

lmp	act	
4	Severe	Likely to warrant a cross-council response
3	Significant	Will require a major response from at least one department
2	Moderate	Response can be contained by the relevant area of service
1	Minor	Not a cause for concern
Like	elihood	
6	Very High	Almost certain to happen in the next 12 months
5	High	Likely to happen in the next 12 months
4	Occasional	Possible occurrence in the next 2 years
3	Low	May happen in the next 3-5 years
2	Very Low	Unlikely to happen in the next 10 years
1	Almost impossible	Very rarely happens

Guidance Notes and definitions

- The term "risk" used in this register is defined by the Institute of Risk Management as the "combination of probability of an event and its consequences" (ISO/EC Guide 73)
- This Corporate Risk Register sets out the key risks to NCC that have been identified by Risk Owners.
- Risk Owners are officers who are responsible for identifying the key risks to the organisation and for implementing and managing the controls to mitigate those risks.
- Causes and impacts for each risk have been identified.
- Current controls and mitigations have been listed for each risk and these identify the controls presently in place that are designed to address the risks.
- Additional controls required and new controls that are being introduced are also recorded in the register. This identifies any gaps in controls and provides details of new control management are intending to introduce, to address these gaps, or are implementing to strengthen existing controls.
- For each of the identified risks, inherent, current and targetl risk scores have then been determined.
- Inherent risk is defined as the amount of risk that would exist in the absence of any controls.
- Current risk is defined as the amount of risk assuming the current mitigations are being applied.
- Target risk is defined as the amount of risk that will remain after proposed actions are put in place.

ID No.	Risk Description	Inherent	Risk		t Risk St 2021/2		Trend	Key risk management activities	Risk Status Rationale	Risk Owner	Target R	isk	
	Major failure of information governance □ Cause: Weak data protection framework and/or failure of individuals to comply with requirements. □ Impact: Physical, emotional or financial harm to members of the public or staff, leading potentially to litigation against the Council. Failure to deliver services in some circumstances. Financial cost to the Council and loss of reputation.	6	I 4 VH	2	4	н	Same	Current Controls IG Board reviews IG risks quarterly ICT maintains cyber security strategy and information security risk register Significant and diverse technical security controls Mandatory IG training for all staff at induction and annually Information Asset Registers in place Data Protection Impact Assessments for new/changed personal data processing Personal data breach management process External cyber and IG compliance accreditation (PSN Code of Conneciton, Data Security & Protection Toolkit, Cyber Essentials) Planned actions Self-assessment against ICO Accountability Framework (Caroline Agnew - Q2, 2021/22) Proof of concept for EDRM system (Heather Dickinson/Caroline Agnew - Q2, 2021/22) Next steps for EDRMS - (Heather Dickinson/Caroline Agnew	IG Board's quarterly monitoring indicates low levels of incidents, but inherent risks are difficult to mitigate down further.	Marjorie Toward	2	3	М
2	Failure to provide safe and secure premises Cause: Failure to control known hazards to the health and safety of employees, care home residents and school pupils. May arise from a range of factors: lack of duty of care; inadequate expenditure on repairs and maintenance; confused responsibilities; inadequate inspection and compliance checks, including of vacant properties. Impact: Death, injury or illness of members of staff, service users or the public. Judicial review and litigation against the Council, enforcement action (e.g. by HSE, Fire Environment Agency), loss of reputation, inability to deliver services, increased costs.	6	4 VH	4	4	VH	Same	Current Controls Corporate property strategy, service asset management plans and health & safety policies Maintaining strong communications with occupied sites and active management of vacant and temporarily closed properties P2 property system records conduct and outcomes of the programme of statutory inspections, risk assessments and remedial actions Planned maintenance programme and partnership arrangements with Arc, including service level agreements and key performance indicators Property compliance action plan and reporting to the Compliance Board Independent review of property compliance by BSI Risk transfer through insurance covers for known risks Planned actions Implement Corporate Landlord Model FM for centralised and standardised approach to property management (Matthew Neal/Neil Gamble, 2021/22)	The impact of the pandemic has changed the work locations and circumstances for the workforce. The challenges arising from this are being addressed and the Council's hybrid approach to future working is being rolled out in phased stages.	Adrian Smith	2	4	Н
3	Major supplier or supply chain failure (including contract management failure) Cause: Major supplier of critical services goes out of business. Breakdown in availability, supply and distribution chains for essential items and services, including as a result of increased demand for emergency items. Failure of internal commissioning and contract management approachto effectively specifyand monitor	5	3 VH	3	3	Н	Same	Current Controls Corporate contract management toolkit and support from Corporate Procurement Team, bringing a category and market management approach and active supply chain management Deparmental procurement groups Business continuity plans, including those of the Nottinghamshire Integrated Community Equipment Loans Service	The pandemic raised significant challenges to secure sufficient and reliable supplies of PPE.Whilst these supplies are now largely stable, uncertainty in supply	Nigel Stevenson	2	3	М

