The background of the slide features a large, light blue watermark of the University of Alberta crest. The crest is a shield divided into four quadrants. The top-left quadrant shows a castle tower, the top-right shows a stag's head with antlers, the bottom-left shows a three-masted sailing ship on waves, and the bottom-right shows an eagle with wings spread. Above the shield is a crown with four floral motifs. Below the shield is a banner with the motto 'ANNE FOR A'.

# **Agenda Item 8**

## **Corporate Risk Management Update**

Falkirk Council

**Title:** Corporate Risk Management Update  
**Meeting:** Executive  
**Date:** 18 June 2019  
**Submitted By:** Director of Corporate and Housing Services

**1. Purpose of Report**

1.1 This report provides a revised Corporate Risk Register (CRR), for approval.

**2. Recommendations**

**2.1 It is recommended that the Executive:**

**(1) approves the revised CRR, including:**

**Appendix 1: Summary of Corporate and Service Risks;**

**Appendix 2: Details of High Corporate Risks;**

**(2) seeks additional assurance from Chief Officers on risks, controls, and governance arrangements, as necessary; and**

**(3) identifies (or horizon scans) for any new and emerging risks.**

**3. Background**

3.1 The Executive agreed a revised Corporate Risk Management Policy and Framework (CRM Policy) in May 2018.

**4. Considerations**

4.1 The CRM Policy sets out the following roles of the Executive in relation to risk management:

- periodically review and approve the CRM Policy;
- consider risk management referrals from the Audit Committee;
- review and approve the Corporate Risk Register as appropriate;
- challenge Chief Officers on risk, such as the effectiveness of controls, governance arrangements, and progress with actions; and
- horizon scan for new and emerging risks.

- 4.2 The Audit Committee receives 6 monthly updates on the CRR and progress with embedding CRM arrangements. It's role includes reviewing and seeking assurance on the framework of risk management, governance, and control.

## **5. Consultation**

- 5.1 The Audit Committee considered the CRR in April 2019.
- 5.2 Members of Corporate Management Team (CMT) have been consulted.

## **6. Implications**

### **Financial**

- 6.1 There are no direct financial implications arising from this report. However, failure to manage corporate risks could have significant financial consequences.

### **Resources**

- 6.2 There are no direct resource implications arising from this report.

### **Legal**

- 6.3 There are no direct legal implications arising from this report. However, failure to manage corporate risks could have significant legal consequences.

### **Risk**

- 6.4 The key risks are failure to effectively identify, assess, mitigate, and report on the risks to delivering outcomes.
- 6.5 Risks continue to be monitored as part of the Council's governance arrangements, including Service Performance Planning, Council of the Future reviews, (Service) self assessments, and reviews of incidents, audits, and lessons learned.
- 6.6 The CRR outlines the risks to the Council. In addition, the IJB, CPP, Falkirk Community Trust, and the Council of the Future Program have their own risk and governance arrangements for monitoring the delivery of their strategy(s).

### **Equalities**

- 6.7 An Equality and Poverty Impact Assessment (EPIA) was not required for this report.

### **Sustainability / Environmental Impact**

- 6.8 An Environmental Impact Assessment (EIA) was not required for this report.

## **7. Conclusions**

- 7.1 The Executive will continue to receive CRR updates in line with the CRM Policy.

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**Director of Corporate & Housing Services**

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[hugh.coyle@falkirk.gov.uk](mailto:hugh.coyle@falkirk.gov.uk)

Date: 03 June 2019

### **Appendices**

1. Summary of Corporate and Service Risks;
2. Details of High Corporate Risks; and
3. Council Risk Register Key.

### **List of Background Papers**

- None

**Summary of Corporate and Service Risks****Table 1: High Corporate Risks**

Lead Service	Risk Title
AS	Health and Social Care Integration.
CS	Public Protection (Adults and Children).
CHS	Compromised security, or inefficient use, of the Council's data and information asset.
CHS	Cyber security incident compromises IT infrastructure, corporate application, social media channel, or data / information.
CHS	Failure to monitor, measure, manage, and mitigate the impacts of Welfare Reform and Poverty.
CHS	Failure to properly discharge equalities duties.
CHS	Failure to recognise, and act upon, the need for transformational change and continuous improvement.
CHS	Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.
CHS	Failures in workforce planning, including absence, vacancy management, and succession planning.
CHS	Insufficient funding to deliver services and deliver outcomes.
DS	Uncertainties surrounding Brexit.

**Table 2: Medium Corporate Risks**

Lead Service	Risk Title
CE	Failures in Leadership, Governance, and Decision Making.
CS	CONTEST, Integrity, and Serious Organised Crime.
CHS	Failure in Financial Management Control, or Assurance.
CHS	Failure to provide a safe environment for employees and visitors.
CHS	Procurement and Commissioning arrangements fail to secure best value, and demonstrate compliance with Council standards or legal requirements.
DS	Asset Management [Use, Condition, Suitability, Availability, and Reliability].
DS	Environmental Risks: Energy, Waste, and Sustainability.
DS	Resilience: Business Continuity and Emergency Planning.

**Table 3: High Service Risks**

Lead Service	Risk Title
CS	Closing the Gap in Attainment : risk of failure to deliver on the Education Plan – includes managing Pupil Equity Fund and Reforms.
CS	Community Justice Services.
CS	Getting It Right For Every Child (GIRFEC).
CS	Seatbelts on School Transport (Scotland) Act 2017 - Implications for Falkirk Council.
CHS	Failure to adhere to current and emerging building regulations and standards relating to fire safety within housing.

**Table 4: Medium Service Risks**

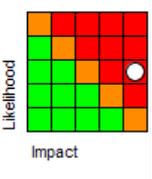
Lead Service	Risk Title
AS	Carers Act Implementation.
AS	Digital to Analogue Call Services (MECS - Mobile Emergency Call Service).
AS	Self-Management / Independent Living (including Self-Directed Support).
CS	Social Work – Failure to meet the challenges set out in the Chief Social Work Officer Annual Report 2017-18.
CS	Failure to Deliver Scottish Government Early Years Expansion (by 2020).
CS	Social Work Information System (SWIS) Replacement.
CS	Scottish Social Services Council (SSSC) Code of Conduct - Recent Changes.
CS	Tackling Bureaucracy and Reducing Workload in Schools.
CHS	Failure to meet the priorities set out within the Local Housing Strategy.
DS	Cemeteries / Head Stones Safety – Lessons Learnt from Fatal Accident at Craigton Cemetery, Glasgow.
DS	Prohibitions and Loss of Licences (including Fleet, Waste, and Burials).
DS	Regulatory Enforcement.
DS	TIF, Investment Zone, and EU Funds.

