AUDIT COMMITTEE

17 MARCH 2025

RISK REGISTER FOR CENTRAL SERVICES

Report of the Corporate Director – Resources

1.0 **PURPOSE OF THE REPORT**

1.1 To provide details of the **Risk Register** and other related issues for Central Services.

2.0 BACKGROUND

2.1 The Audit Committee is required to assess the quality and effectiveness of the corporate governance arrangements operating within the Council. In relation to Central Services the Committee receives assurance through the work of internal audit, together with the Directorate Risk Register.

2.2 This report sets out those risks in relation to Central Services and aims to provide Committee with assurance around work being undertaken to manage and mitigate them where it is possible to do so.

3.0 DIRECTORATE RISK REGISTER

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

3.2 The Council uses a 5x5 risk assessment ranging from very low to very high in terms of both likelihood and impact: Once the likelihood and impact for a risk have been assessed, the risk scoring is calculated, using the table below.

Likelihood		Very Low	Low	Medium	High	Very High
	Very High	5	10	15	20	25
	High	4	8	12	16	20
	Medium	3	6	9	12	15
	Low	2	4	6	8	10
	Very Low	1	2	3	4	5
		Very Low	Low	Medium	High	Very High
		Impact				

Once a risk has been assessed, the required action is determined by the following table.

Colour	Score	Assessment	Required Action
	1 - 2	**Very Low** (tolerate)	Risk should not appear in risk register.
	3 - 4	**Low** (tolerate)	Regular monitoring, action plan not essential, acceptable just to maintain current controls.
	5 - 9	**Medium** (treat)	Frequent monitoring, action plan required.
	10-12	**Medium High** (treat)	Frequent monitoring, action plan required to prevent from becoming a red risk.
	15 - 16	**High** (treat)	Constant monitoring, action plan required and escalation to next level for consideration / inclusion.
	20 - 25	**Very High** (treat / terminate)	Constant monitoring, action plan required and escalation to next level with request for inclusion. Consider terminating activity (if an option) where score cannot be reduced by risk mitigation.

3.3   The 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.

3.4   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.

3.5   An interim review of the register will take place in June 2025.

3.6   Central Services to face a number of key issues which are reflected throughout the Risk Register. Given the role of Central Services (such as Human Resources, Technology, Finance and Business Support) in transforming its own services and supporting transformation across the organisation, workforce capacity continues to present a particular challenge.

3.7   Although mitigating activities continue, there have been some movements (both up and down) in the risk rankings over the period since the last review:

- Customer Services – this risk has increased from medium to high for both likelihood and impact as the effects of front-line service transformation and lack of a single approach to handling customer interactions continues. Activities are planned across systems, processes (including a new customer relationship management system and website improvements) and our workforce, throughout 2025/26.
- Transformation Programme – this risk has also increased from medium to high in terms of likelihood – almost 2 years into the programme good progress has been made but the financial challenges continue to grow with capacity issues in some key frontline services; a backlog of investment needs; and an even higher level of demand for people related services. Further transformation opportunities remain, for example through deploying a single operating model; a single customer strategy; using data and digital capability; and looking to be more efficient and best in class in all service areas. However, these involve greater complexity and will therefore take some time to be achieved.
- Information governance and cyber security has reduced in likelihood from high to medium following mitigating activities undertaken over the last year.

Whilst this risk has reached its target score, further actions and monitoring will continue to ensure this on-going risk is managed effectively.

- Health and safety risk has also reduced in likelihood from high to medium as structures are now established and policies are becoming embedded. More actions are planned over 2025/26 to further reduce the likelihood of this risk.

3.8 No new risks have been identified since the last review.

3.9 The following actions have been completed in the last reporting period:

- A revised approach to transformation governance has been approved by Management Board which includes agreement on initial cross-cutting themes on "customer" and "the way we work".
- A consolidation transformation programme plan has been produced.

4.0 OTHER ISSUES OF NOTE

4.1 The extent and complexity of change that the directorate is supporting across the whole Council as well its own transformation is challenging and work to refine priorities is underway alongside the refreshed approach to transformation governance.

