developments and changes to legislation and/or guidance that affect commercial investments in a detrimental way (ongoing)	CSD AD SR (VD)	Fri-31-Mar-23	
Reduction	15/783 - Carry out a review and restructure of support of Commissioning and Contract Management	CSD AD SR (HE) CSD HoP&CM	Sat-31-Dec-22	
Reduction	15/784 - Ensure commercial ventures are an integral part of the LGR work streams to ensure appropriate oversight and understanding of risk	CSD AD SR (VD)	Fri-31-Mar-23	

Phase 4 - Post Risk Reduction Assessment

Probability	M	Objectives	M	Financial	M	Services	M	Reputation	H	Category	2

Phase 5 - Fallback Plan

		Action Manager
Fallback Plan	15/550 - Review financial position and invoke budget cuts as necessary	CSD Mgt Team

Phase 1 - Identification

North Yorkshire County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Risk Number	15/184	Risk Title	15/184 - Central Services Savings Plan		Risk Owner	Chief Exec	Manager	CSD Mgt Team
Description	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				Risk Group	Financial	Risk Type	

Phase 2 - Current Assessment								
Current Control Measures			CS Management Team meetings; AD T&C providing CS Programme updates to CSMT and Programme Board; individual project monitoring regimes with RAG status; nominated lead officers and associated governance structure; CS programme plan; business mandates; briefs and business cases as appropriate; savings re-profiled and included in budget/MTFS report; Beyond 2020 programme developed;					
Probability	M	Objectives	M	**Financial**	H	**Services**	M	Reputation	M	Category	2

Phase 3 - Risk Reduction Actions					
			Action Manager	**Action by**	**Completed**
Reduction	15/182 - Ongoing review of impact at Management Teams and overall consideration at CSMT		CD SR	Fri-30-Sep-22	
Reduction	15/183 - Periodic reviews at Programme Board		CD SR	Fri-30-Sep-22	
Reduction	15/184 - Implementation of plans of individual projects		CSD Mgt Team	Fri-30-Sep-22	
Reduction	15/185 - Secure commercial opportunities where appropriate		CSD Mgt Team	Fri-30-Sep-22	
Reduction	15/208 - Reassessment of savings alongside Covid and LGR pressures		CSD Mgt Team	Fri-30-Sep-22	

Phase 4 - Post Risk Reduction Assessment											
Probability	L	**Objectives**	M	**Financial**	H	**Services**		M	**Reputation**	M	**Category**	3

Phase 5 - Fallback Plan		
		Action Manager
Fallback Plan	15/540 - Review savings plan and implement alternative savings	Chief Exec

North Yorkshire County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/183	Risk Title		15/183 - Health & Safety		Risk Owner	Chief Exec		Manager	CD SR
Description	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution (this includes the impact of Covid, associated emerging variants and LGR)					Risk Group	Legislative		Risk Type	SR 32/194

Phase 2 - Current Assessment

Current Control Measures	HSRM Service Plan feeding into Directorate Action Plans; H&S team; Corporate H&S Policy; Corporate and Directorate H&S procedures; intranet and NYES sites; Directorate RM groups; H&S Champions and lead officers; reporting on a regular basis; on-going H&S risk assessment, training, monitoring and audit (including the checking and advising on Covid controls); managers' and employees' online H&S training and other modules; shared service with City of York Council and deliver to 4 of the 7 District Councils subject to LGR; BondApp B-Safe system implemented;

Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3

Phase 3 - Risk Reduction Actions

		Action Manager	Action by	Completed
Reduction	15/248 - Continue delivery of the programme of H&S monitoring of audits and inspections (and ensuring that all visits and the premises being visited that are undertaken are Covid Secure) or Covid Secure by Design (ongoing)	CSD SR HoHSRM	Wed-31-Aug-22	
Reduction	15/255 - Ensure appropriate operating standards of H&S risk assessments exist and are being implemented locally this includes considering Covid related risks (especially the more transmissible variants) across the NYCC property portfolio	CSD SR HoHSRM	Wed-31-Aug-22	
Reduction	15/257 - Review and revise the corporate H&S procedures alongside alignment with the Safety Management System (intranet revision has taken place, Safety Management System to complete) (ongoing)	CSD SR HoHSRM	Wed-31-Aug-22	
Reduction	15/417 - Consider H&S implications of significant changes for delivery of services within the Council and factor into Directorate H&S action plans (this includes the risks from Covid and revised priorities due to the pandemic being reflected in action plans particularly over the winter 2021/22 when there may be increased risk from influenza) (ongoing)	CSD SR HoHSRM	Wed-31-Aug-22	
Reduction	15/651 - Ensure understanding of H&S operating environment of NYCC through regular attendance at Corporate and Directorate Risk Management Groups, and develop H&S Improvement Plans which are agreed by the relevant Groups (particularly reflecting risks from Covid and revised priorities due to the pandemic). (ongoing)	CSD SR HoHSRM	Wed-31-Aug-22	
Reduction	15/837 - Report on accident and incident data from the BondApp B-Safe system to identify areas of concern and/or under reporting. And implementation of Risk Assessment and Safe System of Work modules	CSD SR HoHSRM	Thu-31-Mar-22	
Reduction	15/866 - Consider requirements relating to H&S policies and procedures in relation to the transition to the new unitary Council and put together an action plan	CSD SR HoHSRM	Fri-31-Mar-23	

Phase 4 - Post Risk Reduction Assessment

Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3

NORTH YORKSHIRE County Council

Risk Register: **month 6 (Feb 2022) – detailed**
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Report Date: **24th February 2022 (pw)**

Phase 5 - Fallback Plan		
		Action Manager
Fallback Plan	15/538 - Liaise with HSE, media management, implement fatal/serious injury response guide	CSD SR HoHSRM

North Yorkshire County Council

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/200	Risk Title	15/200 - Significant Incidents (Corporate)		Risk Owner	Chief Exec	Manager	Chief Exec
Description			Failure to plan, respond to and recover effectively from significant incidents in the community resulting in risk to life and limb, impact on statutory responsibilities, impact on financial stability and reputation		Risk Group	Performance	Risk Type	Corp 20/244

Phase 2 - Current Assessment

Current Control Measures	NYLRF and RMCI; experience and resources of partners; existing plans incl public health (training and exercises); RET; partnership working with District Councils; community resilience; silver response in the County Council major incident plan tested; approach to BCP refreshed to strengthen service resilience; Resilience Direct portal; regional multi agency pandemic exercise held; effectiveness and robustness of resilience plans relating to the public health and social care of the NY population tested; NYCC action plan developed and implemented based on the debrief report recommendations and all multi agency learning (including the flood reporting tool and simplification of information flow); members of national steering group on volunteers; BCP post audit action plan; Multi Agency cyber threat event held; Ready for Anything campaign; provided input to and engaged with national learning and development of best practice following incidents locally, regionally and nationally; use of Office 365 tools to increase engagement and response capability in effective planning and coordination of incidents; increased team to support Covid response and ability to deal with concurrent incidents; LRF workplan through to 2024; partnership work with Directorates, District Councils, Migration Yorkshire and other partners to support refugee resettlement in the County.

Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3

Phase 3 - Risk Reduction Actions

		Action Manager	Action by	Completed
Reduction	15/614 - Continue to work with our partners in Public Health England, the NHS and the wider North Yorkshire local resilience forum to share the information and messages of reassurance being issued by the lead agencies	Dir Public Health	Sun-31-Jul-22	
Reduction	15/637 - Continue to ensure business continuity plans are reviewed, exercised and kept up to date	CD SR	Sun-31-Jul-22	
Reduction	15/652 - Continue to work with Directorates, District Councils, Migration Yorkshire and other partners to support Afghan resettlement, both into permanent housing in the County and whilst in temporary placements organised by the Home Office in bridging hotels in the County	CSD AD PPC	Sun-31-Jul-22	
Reduction	20/970 - Continue to ensure effective co-ordination and communication with County and District/Borough Council services & NYLRF in light of reduction in resources including LGR (ongoing)	CSD AD PPC	Sun-31-Jul-22	
Reduction	20/971 - Continue to ensure effective and efficient processes are embedded amongst all partners to prioritise work streams (incl. plans, training and exercises) (ongoing)	CSD AD PPC	Sun-31-Jul-22	
Reduction	343/788 - Respond to call to evidence on review of local resilience, National Resilience Strategy and Civil Contingencies Act	CSD PPC HoR&E	Sat-30-Apr-22	
Reduction	343/789 - Progress closer partnership working with City of York; SLA in place to provide services to CoY on a pilot basis.	CSD PPC HoR&E	Thu-31-Mar-22	Mon-31-Jan-22
Reduction	343/790 - Work through recommendations from Covid debrief to inform responses to future incidents	CSD PPC HoR&E	Sun-31-Jul-22	

Phase 4 - Post Risk Reduction Assessment

Probability	L	Objectives	L	Financial	H	Services	L	Reputation	M	Category	3

Phase 5 - Fallback Plan

Risk Register: **month 6 (Feb 2022) – detailed**
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Report Date: **24ᵗʰ February 2022 (pw)**

		Action Manager
Fallback Plan	20/207 - Embedded practice based on Response to Major and Critical Incident protocols	Chief Exec

Risk Register: **month 6 (Feb 2022) – detailed**
Next review due**: July 2022**
Report Date: **24th February 2022 (pw)**

Phase 1 - Identification							
Risk Number	15/243	**Risk Title**	15/243 - Carbon Neutral	**Risk Owner**	Chief Exec	**Manager**	CSD AD PPC
Description	Failure to support the Council's aspiration to achieve carbon neutrality by 2030 resulting in unmet public expectation and missed opportunities for energy spend reduction			**Risk Group**	Environmental	**Risk Type**	PPC 343/241

Phase 2 - Current Assessment									
Current Control Measures		Leadership commitment; Executive task group; Scrutiny working group; street light conversion to LEDs; Corporate Building energy efficiency schemes; LGA guidance for councillors; Carbon Reduction Plan for Council adopted by Executive & Chief Executive; Beyond Carbon board and programme management established within B2020 programme; climate change impact assessment tool enables decision makers to better understand the impact of the decisions that they are being asked to make; £1m pump-priming fund established in MTFS to support implementation of carbon reduction plan.							
Probability	L	**Objectives**	L	**Financial**	M	**Services**	L	**Reputation**	H	**Category**	3

Phase 3 - Risk Reduction Actions					
			Action Manager	**Action by**	**Completed**
Reduction	343/777 - Utilisation of £1m pump-priming fund established in MTFS to support implementation of carbon reduction plan.		CSD AD PPC	Thu-31-Mar-22	
Reduction	343/785 - Integration of carbon reduction plan into council plan and KPIs into Q performance reports		CSD AD PPC	Thu-31-Mar-22	Mon-31-Jan-22
Reduction	343/786 - Ongoing review of implementation of climate change impact assessment tool to ensure that it is effective and efficient in enabling decision makers to better understand the impact of the decisions that they are being asked to make		CSD AD PPC	Thu-31-Mar-22	

Phase 4 - Post Risk Reduction Assessment											
Probability	L	**Objectives**	L	**Financial**	M	**Services**	L	**Reputation**	H	**Category**	3

Phase 5 - Fallback Plan	
	Action Manager
Fallback Plan	

Risk Register: **month 6 (Feb 2022) – detailed**
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Report Date: **24ᵗʰ February 2022 (pw)**