**Details of High Corporate Risks**

**Adult Services**

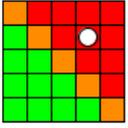
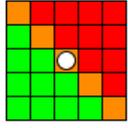
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)																										
COR_SWAS.03	Health and Social Care Integration																													
Governance Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood																										
	Health and Social Care	Head of Social Work Adult Services	Impact	Impact																										
Risk Statement	<p>The risk is that Adult Services fail to meet the commitments agreed by the IJB, as set out within the HSCP's Strategic Plan.</p> <p>The IJB maintains a Strategic Risk Register which assesses the risks to delivering their Strategic Plan. The risks include:</p> <table border="1"> <thead> <tr> <th colspan="2">Delivery of Strategic Plan</th> </tr> </thead> <tbody> <tr><td>1</td><td>Funding and /or demographic pressures</td></tr> <tr><td>2</td><td>Governance arrangements</td></tr> <tr><td>3</td><td>Partnerships</td></tr> <tr><td>4</td><td>Capacity and infrastructure</td></tr> <tr><td>5</td><td>Directions</td></tr> <tr> <th colspan="2">Performance, Oversight &amp; Quality Control</th> </tr> <tr><td>6</td><td>Assurance</td></tr> <tr><td>7</td><td>Commissioning</td></tr> <tr> <th colspan="2">Specific High Level Risks</th> </tr> <tr><td>8</td><td>Unscheduled Care</td></tr> <tr><td>9</td><td>Transition of Operational Management of NHS Services to Partnerships</td></tr> <tr><td>10</td><td>Brexit</td></tr> </tbody> </table> <p>A number of these risks are rated high, which reflects the level of change and uncertainty.</p>				Delivery of Strategic Plan		1	Funding and /or demographic pressures	2	Governance arrangements	3	Partnerships	4	Capacity and infrastructure	5	Directions	Performance, Oversight & Quality Control		6	Assurance	7	Commissioning	Specific High Level Risks		8	Unscheduled Care	9	Transition of Operational Management of NHS Services to Partnerships	10	Brexit
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Worst Case Consequences	<ul style="list-style-type: none"> <li>Financial and Project: Budget overspends due to inability to effectively manage pressures.</li> <li>Service failures.</li> <li>Harm: serious harm (death / injury) and disadvantage / inequalities.</li> <li>HR: significant issues, including stress absence / claims.</li> <li>Reputation: national media interest and / or loss of confidence.</li> <li>Service: opportunities to improve services, efficiencies, outcomes.</li> </ul>																													
Controls / Mitigation	<ul style="list-style-type: none"> <li>The IJB's Strategic Risk Register outlines actions for each of the strategic risks above.</li> <li>IJB Risk Strategy and governance framework.</li> </ul>																													
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> <li>IJB Strategic Risk Register is reviewed by Leadership Team and IJB Audit Committee quarterly.</li> <li>HSCP Leadership Team and Integration Joint Board receive regular risk and performance updates.</li> <li>Ongoing program of inspections, self-assessments, and audits.</li> </ul>																													
What more can we do to reduce the risk?	<ul style="list-style-type: none"> <li>The IJB's Strategic Risk Register outlines actions for each of the strategic risks above.</li> <li>IJB risk and governance arrangements are being improved.</li> <li>HSCP management and locality structures are being improved.</li> <li>Delivery Plans (including transformation projects) are being developed.</li> </ul>																													
Lessons Learnt	<ul style="list-style-type: none"> <li>Lessons Learnt will be considered as part of future HSCP Leadership Team risk reviews.</li> </ul>																													
<b>LATEST NOTES</b>																														
Latest Note / Review Date	The last risk update to the IJB was April 2019.			June 2019																										

## Children's Services

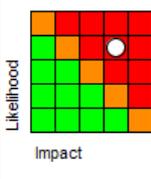
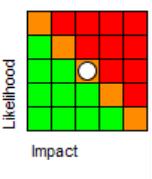
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
<b>COR_CS_08</b>	<b>Public Protection (Adults and Children)</b>			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>		
Public Protection & Community Justice Chief Officers' Strategy Group	Public Protection	<b>Chief Social Work Officer</b>		
<b>Risk Statement</b>	<p>There is a risk of harm to vulnerable children and young people and adults if the Council fails to meet its statutory public protection duties. This includes Adult Support and Protection; Child Protection and both sex offenders and violent offenders (Criminal Justice Service users). In relation to Criminal Justice the risk is twofold (the protection of the community from the service user and the protection of the service user from the community). The delivery of Adult Support and Protection (ASP) service is also overseen by and accountable to the IJB (integration Joint Board).</p> <p>The risk in terms of children is twofold:-</p> <ul style="list-style-type: none"> <li>. The need to keep children safe and avoid child deaths</li> <li>. The reputational risk to the Council in this situation.</li> </ul>			
<b>Worst Case Consequences</b>	<ul style="list-style-type: none"> <li>- Death or serious harm to a child/young person or vulnerable adults.</li> <li>- Significant Case Reviews / Fatal Accident Enquiries / Court / Prosecution or other external legal interventions.</li> <li>- Potential compensation claims.</li> <li>- External criticism / intervention (e.g. Care Inspectorate or Criminal Justice Authority).</li> <li>- Reputational damage to the Council.</li> </ul>			
<b>Controls / Mitigation</b>	<ul style="list-style-type: none"> <li>- Current robust processes with partners regarding sharing of information (including protocols).</li> <li>- The following processes MAPPA / IRD's / CP and ASP Case Conferences / CP / ASP register integrated / Single shared assessment.</li> <li>- Governance Structure - including risk audit and performance monitoring are in place (e.g. Child Protection Committee).</li> <li>- Robust training programme for all Council and partner agency staff regarding CP / ASP / MAPPA.</li> <li>- Awareness raising with the public.</li> <li>- Police run scheme for identification of sex offenders in local communities.</li> </ul>			
<b>How do we monitor that controls are working effectively?</b>	<ul style="list-style-type: none"> <li>- Public Protection Group and Sub-Groups</li> <li>- Care Inspectorate</li> <li>- Children's Commission</li> <li>- Criminal Justice Authority</li> </ul>			
<b>What more can we do to reduce the risk?</b>	<ul style="list-style-type: none"> <li>- Integrated Children's Services Plan</li> <li>- Adult Protection Committee Improvement Plan</li> <li>- Information Sharing Working Groups established to progress issues relating to sharing from Social Work, Police and Health. Review progress quarterly.</li> </ul>			
<b>Lessons Learnt</b>				