4.2 The Property team restructure is nearing completion which will enable the service to take forward its transformation priorities. Property rationalisation following LGR and the move to a 'corporate landlord' model is providing a focus for our transformation work - the diversity of unitary council services and asset base means the opportunity to make efficiency savings. Re-procurement of energy contracts has already delivered considerable savings which have been incorporated into our savings plans and the approved budget.

4.3 Revenues and Benefits are currently overseeing annual billing of Council Tax and Business Rates following budget Council whilst the implementation of a new single revenues and benefits system is in progress. Following harmonisation of Council Tax, bringing the seven legacy systems together into a new single instance is a major project. Go-live is planned for June 2025 and this will deliver standardised, more efficient ways of working, reducing risk within the control environment and supporting improved customer service.

4.4 Audit Committee is well aware of the challenges across the Finance team with the multitude of legacy statements of accounts and external audits but alongside this there is still work to rationalise and standardise ways of working. Key systems projects involving the implementation of a new finance system and the convergence of 8 income management systems, are in progress. Project teams have been established for both of these projects and the necessary resources are in place to meet our planned milestones. The new finance system project is working towards a go-live date of 1 April 2026 and income management systems are converging on a phased basis. Both of these projects will facilitate new, standard ways of working and the finance system in particular will automate workflows and improve the user experience which in turn will improve financial management, reporting and control of the Council's finances.

4.5 A Business Support Improvement Board has been established to oversee a wide ranging programme to deliver £1m+ savings over the coming three years. The scope for standardisation and rationalisation is significant but with much aligned with frontline

service transformation, the pace to some extent will be driven by service priorities. The project team are working through the opportunities that have been identified so far and quicker wins will be progressed over the coming months whilst more fundamental change will be planned over the medium term.

5.0   RECOMMENDATION

5.1   That the Committee notes the Risk Register and issues for Central Services and provides feedback or comments thereon.

GARY FIELDING
Corporate Director – Resources
March 2025

Central Services Directorate

Risk Register: **Annual review (Jan 2025) – detailed**
Next Review Due: **June 2025**
Report Date: **10th February 2025 (cpc)**

Phase 1 - Identification						
Ref.	CSD_9	**Title**	Customer Service	**Risk Owner**	CD RES	**Risk Manager**	RES AD CR&B
Risk Description	Failure to provide an effective and efficient customer service function that meets the needs of all customers resulting in loss of reputation and inability to keep pace with organisational transformation			**Risk Group**	Customer	**Linked Risk(s)**	RCU_2; RES_11

Phase 2 - Current Assessment					
Current Control Measures					
Existing website functioning from day1; customer service centre; data feedback to inform action plan; existing compliments and complaints procedure; the Recruitment Campaign in place; Head of Service in place; Customer Board					
Current Probability	H	**Current Impact**	H	**Current Risk Score**	**16**	**Current Risk Category**	High

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_CSD_11	Develop and implement a Customer Strategy to ensure that the customer is at the heart of everything we do; will require approval prior to implementation; in progress under the Customer Programme transformation theme	RES AD CR&B	31-Mar-2025 ▶	
RR_CSD_12	Carry out a review of the process for assessing and responding to complaints and how this links to customer service	ACE Loc Eng; RES CR&B HoCE	31-Mar-2025 ▶	
RR_CSD_13	Carry out a review of Telephony systems and develop and implement an effective and efficient system that meets customer needs; informal supplier meetings taking place, procurement to commence Apr 25	RES AD Tech; RES CR&B HoCSFF	31-Mar-2026 ▶	
RR_CSD_14	Continue to improve the website to ensure a better customer experience in joining up their journey for services	Loc Eng AD Comms; RES AD CR&B	31-Aug-2025 ▶	
RR_CSD_15	Continue to work with HR on the Recruitment Campaign to ensure sufficient recruitment for the Customer Service Centre	RES CR&B HoCSFF	31-Aug-2025 ▶	
RR_CSD_16	Continue to work with CSC employees to ensure continued professional development	RES CR&B HoCSFF	31-Aug-2025 ▶	
RR_CSD_17	Embed digital first approach to ensure a one front door approach with 24/7 access	Loc Eng AD Comms; RES AD CR&B; RES Dir Transf	31-Aug-2025 ▶	
RR_CSD_6	Continue to meet and communicate with customers to understand their needs and consequent requirements (customer satisfaction survey to be carried out)	RES CR&B HoCE	31-Mar-2025 ▶	
RR_CSD_7	Gather and use data around customer voice and customer insight data including website hits and complaints to challenge the way we work, always aiming to improve the customer experience by making services easy to use, accessible and reliable; being considered under the customer programme	RES CR&B HoCE	31-Jul-2025 ▶	
RR_CSD_9	Develop and implement a Customer Relationship Management system to log customer interaction (as a potential replacement for Lagan and other CRM systems); procurement has begun	RES AD Tech; RES CR&B HoCSFF	31-Aug-2025 ▶	