Risk Description	Inherent Risk		Current Risk Sta Q2 2021/2		end	Key risk management activities	Risk Status Rationale	Risk Owner	r Target Risk		
delivery of contracted supply, including rogue purchases from unapproved suppliers. Heightened risk of fraud in challenging economic circumstances.Increased costs and supply reliability post-Brexit. Impact: Increased costs. Loss of reputation. Inability to deliver key services, or staff carry on working in unsafe conditions. Potential for litigation (eg for inadequate supply of PPE). Acquisition of sub-standard items at inflated prices. Inadequate provision of equipment to support and supply people's care requirements.	L I		L I			New emergency payment terms and systems Active focus on Brexit risk Dunn & Bradstreet checks on suppliers Maintenance of contracts database Application of local and national guidance for PPE Engagement with Trading Standards to ensure supplier compliance Local Fair Price for Care implemented Local partnering through: East Midlands Property Alliance and LRF/Category 2 critical infrastructure plans Planned actions Review of Local Fair Price for Care (Kaj Ghattaora, through new Commissioning Board)	markets persists in the post-pandemic and post-Brexit conditions.		L		
Inability to deliver critical services due to a sustained business interruption Cause:Loss of human and physical resources essential to the delivery of Council services, arising from a range of potential risks, notably: premises and utilities(gas/electricity/water) staff- unavailability of senior officers and key staff essential to the Council's structures for business continuity. Well-being and mental health of staff adversely affected by prolonged working in COVID related environment and prolonged home-working ICT and telecomms - heightened due to extent of homeworking, including reliable access to wifi connectivity Lack of understanding of what is critical and so prioritise and properly plan for business continuity of Council services. Impact:Sustained response to significant civil emergencies or other external challenges may lead to the inability to deliver critical services / business as usual. Harm to staff, service users and the public. Failure to protect and safeguard people at risk. Failure to protect buildings and the health and safety of people. Failure to maintain ability to pay employees and suppliers. Reduced ability to deliver the aspirations in the Strategic Plan. Loss of reputation and reduced confidence in the ability of the Council to deliver services.	4 4	VH	3 3	H Lov	wer	Current Controls Corporate business continuity plans, disaster recovery plans, business impact analyses and emergency plans, based around list of critical services Continual review of business continuity plans, business impact analyses and scheduling of plan exercise testing Health & safety at work policies and HR guidance, including remote working Monitoring by: Corporate Leadership Team; Risk, Safety & Emergency Management Board; Risk, Safety & Emergency Management Groups Re-deployment arrangements to direct resources to critical services Planned actions Assessment of capacity to deal with multiple emergencies concurrently (Rob Fisher)	The pandemic represented a significant test of the Council's business cointinuity plans and, for the most part, these have stood up well. There is some concern over capacity to deal with concurrent emergencies, such as the combination of a continuing pandemic and seasonal climate-related emergencies.	Derek Higton	2	2	
Failure to deliver the transformation programme and maintain critical services Cause: Lack of funding and staffing capacity to support delivery of the business cases. Inability to keep up with the pace of change, including from legislative change, and to respond to unanticipated increases in	4 4	VH	3 3	H Sa	ame	Current Controls Established transformation and change programme, incorporating KPIs, metrics, programme governance, reporting arrangements and reviews Medium term financial strategy(MTFS) Regular reports to, and monitoring by: Corporate Leadership Team; Transformation Development Group; Policy and	The MTFS continues to highlight the importance of the reinvigorated transformation and change programmes.	Derek Higton	2	-	