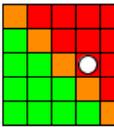
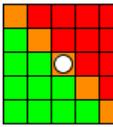
Governance Group (where relevant)	
<b>Name</b>	Public Protection & Community Justice Chief Officers' Strategy Group
<b>Objectives</b>	<p>1. Child and Adult protection issues lead;  2. Develop strategies and action plans for Child and Adult protection, including Corporate Parenting, Adult Care, Protection, and MAPPA related strategies and plans;  3. Monitor and report on strategy and plans progress;  4. Ensure governance arrangements are fit for purpose; and  5. Align activities with key projects and multi-agency groups, including Self-directed support, integration of NHS, Community Care, and other services, and GIRFEC duties.</p> <p><b>Associated Groups:</b> Alcohol &amp; Drugs Partnership, MAPPA, Community Justice Partnership, Community Safety Partnership, Child Protection Committee, Adult Protection Committee, and Gender Based Violence.</p> <p><b>External Members:</b> Chief Executive, NHS Forth Valley; and Chief Superintendent, Police Scotland.</p>
<b>Self-Assessment / Actions</b>	<p>a) How well does the Group monitor all aspects of the strategy / policy(s)</p> <p>. The Public Protection Group Chief Officers Group (PPCOG) does not monitor a policy per se, but oversees the partnership's response to a number of priorities and activities within the public protection remit. The work of PPCOSG is underpinned by a delivery plan that connects to SOLD and this is reviewed and reported to the CP Exec and Board on an annual basis.</p> <p>Actions:  . The annual delivery plan is to be reviewed, updated and refreshed to ensure it continues to be relevant.</p> <p>b) How well the strategy / policy(s) is embedded at a corporate level?</p> <p>. The work of the PPCOSG is well embedded in the partnership and its sub groups.</p> <p>Actions:  . The group is currently considering how it can use data to better effect to seek assurance from the various groups reporting in and to, in turn, provide assurance to the CPP Board and Executive.</p> <p>c) How well the strategy / policy(s) is embedded at a Service level?</p> <p>. Each element of the remit is taken forward appropriately by services. There are a number of areas where cross service working could be more effective and work over the next months will seek to address this.</p> <p>Actions:  . Some partnership groups are currently being reviewed, including MARAC, and PPCOSG oversees this process. The links between PPCOSG and service groups can be improved.</p> <p>d) How well the strategy / policy(s) is embedded at a Project / Partnership / Supplier level?</p> <p>. The PPCOSG is a clear part of the CP Partnership. Discussions are on going at the moment around public protection arrangements locally and at a Forth Valley level. Work is starting to understand the costs and benefits of future arrangements.</p> <p>Actions:  . Following work with colleagues across FV, recommendations will be made in the coming months as to the future arrangements for public protection.</p> <p>e) How well does the Corporate support function(s) help to embed and monitor the strategy / policy(s)</p> <p>. The PPCOG is supported by a Policy Officer.</p>
<b>Assurance level</b>	Substantial Assurance
LATEST NOTES	
<b>Latest Note / Review Date</b>	Lead Officer reviewed risk and completed a Governance Group Self-Assessment in March 2019. <span style="float: right;">05 Mar 2019</span>

## Corporate & Housing Services

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
<b>COR_CHS_07</b>	<b>Compromised security, or inefficient use, of the Council's data and information asset.</b>			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>	Likelihood	Likelihood
Information Management Working Group	Resources	<b>Chief Governance Officer and Head of Policy, Technology &amp; Improvement</b>	Impact	Impact
<b>Risk Statement</b>	<p>Failure to properly secure data and information may lead to data breach, legal recourse, and reputational damage. Equally, failure to maximise the value of the data and information asset may lead to disjointed and inefficient service delivery, and adverse impact on clients' experience of interacting with the Council.</p> <p>This risk includes the potential failure to comply with General Data Protection Regulations (GDPR), and deliver on the information objectives with the COTF Program and Corporate Plan.</p> <p>There are a number of closely related corporate risks, e.g. Cyber Security and SWIS Replacement.</p>			
<b>Worst Case Consequences</b>	<ul style="list-style-type: none"> <li>. Significant data breach leading to personal harm and / or Information Commissioner's Office (ICO) investigation, fine, and reputational damage;</li> <li>. Loss of data that compromises people's safety;</li> <li>. Loss of personal information that compromises individuals' privacy;</li> <li>. Loss of confidence in Council; and Ineffective / inefficient service delivery through failure to join up relevant information.</li> </ul>			
<b>Controls / Mitigation</b>	<ul style="list-style-type: none"> <li>. Information Governance is recognised through clear governance structures – including a Senior Information Risk Officer, Data Protection Officer, and Information Governance Manager.</li> <li>. Information Governance and Security Policies are in place;</li> <li>. Data protection training regime in place and monitored;</li> <li>. Framework of policies including Acceptable Use Policy and Record Management Plan; and Planned future work-stream as part of COTF Information project to further develop strategy and practice for appropriate sharing of information across Services and Partners; and</li> <li>. Public Services Network (PSN) compliance; and working to further develop strategy and practice for appropriate sharing of information across Services and Partners.</li> </ul>			
<b>How do we monitor that controls are working effectively?</b>	<ul style="list-style-type: none"> <li>. No breaches reported;</li> <li>. Audits of compliance with Policies;</li> <li>. Officer knowledge of subject area is tested and is high; and</li> <li>. Customer confidence is high.</li> </ul>			
<b>What more can we do to reduce the risk?</b>	<p>The following plans are in place:</p> <ul style="list-style-type: none"> <li>. GDPR Action Plan;</li> <li>. COTF Information Project Plan; and</li> </ul> <p>Internal Audit will review GDPR compliance and COTF Programs. Information security policies to be updated</p>			
<b>Lessons Learnt</b>	Lessons learnt from internal and external data breaches are regularly reviewed and shared.			

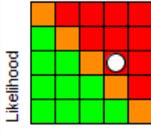
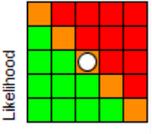
<b>Governance Group (where relevant)</b>	
<b>Name</b>	Information Management Working Group
<b>Objectives</b>	<p>The IMWG will support an improved strategic approach to information management, and monitor the GDPR Action Plan.</p> <p>It is anticipated that the group will, as it becomes more established, cover the following issues:</p> <ul style="list-style-type: none"> <li>• Development of Information Management strategy</li> <li>• Progress on information management system/EDRMS</li> <li>• Digital continuity and preservation</li> <li>• Information risk management</li> <li>• Review of data breach log</li> <li>• Review of information management policies</li> <li>• Data storage management</li> <li>• Impact of implementing change, including the new email system Information sharing</li> </ul>
<b>Self-Assessment / Actions</b>	The Information Management Working Group (IMWG) was established in October 2017 and provides updates to CMT, CRMG and Members (via the Group and Senior Information Risk Officer), and the Group will also implement appropriate audit processes.
<b>Assurance level</b>	Limited Assurance - The IMWG is still a relatively new Group. It has made good progress on e.g. GDPR. The new arrangements will take time to be embedded.
<b>LATEST NOTES</b>	
<b>Latest Note / Review Date</b>	<p>Work being undertaken to ensure our information security and underpinning policies are appropriate. In addition work will be undertaken in the next year to review the systems that we have that hold information to ensure we have a reliable source of truth and do not hold information inappropriately.</p> <p>03 June 2019 – Self Assessment note updated.</p>
	03 Jun 2019