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RR_RCU_32	Review out of hours provision; a series of projects will look at all aspects of this and how they are best delivered going forward	RES AD CR&B	31-Mar-2025	▶	
RR_RCU_38	Develop a BAU change team to ensure work changes outside of the transformation programme are understood and can be resourced	RES CR&B HoCSFF	31-Mar-2025	▶	
RR_RCU_39	Recognise the increasing demand for social care service and impact on customer service capacity and service provision	RES CR&B HoCSFF	31-Aug-2025	▶	
RR_RCU_40	Develop case studies to help understand the impact on customer service resource of delivering key changes, including staff training	RES CR&B HoCSFF	31-Aug-2025	▶	

Phase 4 - Target Risk Assessment							
Target Probability	M	Target Impact	H	Target Risk Score	**12**	Target Risk Category	Medium High

Phase 5 - Fallback Plan
Fallback Plan
Rely on existing systems and processes and carry out a full review to ensure improvement for customers

Central Services Directorate

Phase 1 - Identification							
Ref.	CSD_3	**Title**	North Yorkshire Transformation Programme	**Risk Owner**	Chief Exec	**Risk Manager**	CD RES
Risk Description	Failure to deliver a coherent NY transformation programme and alignment to the target operating model. In bringing eight pre-existing authorities to form one new council for North Yorkshire while delivering service operational requirements and savings requirements			**Risk Group**	Strategic	**Linked Risk(s)**	CRR_13; RES_4; RTR_2

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;						
Current Probability	H	**Current Impact**	H	**Current Risk Score**	**16**	**Current Risk Category**	High

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_CRR_45	Provide an effective and efficient customer service across the Council where all staff and services work together to meet the needs of all customers	CD RES	31-Mar-2025 ▶	
RR_CSD_18	Management Board to agree (29 February) a revised approach to the transformational programme for North Yorkshire Council incorporating an outline strategy document and governance arrangements, an operating model, the approach to culture change, an outline delivery programme for the MTFS and convergence. This will also include an agreement on initial cross cutting themes such as customer and the way we work	CD RES; RES Dir Transf	31-Mar-2024 ✅	31-Mar-2024
RR_CSD_19	Ensure an effective technology plan is in place to drive the required system convergence in support of transformation priorities	RES AD Tech	31-Jul-2025 ▶	
RR_RES_23	Identify all statutory and policy driven initiatives across the Council which require some form of transformation; including within the convergence work	ACE LDS	31-Jul-2025 ▶	
RR_RES_24	Produce a consolidated programme plan; We have clarity of the elements of the programme that are linked to the MTFS, nearing completion on the plan for convergence of teams.	RES Dir Transf	31-Mar-2024 ✅	31-Mar-2024
RR_RES_25	Continue to review and transform operational service requirements as part of the Programme in order to maximise efficiency	All Mgt Board	31-Jul-2025 ▶	
RR_RES_80	Continue to review and improve the Transformation Programme, ensuring clarity around aims and objectives	RES Dir Transf	31-Jul-2025 ▶	
RR_RTR_14	Further develop the Target Operating Model and introduce systems to ensure compliance	RES Dir Transf	31-Oct-2025 ▶	
RR_RTR_15	Develop a cultural change programme to ensure we continue to work together as a single coherent and effective unitary council	All Mgt Board	31-Mar-2025 ▶	
RR_RTR_16	Establish clarity around stronger teams and moving towards a converged position	RES Dir Transf	31-Jul-2025 ▶	
Phase 4 - Target Risk Assessment				

Central Services Directorate

Target Probability	M	Target Impact	M	Target Risk Score	**9**	Target Risk Category	Medium
Phase 5 - Fallback Plan							
Fallback Plan							
Carry out a full review and ensure an effective revision of the programme plan							