Phase 1 - Identification

Risk Number	15/29	Risk Title	15/29 - Corporate Governance and Ensuring Legality	Risk Owner	Chief Exec	Manager	CSD ACE LDS
Description	Failure to ensure adequate Corporate Governance arrangements across the County Council to ensure that the Council acts lawfully in its operations and decision making resulting in inadequate control and stewardship; given the environment of greater risk taking and expansion of the types of activities the Council is now involved in resulting in challenge and non delivery of decisions, financial implications and loss of reputation particularly given service and statutory obligations			Risk Group	Legislative	Risk Type	LDS 17/6

Phase 2 - Current Assessment

Current Control Measures	Lawyers and DSO's engage with 2020 Programme and services; delegation scheme; constitution; training; legislation monitoring and advice notes/briefings; increased monitoring of committee reports; ACE LDS on MB; Proforma for Executive Reports covering major issues; Monitoring complaints and commendation policy and system; monitoring of the Forward Plan; Democratic Services IT system; compliance with rules on access to information; Corporate Governance Officers Group; Local Code of CG; Corporate Governance Checklist; Annual Governance Statement; Statements of Assurance across the Council; Controls in Risk management, Business Continuity and Information Governance; views of external Auditors; Audit Committee in-depth consideration; LGA corporate peer review; GDPR impacts understood; Exec subcommittee and Brierley Board established as part of governance arrangements; introduction of virtual decision making processes

Probability	M	Objectives	L	Financial	M	Services	M	Reputation	M	Category	4

Phase 3 - Risk Reduction Actions

		Action Manager	Action by	Completed
Reduction	15/57 - Continue to ensure effective monitoring of governance and operational requirements of new legislation (eg. Health Integration, Combined Authorities) and make sure services and teams are aware impact on their areas	CD SR CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/251 - Continue to ensure compliance with rules on access to information	CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/369 - Review decision and procedures after a successful challenge	CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/370 - Ensure early legal advice is provided within the NY Transformation Programme which is particularly important due to diminishing resources	CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/449 - Continue to provide governance and legal advice on key issues (eg. impact of staff shortages due to Covid, devolution, LGR)	CD SR CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/513 - Annual Review of Corporate Governance Arrangements by Audit Committee	CD SR	Fri-31-Dec-21	Fri-31-Dec-21
Reduction	15/824 - Continue to strengthen links with Directorates including liaison by Monitoring Officer and team with Directorates and ensure consultation on legality of major initiatives	CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/825 - Ongoing monitoring of committee reports and decision making to ensure Council decision making takes account of relevant considerations including EIAs and consultation requirements	CSD ACE LDS	Sun-31-Jul-22	
Reduction	15/838 - Carry out mandatory governance training for Members covering key areas eg data protection, ethical standards	CSD ACE LDS	Sun-31-Jul-22	
Reduction	17/47 - Ensure the council recognises that health integration is a large area of new and complex business that needs the right approach to ensure sustainable success	CSD ACE LDS	Sun-31-Jul-22	

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Reduction	17/502 - Ensure we continue to provide adequate support to the newer councillors to enable them to make appropriate decisions within the legislative framework	CSD ACE LDS	Sun-31-Jul-22	
Reduction	17/588 - Continued liaison with procurement to ensure that processes remain robust and resistant to challenge	CSD ACE LDS	Sun-31-Jul-22	
Reduction	17/625 - Ensure the risk of ongoing use of remote access, live broadcast meetings and decisions made by a committee in consultation with the Chief Executive Officer continue to be understood	CSD ACE LDS	Sun-31-Jul-22	

Phase 4 - Post Risk Reduction Assessment

Probability	M	**Objectives**	L	**Financial**	M	**Services**	M	**Reputation**	M	**Category**	4

Phase 5 - Fallback Plan

		Action Manager
Fallback Plan	15/169 - Review failing areas in existing arrangements and plan for improvement	CSD ACE LDS

North Yorkshire County Council