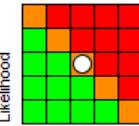
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_08	Cyber security incident compromises IT infrastructure, corporate application, social media channel, or data / information.			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>	Likelihood Impact	Likelihood Impact
Information Technology Steering Group	Leader of the Council	<b>Head of Policy, Technology &amp; Improvement</b>		
<b>Risk Statement</b>	A targeted cyber attack may impact on the availability, integrity and confidentiality of Council systems and data / information, with associated impact on service delivery and financial loss.			
<b>Worst Case Consequences</b>	<ul style="list-style-type: none"> <li>. A "Denial of Service" attack could prevent access to IT Systems and the Internet without losing data.</li> <li>. Significant data breach, leading to personal harm and / or ICO investigation, fine, and reputational damage;</li> <li>. loss of data that compromises peoples safety;</li> <li>. loss of personal information that compromises individuals; and</li> <li>. significant impact on stakeholders' ability to interact electronically with the Council and Loss of confidence in Council.</li> </ul>			
<b>Controls / Mitigation</b>	<ul style="list-style-type: none"> <li>. Annual Public Services Network Accreditation – including independent Health Check</li> <li>. Annual Cyber Essentials Accreditation</li> <li>. Network Security, including firewalls, network segregation and penetration testing</li> <li>. National Cyber Security Centre Active Defence Measures – Webcheck real time monitoring on our internet facing systems Other "Defence in Depth" measures such as antivirus and end point protection software and end user training</li> </ul>			
<b>How do we monitor that controls are working effectively?</b>	<ul style="list-style-type: none"> <li>. Achieving PSN accreditation which requires remediating any vulnerabilities found in the independent Health Check</li> <li>. Achieving Cyber Essentials accreditation which is a pass or fail accreditation.</li> <li>. Lack of Data/Information breach</li> <li>. Immunity to cybersecurity incidents which affects others Monitoring of our protection systems e.g. Symantec Endpoint Protection</li> </ul>			
<b>What more can we do to reduce the risk?</b>	<ul style="list-style-type: none"> <li>. PSN Accreditation Improvement Plan (and monitoring by the IMWG)</li> <li>. Continued participation in IT Security groups such as the Scottish Local Authority IT Security Group</li> <li>. Continued awareness of National and International Security Incident reports through CHisP (Certified Health Informatics Systems Professional) and CERT (Network Certification Body)</li> <li>. Continued testing of our BCPs in conjunction with our colleagues in Emergency Planning Services to review their ICT systems and confirm which are critical ('Hot Systems') i.e. those needing recovered as a priority during any interruption. This will allow the ICT to develop appropriate recovery plans.</li> </ul>			
<b>Lessons Learnt</b>	<ul style="list-style-type: none"> <li>. Continuous review of internal and external cyber security incidents, and appropriate response (reinforcing staff awareness and technical security).</li> <li>. Business continuity risks relating to a loss of power failure at Municipal Buildings have been tested and the emergency generator provided power to the building and IT systems during this time.</li> </ul>			
<b>Governance Group (where relevant)</b>				
<b>Name</b>	Information Technology Steering Group			
<b>Objectives</b>	To be developed.			
<b>Self-Assessment / Actions</b>				
<b>Assurance level</b>	This is a proposed Group (within the recently agreed Digital Strategy). Officers will meet in the near future to review the remit and links between the ITSG and IMWG. Arrangements will take time to be embedded.			
<b>LATEST NOTES</b>				
<b>Latest Note / Review Date</b>	<p>While there is a high likely hood of a cyber incident, we are continuing to take measures to address issues of security of our systems. We have in addition to cyber essential also have PSN compliance renewed and are looking at our update regime for systems etc to make sure we are minimising risk.</p> <p>Over the next few months we will review our cyber security plan and appoint staff to manage this area of risk.</p> <p>03 June 2019 – Self Assessment note updated.</p>			03 June 2019

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_03	<b>Failure to monitor, measure, manage, and mitigate the impacts of Welfare Reform and Poverty.</b>			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>	Likelihood	Likelihood
Fairer Falkirk Partnership	Leader of the Council	<b>Head of Policy, Technology &amp; Improvement</b>		
<b>Risk Statement</b>	<p>There is a risk that the Council fails to provide our residents with more accessible money advice and support services, to help people maximise their income and mitigate financial difficulties. Failure to manage this risk effectively could affect the Financial Security outcomes in the Fairer Falkirk Strategy.</p> <p>A key risk is the introduction of Universal Credit, which creates a significant risk of increased poverty to people in our area due to the changes to the social security system. There is also a high risk to the Council's finances that rent arrears increase, impacting on the Housing Revenue Account.</p> <p>There are also risks relating to the introduction of Local Advice and Support Hubs. Significant work is required within a tight timescale to implement the Central Hub and exit from Callendar Square. This is being closely monitored by the Frontline Services Improvement Group.</p> <p>The following risks on the Corporate Risk Register cover the risks of failing to meet other aspects of the Fairer Falkirk Strategy: Harm to Children / Adults, Housing Strategy, Health and Social Care, and Communities and Participation (which includes Partnerships and Community Empowerment). The roll out of Universal Credit will not be complete until 2022. Currently only approximately 10% of our expected final claimants are currently claiming Universal Credit. We are not yet seeing the full impact of Universal Credit and the other significant changes to the benefits system and therefore the risk remains high.</p>			
<b>Worst Case Consequences</b>	<ul style="list-style-type: none"> <li>. Impact on citizen's ability to pay bills, leading to increased poverty and ill-health for communities;</li> <li>. Significant increases in demand for support, e.g. Crisis Grants and Discretionary Housing Grants;</li> <li>. Fall in rent and Council Tax collection rates, and impact on Housing Revenue / Council finances;</li> <li>. Unsustainable pressure on Council services and staff;</li> <li>. New models of service delivery do not improve Services, or within planned budget / time;</li> <li>. Staff do not have the skills or support to provide effective Services (including digital skills);</li> <li>. Impact on reputation of Council and relationships with citizens / partners; and Increased inequality may impact on health, social issues, the economy, and employment.</li> </ul>			
<b>Controls / Mitigation</b>	<ul style="list-style-type: none"> <li>. Provision of advice services that meet the needs of individuals and communities;</li> <li>. Refocussing of Fairer Falkirk Fund and Poverty Strategy;</li> <li>. Fairer Falkirk Strategy focusses on actions that address / prevent the root causes of poverty;</li> <li>. Financial Controls, including monitoring of Council Tax and rent Collections and bad debts;</li> <li>. Workforce planning, including new roles and skills, to provide better advice and support;</li> <li>. Investment in property and information assets to enable more effective services.</li> </ul> <p>In addition, the Council aims to reduce the root causes and impact of poverty through various related strategies and plans, including housing, attainment, community empowerment, employment and training, and health and social care. These are monitored by relevant oversight Groups.</p>			
<b>How do we monitor that controls are working effectively?</b>	<ul style="list-style-type: none"> <li>. Following the Public Pound : evaluation of outcomes and best value from external funding;</li> <li>. Fairer Falkirk Partnership have oversight of the Fairer Falkirk Strategy;</li> <li>. Community Planning Partnership have oversight of the poverty outcomes within the SOLD;</li> <li>. Frontline Service Improvement Group monitor progress with the Local Advice and Support Hubs;</li> <li>. CMT and Executive receive updates on the risks relating to the change programs above; and Oversight of related risks / plans by relevant Groups and Committees, e.g. the Strategic Housing Group, Council of the Future Board, and the Information and Asset Management Working Groups</li> </ul>			
<b>What more can we do to reduce the risk?</b>	<p>A review of the Fairer Falkirk Strategy is underway. This will shape future priorities and actions.</p> <p>Implementation of the three Advice Hubs will ensure people have access to advice and support to help them maximise their impact and better manage their money.</p>			
<b>Lessons Learnt</b>	<p>The work-streams have identified that more direct face to face contact, coupled with single designated points of contact and case ownership are considered by our residents to provide improved means of support and assistance. These are key components of our Advice and Support Hubs.</p>			

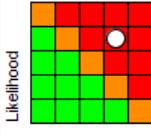
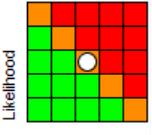