Central Services Directorate

Risk Register: **Annual review (Jan 2025) – detailed**
Next Review Due: **June 2025**
Report Date: **10th February 2025 (cpc)**

Phase 1 - Identification								
Ref.	CSD_2	**Title**		Information Governance and Cyber Security (corporate risk)	**Risk Owner**	Chief Exec	**Risk Manager**	CD RES
Risk Description	Ineffective information governance and cyber security 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 breach, loss of data, loss of systems, loss of reputation and inability to operate effectively and discharge our responsibilities				**Risk Group**	Info Gov	**Linked Risk(s)**	CRR_4; RES_2

Phase 2 - Current Assessment

Current Control Measures

Information Management and 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 NYC 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; information sharing agreements in place where required; UK GDPR compliance; robust programme of governance in place to manage all changes taking place in relation to LGR;

Current Probability	M	**Current Impact**	H	**Current Risk Score**	12	**Current Risk Category**	Medium High

Phase 3 - Risk Mitigation Plan

Reduction Action		Action Manager	Due Date and status		Date Completed
RR_CSD_5	Continue further improvement of information risk management processes; revised service register in place further work will progress via CIGG	RES AD Tech	31-Jul-2025	▶	
RR_RES_5	Continue to ensure business continuity plans are reviewed, exercised and kept up to date for Council services and trading companies; currently supporting NYC with any live BC incidents to ensure that service is maintained; technology and RET teams working together to establish interdependencies and priorities	Loc Eng HoR&E	31-Jul-2025	▶	
RR_RES_6	Create a Data Quality Assurance framework process that provides a centralised record of Information Asset Ownership, data accuracy and data quality review;	RES AD Tech	31-Mar-2025	▶	
RR_RES_75	Monitor the delivery and effectiveness of the Information Management and Governance Strategy, and update if required	CD RES; Veritau	31-Oct-2025	▶	
RR_RES_76	Ensure that mitigating actions are carried out as a result of lessons learned from data breaches	RES AD Tech	31-Jul-2025	▶	

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RR_RES_77	Deliver ongoing communications and training to raise awareness of Information Governance risks and council policies (ongoing)	CD RES; Veritau	31-Oct-2025	▶	
RR_RES_8	Continue to review resourcing to ensure required delivery of Veritau service (ongoing)	CD RES	31-Oct-2025	▶	
RR_RES_9	Continue a review of IG procedures and providing support to the Brierley Group of Companies;	CD RES; Veritau	31-Jul-2025	▶	
RR_RES_90	Carry out no-notice cyber exercise to test robustness of disaster recovery and business continuity plans	CD RES	31-Jul-2025	▶	
RR_RTE_41	Carry out full review of information assets and ownership to ensure responsibility is taken where appropriate for all information	RES AD Tech	31-Mar-2025	▶	

Phase 4 - Target Risk Assessment						
Target Probability	M	**Target Impact**	H	**Target Risk Score**	**12**	**Target Risk Category**	Medium High

Phase 5 - Fallback Plan
Fallback Plan
Review and revise Action Plan and new technology and continue to raise awareness.

Central Services Directorate

Phase 1 - Identification							
Ref.	CSD_4	**Title**	**Effectiveness, Capacity and Skills of Staff and Workplace Health and Wellbeing (including impact of LGR)**	**Risk Owner**	Chief Exec	**Risk Manager**	CSD MT
Risk 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/transformation alongside existing responsibilities.			**Risk Group**	Capacity	**Linked Risk(s)**	HHR_6

Phase 2 - Current Assessment
Current Control Measures

Capacity: Reviewing of Transformation resources; savings re-profiled and included in budget/MTFS report; review priorities of systems and projects across the Council;
Health and Wellbeing: 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 24hr 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; Workplace Health Improvement Adviser post established; diversity networks for protected characteristics and a range of support groups for staff including: Parenting; Carers; Parents of Children with Autism; Menopause; and Men's Health established

Current Probability	H	**Current Impact**	M	**Current Risk Score**	**12**	**Current Risk Category**	Medium High