LATEST NOTES		
<b>Latest Note / Review Date</b>	<p>Fully service UC has been in place since the end of March 2018. A measurement score card is being developed to understand the impact of UC on people in the area and on services.</p> <p>Advice hub in Denny opened December 2018. Outreach started in Bonnybridge in 2018.</p> <p>Offices in Stenhoumair and Dawson to close with the central hub supporting outreach to those areas.</p> <p>The delivery of the central hub is behind schedule. There is a risk to achieving the new delivery model as a matter of urgency. The main reasons for this are the cost of the work to Hope Street, the availability and affordability of alternatives. Work is on going to identify how the model can be delivered timeously and within a cost that makes sense.</p> <p>03 June – Self Assessment updated</p>	03 June 2019

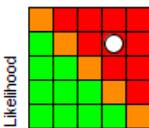
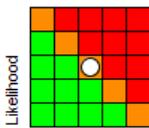
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_05	Failure to properly discharge equalities duties.			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>	Likelihood	Likelihood
		<b>Head of Policy, Technology &amp; Improvement</b>	Impact	Impact
<b>Risk Statement</b>	Failure to comply with equalities duties may lead to disadvantage, poverty, inequality, or harm, and associated reputational, safety, legal, and financial implications.			
<b>Worst Case Consequences</b>	Challenge under Equalities Act and consequences of this.			
<b>Controls / Mitigation</b>	Duty to publish equalities information; Assessing and reviewing Policy; Considering award criteria and conditions in relation to public procurement; and materials published in an accessible manner.			
<b>How do we monitor that controls are working effectively?</b>				
<b>What more can we do to reduce the risk?</b>	Community Planning Partnership focus on equalities and fairness; and reports to CMT and Executive.			
<b>Lessons Learnt</b>	A report is prepared for CMT to review the achievement of our equality outcomes and the equality impact assessment process annually.			
<b>Governance Group (where relevant)</b>				
<b>Name</b>				
<b>Objectives</b>				
<b>Self-Assessment / Actions</b>				
<b>Assurance level</b>				
LATEST NOTES				
<b>Latest Note / Review Date</b>	<p>Training and awareness is being organised for Members and Chief Officers.</p> <p>A refreshed mainstream equalities is required by the end of April. Work has started on this. The report requires to cover employment, services and education.</p> <p>EPIAs are currently being prepared for budget options. In addition this year the Councils budget will be subject to an EPIA.</p> <p>Further work needs to be undertaken by services to identify equality impacts of decisions they are asking Members to consider. This means the equality section on each committee report needs to be completed, with EPIAs available to Members prior to decisions being taken. This includes reference to the Fairer Scotland duty as required since May 2018.</p>			04 Jan 2019

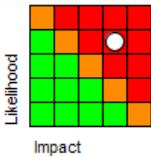
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_02	<b>Failure to recognise, and act upon, the need for transformational change and continuous improvement.</b>			
<b>Governance Group (if Relevant)</b>	<b>Portfolio Holder</b>	<b>Lead Officer</b>	Likelihood Impact	Likelihood Impact
Council of the Future Board	Leader of the Council	<b>Head of HR &amp; Business Transformation</b>		
<b>Risk Statement</b>	The Council fails to plan for, and implement, appropriate transformational change, leading to missed opportunity and failure to deliver the right services, to the right people, in the right way, and within budget.			
<b>Worst Case Consequences</b>	<p>Failure to deliver the planned programme of Council of the Future work and to achieve the required savings in the required timescales, leading to:</p> <ul style="list-style-type: none"> <li>• absence of required skills or expertise to deliver services;</li> <li>• service failure (including delivery of statutory services); and</li> <li>• external intervention in the running of the Council.</li> </ul>			
<b>Controls / Mitigation</b>	<ul style="list-style-type: none"> <li>• COTF Board in place (comprising elected Members and Chief Officers);</li> <li>• Programme of COTF work agreed and being progressed;</li> <li>• Change Manager and Project Management Office team appointed to ensure good practice and drive pace of change; and</li> <li>• Framework for COTF reporting, timelines, outcomes, and benefits developed and subject to constant review.</li> </ul> <p>The framework was reviewed and approved by the COTF Board in August</p>			
<b>How do we monitor that controls are working effectively?</b>	<ul style="list-style-type: none"> <li>• Reports on projects and reviews submitted to, and scrutinised by, the Council of the Future Board, CMT, and Executive;</li> <li>• Audit Committee monitors the effectiveness of COTF Risk Strategy / program governance; and</li> <li>• Change implemented, savings achieved, and performance improved, in line with agreed outcomes.</li> <li>• The Programme Management Office (PMO) have 1:1 reviews with Program Managers and attend Service Change Boards to ensure that robust project assessments / documentation are in place.</li> <li>• Monthly project reports form the basis of Performance Panel reports for each Service's COTF service plan updates.</li> </ul>			
<b>What more can we do to reduce the risk?</b>	<ul style="list-style-type: none"> <li>• The Board will review the Program Risk Register at 6 monthly intervals (or by exception);</li> <li>• Project lead officers will monitor project risks, as part of project management arrangements;</li> <li>• Oversight and scrutiny by CMT, Audit Committee, Executive, Council, and external audit;</li> <li>• Internal audit of processes and controls; and</li> <li>• Reviewing the change programme through Council of the Future proposals.</li> </ul>			
<b>Lessons Learnt</b>	Consideration has been given to best practice, lessons learned by other Councils, feedback from Audit Scotland, and programmes in place elsewhere.			