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_CSD_1	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 MT	31-Jul-2025 ▶	
RR_CSD_2	Continue to prioritise and manage pressures on services on an ongoing basis	CSD MT	31-Jul-2025 ▶	
RR_HHR_22	Continue to enable staff to initiate and develop initiatives to improve their health and wellbeing at work	HR SMT	31-Jul-2025 ▶	
RR_HHR_23	Progress a series of health and wellbeing initiatives	HR SMT	31-Jul-2025 ▶	
RR_HHR_24	Continued promotion of good mental health including Mental Health Awareness week activities	HR SMT	31-Jul-2025 ▶	
RR_HHR_25	Develop wellbeing spaces in major offices and workplaces in line with property optimisation	HR SMT	31-Jul-2025 ▶	
RR_HHR_26	Maintain engagement with H&S team to ensure that employee DSE and Homeworking risk assessments are carried out, reasonable adjustments are made and any concerns raised.	HR SMT	31-Jul-2025 ▶	
RR_HHR_27	Look to develop an approach to wellbeing that ensures help and resources are available to those staff who do not have regular access to technology and reflects the emerging structures	HR SMT	31-Jul-2025 ▶	
RR_HHR_41	Continue to embed and monitor the substance misuse policy	HR SMT	31-Jul-2025 ▶	

Phase 4 - Target Risk Assessment

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Risk Register: **Annual review (Jan 2025) – detailed**
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Target Probability	H	Target Impact	M	Target Risk Score		12	Target Risk Category	Medium High
Phase 5 - Fallback Plan								
Fallback Plan								
Review and revise resource allocation where possible and consider additional funding and capacity where required								

Central Services Directorate

Phase 1 - Identification							
Ref.	CSD_6	**Title**	Health & Safety	**Risk Owner**	Chief Exec	**Risk Manager**	CD RES
Risk Description	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution (this includes the impact of communicable diseases)			**Risk Group**	Legislative	**Linked Risk(s)**	RES_8

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 cyps.info sites; Directorate RM groups; RM Working groups; H&S Champions and lead officers; reporting on a regular basis; on-going H&S risk assessment, training, monitoring and audit; corporate H&S training; managers' and employees' online H&S training and other modules revised; shared service with City of York Council; BondApp B-Safe system implemented; accident reporting and investigation and B-Safe well embedded, trend analysis provided to RM&R Groups; work in consultation with trade unions to develop H&S actions plan and strategies (which will be reported at the newly established H&S Committee) responding to trade union H&S inspections; corporate H&S procedures reviewed and revised for NYC

Current Probability	M	**Current Impact**	H	**Current Risk Score**	12	**Current Risk Category**	Medium High

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_RCP_23	Following the H&S service restructure, grades are based on levels of competence; project to ensure that those delivering H&S services are competent to recognised industry standards and members of relevant professional bodies, this will be supported by a programme of training and development for staff.	RES CP&P HoH&SRM	31-Jul-2025 ▶	
RR_RCP_8	Carry out themed property compliance audit and audits by H&S team to determine compliance level and inform approach; need to develop a reporting / meeting process and framework	RES CP&P HoPC&FM	31-Mar-2025 ▶	
RR_RES_51	Continue to review H&S management arrangements within Property	RES CP&P HoPC&FM; RES CP&P HoSP	31-Jul-2025 ▶	
RR_RES_53	Develop a programme of H&S monitoring, audits and inspections to reflect the new organisation and how to report on key issues	RES CP&P HoH&SRM	31-Jul-2025 ▶	
RR_RES_54	Ensure appropriate operating standards of H&S risk assessments exist and are being implemented locally and across the NYC property portfolio; will include the creation and use of a risk assessment repository	RES CP&P HoH&SRM	31-Jul-2025 ▶	
RR_RES_56	Revise the Corporate H&S procedures to reflect the new organisation; currently working with departments to identify areas of significant risk; full suite of H&S arrangements uploaded to the intranet and being used by teams	RES CP&P HoH&SRM	31-Jul-2025 ▶	
RR_RES_57	Ensure understanding of the H&S operating environment across NYC through regular attendance at Corporate and Directorate Risk Management and Resilience Groups, and develop H&S Action Plans which are agreed by the relevant Groups; these plans are being developed and will be owned by the respective management teams	RES CP&P HoH&SRM	31-Jul-2025 ▶	