Governance Group (where relevant)			
<b>Name</b>	Council of the Future Board		
<b>Objectives</b>	<p>The COTF Risk Strategy outlines the following responsibilities for oversight of Program / Project risks:</p> <ul style="list-style-type: none"> <li>• COTF Board is responsible for identifying and scrutinising COTF programme risks, providing risk reports to Members, and monitoring the effectiveness of the COTF Risk and Opportunities Management Strategy; and</li> <li>• Project Managers / Lead Officers are responsible for assessing project risks and opportunities, and ensuring that the COTF Risk and Opportunities Management Strategy is applied effectively.</li> </ul> <p>The COTF Risk Strategy also sets out the following success measures:</p> <ul style="list-style-type: none"> <li>• successful delivery of COTF objectives, outcomes, and savings;</li> <li>• a clearer understanding of the risks (uncertainties) and potential consequences;</li> <li>• clear, agreed, and measurable actions to mitigate risks / maximise benefits;</li> <li>• well informed decisions - fewer unexpected problems and adverse incidents; and</li> <li>• successful outcomes from external scrutiny, e.g. audits and best value reviews.</li> </ul>		
<b>Self-Assessment / Actions</b>	<p>The outcomes of the COTF governance review were reported to the COTF Board on 06 August 2018. This resulted in a refreshed governance framework being agreed with roll out due for completion February 2019. This has included::</p> <ul style="list-style-type: none"> <li>. Consultation with Trades Unions on employee involvement in the change programme and creation of COTF Change Groups</li> <li>. Creating a new suite of project reporting templates and rolling these out to project managers &amp; sponsors</li> <li>. Embedding a refreshed Elected Member arrangement for the COTF Board</li> <li>. Refreshing the Workforce of the Future Board</li> <li>. Setting principles for the prioritisation of projects. eAugust 2018.</li> <li>. the COTF Governance review were reported to the COTF Board on</li> </ul>		
<b>Assurance level</b>	Substantial Assurance		
LATEST NOTES			
<b>Latest Note / Review Date</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> <p>05 Feb 2019 – The COTF Board Self-Assessment has been updated by the Program Manager.</p> <p>04 Jan 2019 - Update by the Lead Officer: The Board has reviewed its risk register for the COTF programme of change. This has been updated. A further review will be undertaken once the programme of change has been refreshed.</p> <p>The Board continues to meet on a regular basis. Reports continue to be submitted to both the Executive and Audit Committees. A refreshed programme of change is currently being developed to link with the Council's medium term financial plan. Work has been done to review the method of reporting and to ensure this is more efficient and effective. Training has been held with project managers and sponsors to role this out.</p> <p>Project management training has been offered to all project managers and sponsors to ensure appropriate project management of the programme of change.</p> <p>Engagement work continues to be rolled out (Leadership Forum, Listening Events and OD events) to support the change programme, and the engagement survey continues to be reviewed.</p> </td> <td style="width: 20%; text-align: center; vertical-align: middle; padding: 5px;">05 Feb 2019</td> </tr> </table>	<p>05 Feb 2019 – The COTF Board Self-Assessment has been updated by the Program Manager.</p> <p>04 Jan 2019 - Update by the Lead Officer: The Board has reviewed its risk register for the COTF programme of change. This has been updated. A further review will be undertaken once the programme of change has been refreshed.</p> <p>The Board continues to meet on a regular basis. Reports continue to be submitted to both the Executive and Audit Committees. A refreshed programme of change is currently being developed to link with the Council's medium term financial plan. Work has been done to review the method of reporting and to ensure this is more efficient and effective. Training has been held with project managers and sponsors to role this out.</p> <p>Project management training has been offered to all project managers and sponsors to ensure appropriate project management of the programme of change.</p> <p>Engagement work continues to be rolled out (Leadership Forum, Listening Events and OD events) to support the change programme, and the engagement survey continues to be reviewed.</p>	05 Feb 2019
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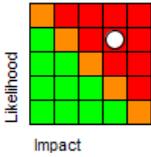
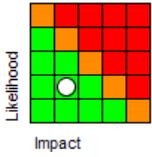
Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_09	Failure to undertake proper engagement and consultation with service users, stakeholders, and partners on the delivery of services.			
Governance Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
Community Planning Strategic Board	Leader of the Council	Head of Policy, Technology & Improvement	Impact	Impact
Risk Statement	Failure to appropriately engage and consult with service users, stakeholders, and partners on the design and delivery of Council services could lead to flawed decision making, services that do not meet people's needs, poorly targeted expenditure, and adverse impact on communities or individuals.			
Worst Case Consequences	Uninformed (or un-evidenced) decision making; resources not allocated to meet need; and failure to deliver statutory obligations.			
Controls / Mitigation	<p>The risk are mitigated by having robust and transparent consultation and decision-making processes and by the Scrutiny Committee monitoring the following strategies and action plans: SOLD, Locality Planning and the participation strategy. The participation strategy was subject to a review by Scrutiny Panel in 2015 and is currently being refreshed.</p> <p>Engagement and consultation is embedded within decision-making, including consideration of the risks and impact on the Council and other stakeholders within all committee reports.</p> <p>There is a corporate participation group which meets two-monthly, as well as a user group for the Citizen Space online consultation tool. .</p> <p>These measures may not prevent risks but should reduce the likelihood of a breakdown in stakeholder relationships and provide a more defensible position if there is a legal challenge.</p> <p>Actively responding to the requirements of the Community Empowerment Act 2015; active and responsive Citizen's Panel; Participation Strategy and supporting guidance and processes; and development of a locality planning model and priorities.</p>			
How do we monitor that controls are working effectively?	<p>The Participation Strategy was approved by Scrutiny Committee and has subsequently been subject to a Scrutiny Panel. Regular reports are brought to the Committee to enable it to monitor its implementation. It is due to be renewed later this year and internal and external engagement on the new strategy is underway.</p> <p>A risk and governance framework is in place at both Council and Community Planning Partnership (CPP) levels. The Community Planning Partnership Leadership Board are accountable for the effectiveness of the partnership performance, risk and governance arrangements. The SOLD plan summarises the governance arrangements including delivery groups and partners' roles.</p> <p>The Scrutiny Committee receives regular 6-monthly CPP updates and is responsible for scrutinising these risks. This includes updates on Locality Planning and Community Empowerment.</p> <p>The Audit Committee receives regular 6-monthly corporate risk updates and is responsible for scrutinising the risks to the Council. As part of this, the lead officer updates the corporate risk and provides CRMG with an annual self-assessment on the effectiveness of the Community Planning Leadership Board.</p> <p>Audit Scotland has also undertaken reviews on Community Planning Partnerships.</p>			
What more can we do to reduce the risk?	Procurement of Citizen Space, a bespoke online consultation and engagement platform.			
Lessons Learnt	Community Planning Audits – outcomes from audits of Falkirk and other Councils.			

Governance Group (where relevant)					
<b>Name</b>	Community Planning Strategic Board				
<b>Objectives</b>	<p><b>Strategic Aims:</b></p> <ol style="list-style-type: none"> <li>1. Sets the strategic direction of the Falkirk Community Planning Partnership (CPP);</li> <li>2. Ensures that the CPP fulfils relevant statutory requirements;</li> <li>3. Ensures that the strategic vision for the area, and the partnership's strategic priorities and local outcomes are realised; and</li> <li>4. Promotes effective partnership working across the CPP.</li> </ol> <p><b>Objectives:</b>  Approves the Strategic Outcomes &amp; Local Delivery Plan Achievement of strategic priorities and local outcomes  Scrutiny and challenge on the progress of attainment of strategic priorities and local outcomes  Scrutiny and challenge of locality planning  Approves the CPP's strategies &amp; plans  Approves the CPP's approach on locality planning  Secures continuous improvement in local partnership working  Ensures the appropriate alignment of partnership resources with strategic priorities and local outcomes  Scrutinises, challenges and supports agencies, delivery groups to achieve agreed outcomes and priorities</p> <p><b>External Members:</b> Falkirk Council (Chair), Police Scotland, the Scottish Fire &amp; Rescue Service, NHS Forth Valley, Forth Valley College, CVS Falkirk and District, the Scottish Government</p> <p><b>Self-Assessment:</b></p> <ol style="list-style-type: none"> <li>1. The Strategic Board meets 6 times per year. Core to its business is the scrutiny of Community Planning delivery groups. These groups have responsibility for delivering on strategic priorities and local outcomes. Scrutiny is achieved through the submission of progress and performance reports every 6 months. These reports include an assessment of challenges and risks. The Board also receives regular progress reports on locality planning and any relevant improvements it has requested to improve partnership working;</li> <li>2. The Board is advised of new legislative or national requirements by relevant senior officers from across the CPP. This includes an assessment of the implications arising from these requirements for the Falkirk CPP; ;</li> <li>3. The Falkirk CPP is scrutinised in meeting its statutory obligations by Audit Scotland. This and self assessment is used to inform and develop the partnership's improvement programme; and</li> <li>4. The Board has an agreed development plan to ensure that the knowledge of its members remains relevant and up to date.</li> </ol>				
<b>Self-Assessment / Actions</b>	We have just completed an independently facilitated self assessment led by the Improvement Service, the strengths and areas for improvement from which are being collated for a report to go to the Community Planning Executive Group later this month. The assessment involved Strategic Board and Exec Group members. Any additional risks emerging from the self assessment will be entered onto Pentana, as will relevant improvement actions.				
<b>Assurance level</b>	Limited Assurance - Additional information is needed on how the Partnership's Delivery Groups manage risk. The CRM Team have requested further information or a meeting to discuss what information is needed to move this to Substantial Assurance.				
LATEST NOTES					
<b>Latest Note / Review Date</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">04 Jan 2019 - A new participation strategy is being developed. This will support new arrangements for engagement with communities through participatory budgeting proposals that are currently being developed.</td> <td rowspan="3" style="width: 20%; text-align: center; vertical-align: middle;">03 June 2019</td> </tr> <tr> <td>04 Feb 2019 - Additional Notes added re self-assessment facilitated by Improvement Service.</td> </tr> <tr> <td>03 June 2019 – Self Assessment Assurance Level Updated</td> </tr> </table>	04 Jan 2019 - A new participation strategy is being developed. This will support new arrangements for engagement with communities through participatory budgeting proposals that are currently being developed.	03 June 2019	04 Feb 2019 - Additional Notes added re self-assessment facilitated by Improvement Service.	03 June 2019 – Self Assessment Assurance Level Updated
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04 Feb 2019 - Additional Notes added re self-assessment facilitated by Improvement Service.					
03 June 2019 – Self Assessment Assurance Level Updated					

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_06	<b>Failures in workforce planning, including absence, vacancy management, and succession planning.</b>			
Governance Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
	Resources	<b>Head of HR &amp; Business Transformation</b>	Impact	Impact
Risk Statement	<p>Failures in workforce planning adversely and significantly impact on the quality and consistency of service delivery, and compromise on-going availability of services.</p> <p>There is also a risk that the Council fails to agree and implement a modern and flexible package of terms and conditions, and to undertake effective consultation with employees and trades' unions.</p> <p>This risk is closely linked to the following additional, but separate, corporate risks: equalities, health and safety, early years expansion, and SSSC Code of Conduct.</p>			
Worst Case Consequences	<ul style="list-style-type: none"> <li>. Failure to deliver services, including statutory services;</li> <li>. more staff employed than required and / or staff with the wrong skill set;</li> <li>. no clear plan to achieve savings that impact on staff; and</li> <li>. Industrial relations / staff satisfaction issues (impacting on recruitment, retention, performance and employee relations..</li> </ul>			
Controls / Mitigation	<ul style="list-style-type: none"> <li>. Workforce Strategy agreed by Members, and monitoring of implementation by Human Resources;</li> <li>. Workforce Planning Framework in place and being implemented across Services; and</li> <li>. Workforce Plans being developed across all Services and Council wide plan drafted.</li> <li>. Workforce Plans are an integral part of Strategic Planning, including Service Planning / Budgets;</li> <li>. HR support Services in developing and reviewing their workforce plans;</li> <li>. Trades' Union are pro-actively involved in change, including consultation on terms and conditions and workforce issues;</li> <li>. Managers receive the information and support needed to manage performance, e.g. absence;</li> <li>. Employee engagement is undertaken and acted upon, e.g. staff satisfaction survey / Action Plans;</li> <li>. HR and Organisation Development Policies are effective and consistently implemented; and</li> <li>. A range of training and development opportunities are available to improve skills / performance.</li> </ul>			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> <li>. Update reports on workforce changes presented to, and considered by, CMT;</li> <li>. Absence and turnover reports submitted to Joint Consultative Committee; and</li> <li>. Consistency of approach to workforce planning across all Services.</li> <li>. HR Policy and Procedure Audits, and Exit Interviews;</li> <li>. Employee Satisfaction results are evaluated, and Action Plans are implemented and monitored;</li> <li>. Workforce Planning reviews, including critical friend, audit, and peer review;</li> <li>. Best practice reviews including ILM, and Healthy Working Lives audits;</li> <li>. Oversight of HR risks by staff / JCC and SBF's( but this consultation framework s under review); and</li> <li>. Equalities / Equal Pay issues are monitored as part of the Equalities Mainstreaming process.</li> </ul>			
What more can we do to reduce the risk?	<p>Ensuring workforce plans form part of day to day workforce considerations, budget strategy and change programme.</p> <p>Progress the key COTF projects and Service Plan actions outlined below.</p> <p>Improve areas identified in Policy and Procedures reviews, e.g. exit interviews. Review the current JCC framework and Implement new partnership arrangements/framework to improve employee and industrial relations.</p>			
Lessons Learnt	Research of best practice undertaken to develop the workforce strategy and the workforce planning framework.			
Latest Note / Review Date	<p>Risk level has not changed.</p> <p>CMT has considered a report and agreed a number of actions to address absence management which will be implemented over the course of the next year and monitored by CMT. Reports on absence continue to be discussed with Trade Unions.</p> <p>Workforce planning, including vacancy management is being actively managed and is implicit in the work being done on the Council's medium term financial plan, as well as the refresh of the Council's Transformation Programme. Succession planning is inherent in this and is part of a refreshed OD plan.</p> <p>Discussions with Trade Unions are progressing on a workforce package to match the ambitious of the Council of the Future change programme.</p>			04 Jan 2019

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_CHS_04	Insufficient funding to deliver services and deliver outcomes.			
Governance Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
	Leader of the Council	Chief Finance Officer	Impact	Impact
Risk Statement	<p>Budgetary, economic, or demographic pressures, and failure to properly manage and allocate resources to deal with these, mean that the Council is unable to deliver services and meet its statutory and other obligations.</p> <p>The key funding uncertainties and challenges over the medium term are:</p> <ul style="list-style-type: none"> <li>. Funding – including Local Government Financial Settlement, Brexit, and Business Rates;</li> <li>. Reserves : the ongoing use of reserves to fund Services is not sustainable;</li> <li>. Demographics: in particular, challenges on Pupil Teacher Ratios, Adult Services, and Welfare; and</li> <li>. Council of the Future Program (delivery of projects and realisation of savings).</li> </ul> <p>The following corporate risks need effective management in order to manage funding risks include: (abbreviated): Leadership, Change, Brexit, Social Care, Equalities, Poverty, and Financial Controls.</p>			
Worst Case Consequences	<ul style="list-style-type: none"> <li>. The Council is unable (or unwilling) to take difficult decisions to live within its revenue budget;</li> <li>. service failure, resulting in inability to deliver statutory services;</li> <li>. threat to lives and significant negative impact on the wellbeing of citizens if services not delivered;</li> <li>. Statutory breaches, leading to Public Enquiry and / or legal action; and external intervention in the running of the Council.</li> </ul>			
Controls / Mitigation	<ul style="list-style-type: none"> <li>. Medium term financial planning (MTFP), scenario modelling, and horizon scanning;</li> <li>. robust and inclusive budget preparation process (e.g. Member Budget Working Group and EPIAs);</li> <li>. ongoing budget monitoring by managers, and expert advice from Service Accountants;</li> <li>. gathering and considering network intelligence via, eg COSLA, CIPFA Directors of Finance Group;</li> <li>. aligning budgeting to strategic planning, COTF program, and strategies e.g. workforce and technology;</li> <li>. Members have agreed a provisional 3% Council Tax increase in 2019/19, which informs planning;</li> <li>. Improved budgeting, e.g. zero based, participatory, and review of funding of external organisations;</li> <li>. implementing and enforcing Financial Regulations and other good practice guidance and processes.</li> </ul>			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> <li>. Statutory Section 95 Officer review role;</li> <li>. Oversight and scrutiny by CMT, Audit Committee, Executive, and Council;</li> <li>. External Audit of the Council's Financial Statements, and Best Value reviews;</li> <li>. Internal Audit of processes and controls;</li> <li>. Member Budget Working Group; and Oversight by partnership Boards, including Falkirk Community Trust and the Integration Joint Board.</li> </ul>			
What more can we do to reduce the risk?				
Lessons Learnt	<p>Best Value reports highlight the need for leadership, medium and long-term financial planning, appropriate use of reserves, strategic planning, and change management.</p> <p>The Council have also learnt from budgeting best practice externally, e.g. zero based budgeting.</p>			
<b>Governance Group (where relevant)</b>				
Name				
Objectives				
Self-Assessment / Actions				
Assurance level				
<b>LATEST NOTES</b>				
Latest Note / Review Date	Regular reports to Members, most recently 27/11 and 5/12 to Executive and Council respectively. Budget report to Members 27/2/19. Member Budget Working Group now meeting for current budget cycle. 5 year Business Plans to Members in May			06 Feb 2019