Phase 4 - Target Risk Assessment							
Target Probability	L	**Target Impact**	H	**Target Risk Score**	8	**Target Risk Category**	Medium

Phase 5 - Fallback Plan

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Central Services Directorate

Risk Register: **Annual review (Jan 2025) – detailed**
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Fallback Plan
Liaise with HSE, media management, implement fatal/serious injury response guide

Central Services Directorate

Phase 1 - Identification							
Ref.	CSD_8	**Title**	**Corporate Governance and Ensuring Legality**		**Risk Owner**	Chief Exec	**Risk Manager**	ACE LDS

Risk Description	Failure to ensure adequate Corporate Governance arrangements across the 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	**Linked Risk(s)**	LDS_11

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;

Current Probability	M	**Current Impact**	M	**Current Risk Score**	9	**Current Risk Category**	Medium

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_LDS_49	Continue to ensure effective monitoring of governance and operational requirements of new legislation (e.g. Health Integration, Combined Authorities) and make sure services and teams are aware impact on their areas	ACE LDS; CD RES	31-Jul-2025	▶
RR_LDS_50	Continue to ensure compliance with rules on access to information	ACE LDS	31-Jul-2025	▶
RR_LDS_51	Review decision and procedures after a successful challenge	ACE LDS	31-Jul-2025	▶
RR_LDS_52	Continue to provide governance and legal advice on key issues (e.g. Setting up and running the mayoral combined authority, planning and licensing)	ACE LDS; CD RES	31-Jul-2025	▶
RR_LDS_53	Annual Review of Corporate Governance Arrangements by Audit Committee	CD RES	31-Jul-2025	▶
RR_LDS_54	Continue to strengthen links with Directorates including liaison by Monitoring Officer and team with Directorates and ensure consultation on legality of major initiatives	ACE LDS	31-Jul-2025	▶
RR_LDS_55	Ongoing monitoring of committee reports and decision making to ensure Council decision making takes account of relevant considerations including EIAs and consultation requirements	ACE LDS	31-Jul-2025	▶
RR_LDS_56	Carry out governance training for new Members covering key areas e.g. data protection, ethical standards; review underway to establish training requirements for members	ACE LDS	31-Jul-2025	▶
RR_LDS_57	Ensure the council recognises that health integration ICS is a large area of new and complex business that needs the right approach to ensure sustainable success	ACE LDS	31-Jul-2025	▶

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RR_LDS_58	Ensure we continue to provide adequate support to the newer councillors to enable them to make appropriate decisions within the legislative framework	ACE LDS	31-Jul-2025	▶	
RR_LDS_59	Continued liaison with Commercial, Property and Procurement services to ensure that processes remain robust and resistant to challenge	ACE LDS	31-Jul-2025	▶	
RR_LDS_60	Monitor details of future trading relationships, and understand and act upon any guidance provided relating to CPR and Subsidy Control; training provided for key officers.	ACE LDS	31-Jul-2025	▶	
RR_LDS_73	Consider a post LGR and restructure review of governance and decision making including external companies	ACE LDS	31-Jul-2025	▶	

Phase 4 - Target Risk Assessment							
Target Probability	M	**Target Impact**	M	**Target Risk Score**	**9**	**Target Risk Category**	Medium

Phase 5 - Fallback Plan
Fallback Plan
Review failing areas in existing arrangements and plan for improvement

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Central Services Directorate

Risk Register: **Annual review (Jan 2025) – detailed**
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Phase 1 - Identification							
Ref.	CSD_7	**Title**	Significant Incidents (Corporate)		**Risk Owner**	Chief Exec	**Risk Manager**	ACE Loc Eng
Risk 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	**Linked Risk(s)**	CRR_8; LEN_2

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 Services; community resilience; silver response in the 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; NYC 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, Migration Yorkshire and other partners to support refugee resettlement in the County; Corp Emergency Planning Group with annual workplan

Current Probability	L	**Current Impact**	H	**Current Risk Score**	8	**Current Risk Category**	Medium

Phase 3 - Risk Mitigation Plan				
Reduction Action		**Action Manager**	**Due Date and status**	**Date Completed**
RR_LEN_2	Continue to work with new and existing partners in Public Health England, the NHS, the wider North Yorkshire local resilience forum and the new Combined Authority to share the information and messages of reassurance being issued by the lead agencies	Dir Public Health	31-Jul-2025 ▶	
RR_LEN_3	Continue to ensure business continuity plans are reviewed, exercised and kept up to date for Council services and trading companies; currently supporting NYC with any live BC incidents to ensure that service is maintained	CD RES	31-Jul-2025 ▶	
RR_LEN_37	Harmonise processes and associated risk assessments for operational response to incidents to ensure H&S of staff is maintained	ACE Loc Eng	31-Jul-2025 ▶	
RR_LEN_38	Ensure that NYC risks consider the contents of the National Security Risk Assessment and Community Risk Register	ACE Loc Eng	31-Jul-2025 ▶	
RR_LEN_5	Understand resource pressures including the Impact of LGR and those in multi-faceted roles on our ability to respond to emergencies	ACE Loc Eng	31-Jul-2025 ▶	
RR_LEN_6	Continue to ensure effective and efficient processes are embedded amongst all partners to prioritise work streams (incl. plans, training and exercises) (ongoing)	ACE Loc Eng	31-Jul-2025 ▶	
RR_LEN_7	Continue to embed the recommendations from incident debriefs within practice through the Corp Emergency Planning Group	Loc Eng HoR&E	31-Jul-2025 ▶	

Phase 4 - Target Risk Assessment							
Target Probability	L	**Target Impact**	H	**Target Risk Score**	8	**Target Risk Category**	Medium

Central Services Directorate

Risk Register: **Annual review (Jan 2025) – detailed**
Next Review Due: **June 2025**
Report Date: **10th February 2025 (cpc)**

Phase 5 - Fallback Plan
Fallback Plan
Embedded practice based on Response to Major and Critical Incident protocols

Risk Reduction Action Status Key	
Symbol	Meaning
	The risk reduction action is overdue for completion or review.
	The risk reduction action is approaching its expected completion or review date.
	The risk reduction action is on target.
	The risk reduction action has been completed.

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Risk Trend	Risk	Description	Risk Owner	Risk Manager	Curr Prob	Curr Imp	Current Risk Score	Current Category	Targ Prob	Targ Imp	Target Risk Score	Target Category	FB Plan?
⬆	**CSD_9 Customer Service**	Failure to provide an effective and efficient customer service function that meets the needs of all customers resulting in loss of reputation and inability to keep pace with organisational transformation	CD RES	RES AD CR&B	H	H	16	High	M	H	12	Medium High	✔
⬆	**CSD_3 North Yorkshire Transformation Programme**	Failure to deliver a coherent NY transformation programme and alignment to the target operating model. In bringing eight pre-existing authorities to form one new council for North Yorkshire while delivering service operational requirements and savings requirements	Chief Exec	CD RES	H	H	16	High	M	M	9	Medium	✔
⬇	**CSD_2 Information Governance and Cyber Security (corporate risk)**	Ineffective information governance and cyber security 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 breach, loss of data, loss of systems, loss of reputation and inability to operate effectively and discharge our responsibilities	Chief Exec	CD RES	M	H	12	Medium High	M	H	12	Medium High	✔
➖	**CSD_4 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/transformation alongside existing responsibilities.	Chief Exec	CSD MT	H	M	12	Medium High	H	M	12	Medium High	✔
⬇	**CSD_6 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 communicable diseases)	Chief Exec	CD RES	M	H	12	Medium High	L	H	8	Medium	✔

NORTH YORKSHIRE COUNCIL

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Risk Trend	Risk	Description	Risk Owner	Risk Manager	Curr Prob	Curr Imp	Current Risk Score	Current Category	Targ Prob	Targ Imp	Target Risk Score	Target Category	FB Plan?
▬	**CSD_8 Corporate Governance and Ensuring Legality**	Failure to ensure adequate Corporate Governance arrangements across the 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	ACE LDS	M	M	9	Medium	M	M	9	Medium	✔
▬	**CSD_7 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	ACE Loc Eng	L	H	8	Medium	L	H	8	Medium	✔

Risk Trend Key	
Symbol	**Meaning**
⬆	Risk ranking has worsened since the last review.
▬	Risk ranking is the same as at last review.
⬇	Risk ranking has improved since the last review.
new	Risk is new or has been significantly altered since the last review.

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