## Development Services

Risk Ref.	Risk Title		Current Risk	Target Risk (if relevant)
COR_DS_01	Uncertainties surrounding Brexit			
Governance Group (if Relevant)	Portfolio Holder	Lead Officer	Likelihood	Likelihood
	Public Protection	Director of Development Services	Impact	Impact
Risk Statement	<p>The main risk is a No-Deal Scenario and the potential impact on the Council and local area – including supply chains, the economy, and interruptions / resilience planning. The outcome of the UK Parliament vote on Brexit could also trigger a vote of no confidence in the current government triggering a General Election.</p> <p>This is in addition to the 3 longer-term risks already included in the Corporate Risk Register:</p> <ul style="list-style-type: none"> <li>- EU funding of future projects (and the economic impact);</li> <li>- EU workers (in particular, seasonal workers); and</li> <li>- EU citizens employed by the Council (in particular, teaching and care staff, where there are already resource pressures).</li> </ul> <p>There is also some risk of changes to legislation, but this is considered low at this stage because most EU regulations are embedded within UK / Scottish Law.</p> <p>There are also a range of potential impacts on communities e.g. medical and business supplies.</p>			
Worst Case Consequences	<ul style="list-style-type: none"> <li>. There is an interruption to essential supplies – including medical, food, and fuel supplies.</li> <li>. This could harm vulnerable people, the community, and the local economy.</li> <li>. Resources are further stretched / diverted from Corporate priorities; and</li> <li>. Failure to deliver Best Value services and make well-informed decisions.</li> </ul>			
Controls / Mitigation	<ul style="list-style-type: none"> <li>. Falkirk Council is engaging with COSLA and other agencies re the impact of Brexit nationally.</li> <li>. Resilience: risks are being addressed by the Regional Resilience Partnership (RRP) and Scottish Government. Plans are being developed at a national level and customised locally. This includes plans to deal with potential issues with Health / Medical Supplies, Community Order, Food / Fuel Supplies, and Port Customs.</li> </ul>			
How do we monitor that controls are working effectively?	<ul style="list-style-type: none"> <li>. Resilience: Well developed processes (and experiences) of consultation and resilience plan testing.</li> <li>. High level of attention being given to this risk nationally, regionally and locally. Council participating in Work-streams at every level.</li> </ul>			
What more can we do to reduce the risk?	<ul style="list-style-type: none"> <li>. EU Workers: HR are working with Services to identify and support all affected employees, e.g. with citizenship applications. Services have been asked to help ensure that this work is progressed.</li> <li>. Resilience: The Scottish Government has produced a range of national guidance for specific sectors, and relevant sections (e.g. health) will be adapted locally in consultation with resilience partners.</li> <li>. Resilience Planning updates will be provided to Members via the Information Bulletin, as necessary.</li> <li>. All Services should continuously review the risks, develop mitigation / plans, and provide updates to CMT as necessary.</li> <li>. Corporate response and reporting arrangements now in place.</li> </ul>			
Lessons Learnt	<ul style="list-style-type: none"> <li>. Drawn from other events with elements of similar outcomes.</li> </ul>			
<b>LATEST NOTES</b>				
Latest Note / Review Date	<p>Brexit risk is High because of economic uncertainty from a no-deal scenario.</p> <ul style="list-style-type: none"> <li>- Brexit Planning is likely to increase again at a national and local level now that elections are over.</li> </ul>			03 June 2019

**Risk Scoring Guidance**

Risk Level	Risk Appetite / Approach	Scoring Matrix
<b>High</b> (Score 10-25)	High Risks may be either: <ul style="list-style-type: none"> <li>within the Council’s risk appetite (meaning that the Lead Officer considers the current controls are proportionate <b>and effective</b>; or</li> <li>above the Council’s risk appetite (meaning that the Lead Officer considers that additional actions are necessary to reduce the risk (if the risk is above the risk appetite, the Corporate Risk Register should include a Target Risk Level and Actions)</li> </ul>	
<b>Medium</b> (Score 7-9)	Medium risks are within Council’s risk tolerance - meaning, controls / mitigation are proportionate <b>and effective</b> (actions are not essential, but may be included in the Corporate Risk Register).	
<b>Low</b> (Score 1-6)	These do not need to be recorded on the Corporate Risk Register. Services should monitor these at an operational level and, if the risk increases, they should be added as High or Medium risks.	

LIKELIHOOD		IMPACT / CONSEQUENCE					
Impact		Score	Financial	Reputational	Harm to People or Assets	Interruption to Services to Projects	Audit/ Legal/ Compliance
<b>1 Almost Impossible</b>	Little evidence that the risk is likely to occur	<b>1 Negligible</b>	None or little budget impact; spend is within risk owner’s authority	None, or little, media interest; impact is in public domain, but managed	None or very minor injury and / or damage	None or little disruption to one service, or project delay	No or little query from audit body / regulator; but no criticism or action required
<b>2 Unlikely</b>	Low chance of the risk occurring	<b>2 Minor</b>	Minimal budget impact; spend is within risk owner’s authority	Local media interest and / or customer complaints	Minor injury and / or damage	Minor disruption to multiple services, or project delay	Action required; but unlikely to result in criticism and / or penalty
<b>3 Possible</b>	A reasonable chance of the risk occurring	<b>3 Moderate</b>	Manageable budget impact; spend exceeds risk owner’s authority	Regional media interest and / or multiple complaints	Moderate injuries and / or damage	Some disruption to service, or project delay	Action required; and may result in criticism and / or penalty
<b>4 Likely</b>	A strong chance of the risk occurring	<b>4 Major</b>	Major impact, but within budgets	National media interest and / or serious loss of confidence	Major injury, death, and / or assets destroyed	Major service disruption, loss of multiple services, or project delay	Major legal action, penalty, and / or criticism
<b>5 Almost Certain</b>	Fairly certain that risk will / has occur, occurred	<b>5 Severe</b>	Extensive; spend exceeds available budgets	Sustained media interest, complaints, and / or loss of confidence	Multiple deaths and / or assets destroyed	Extended disruption or loss of service, or project delay	Severe penalty, criticism and / or legal action