ID	Risk Description	Inherer	nt Risk		Curren	t Risk Si	tatus	Trend	Key risk management activities	Risk Status Rationale	Risk Owner	Target Risk	
No.		L	ı		Q2 L	2021/ I	/22					L I	
	organisational and extrenal costs, or reductions in funding streams. Suitability of ICT systems to develop and adapt, and failure to identify interdependencies and unintended consequences. Impact:Poor performance, overspending, missed opportunities for improvement and loss of reputation. Failure to deliver value for money.								Dedicated Transformation & Change Bureau Project risk management process Budgetary control and financial pressure reviews. Planned actions Currently in the process of establishing the revised, corporate transformation and change work programmes, following approval by the former Improvement & Change Sub-Committee (Derek Higton, winter 2021/22) Business cases are under development (autumn 2021)	Uncertainty remains over the extent and pace of the mitigating impact these programmes will have.			
õ	□ Cause: Incidents of a child's death, abuse, sexual exploitation and allegations of historic abuse. Increasing demand for Children's social care arising from a range of current factors: hidden harm through lockdown; impact of economic downturn; mental health and drug misuse. Inappropriate case management or insufficient management control, including from qualified staff shortages and absences. Poor commissioning and contract monitoring for externally commissioned services, including post-Brexit staff shortages. Ineffective access to, and use of, data and ICT facilities. □ Impact: Harm to children, young people and families. Serious case and domestic homicide reviews. Increased cost and reputational damage to the authority. Judicial reviews, litigation and failed inspections may ensue.	6	4	VH	4	4	VH	Same	Current Controls Up to date safeguardiing policies, procedures and training, supported by a robust quality assurance framework Continuous monitoring of social worker caseloads and capacity, bolstered by the use of agency workers. Development of recruitment and retention incentives Emergency residential care arrangements and risk review process for Covid impacts Monitoring of post-Brexit implications for staffing Continued development of early help services Action plans in place to address findings from external reviews, such as from Ofsted inspections and the Independent Inquiry into Child Sexual Abuse. Planned actions Currently developing closer alignmemt of the Multi Agency Safeguarding Hub and the Early Help Unit (Steve Edwards, monthly review)	The implications of the pandemic for demand in children's social care are yet to become fully clear.	Colin Pettigrew	3 4	Н
	Failure to deliver an effective Medium-Term Financial Strategy Cause: Ineffective strategy to identify sufficient savings proposals, along with delay in transformation programmes. Unbudgeted expenditure on emergency activities, coupled with reduced delivery of services to paying service users and customers, and significant levels of Council Tax non-payment. Non-payment for services received, and failure to deliver capital receipts. Failure inthe budget approval, monitoring and remedial action arrangements.Ineffective re-basing following Covid. Government policy changes. Impact:General Fund balance falls below acceptable levels. Renegotiation of debt at higher rates. Requirement to terminate services without due planning, and potential risk of legal action for failure to deliver minimum service requirement or failure to set a balanced budget. Government intervention, and loss of	4	4	VH	3	3	Н	Same	Current Controls Corporate Leadership Team oversight of budget process and regular Member briefings Established and continuing budget monitoring framework Continual review of the Finance function and appropriate levels of reserves Attendance at Society of County Treasurers and other conferences, environment condition briefings Budget consultation process and regular contact with District Councils Strong links into the Ministry of Housing, Communities and Local Government Strong role locally in the Local Resilience Forumto keep financial risks from the pandemic under regular review Implementing CIPFA Financial Management Code	Strong financial management framework in place, but significant levels of uncertainty from the lasting impacts of the pandemic remain.	Nigel Stevenson	3 3	Н

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No.	Risk Description	Inheren	t Risk		Current Q2	Risk Stat 2021/22		rend	Key risk management activities	Risk Status Rationale	Risk Owner	Target Ri	sk	
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	reputation.		_										_	
8	Prolonged loss of ICT □ Cause: Data integrity issues. Security breaches through system attacks, and failure to meet PSN/DSPN/Cyber Essentials/Cyber Essentials Plus requirements. Infrastructure failure with hardware and software. Inadequate safeguards against theft and unauthorised removal of ICT equipment. Inadequate resilience, including lack of staffing resources. Inadequate management of technical and intellectual debt, and loss of staff with key skills. □ Impact: Loss of ICT systems, data and connectivity. Inability to provide critical services' systems. Loss of productivity. Loss of reputation.	6	4	VH	4	4	VH	digher	Current Controls ICT security strategy and information security policies Corporate sign-off of critical systems Failover testing of power and infrastructure Reporting to Risk, Safety & Emergency Management Board, and to Information Governance Board on compliance with PSN/DSPN/Cyber Essentials, including new set of KPIs Business continuity arrangements for service, including testing response to loss of ICT Maintain fit for purpose ICT provision Ongoing infrastructure refresh programme SLA for 99.8% availability for priority ICT systems Insurance provisions Formal ICT change management process Annual network penetration testing, Public Services Network (PSN) compliance check & Cyber Essentials accreditation Annual infrastructure refresh programme Third party support contracts Planned actions Implementing remediation programme for Cyber Essentials (Paul Martin, by December 2021) and for PSN (Paul Martin,	High state of vigilance still required to protect the integrity, resilience and reliability of the Council's ICT systems. Prioritising Cyber Essentials actions to bolster further the hard security protections in place.	Nigel Stevenson	2	2	ι
9	Failure to respond effectively to a prolonged major emergency in the Community Cause: Ineffective co-ordination with local, regional and national partner organisations. Knock-on impact of capacity issues in other public services, such as NHS, prison service, probation, police, NFRS, etc. Staff absence levels in critical service areas (such as the Customer Services Centre). Failure to plan for, support and stimulate recovery during and after the emergency. Unreliable connectivity to ICT systems. Government policy and requirements issued at short notice. Major and prolonged flooding. Impact: Illness/death of residents and visitors. Loss of staff. Diversion of resources to emergency response and recovery. Infrastructure compromised. Financial costs. The emergency is prolonged in Nottinghamshire compared with swifter recovery in other areas of the country. Loss of reputation. Public inquiry. Inability to respond and deliver business as usual.	5	4	VH	2	3	M :	Same	Current Controls Maintenance of emergency plans and the planning process, including the Covid-19 Pandemic Plan Risk, Safety and Emergency Mgmt. Board and Groups Business plans and business continuity plans Staff training at strategic, tactical and operational levels Exercising of emergency plans County Emergency Centre / Comms systems Partnership working through the Local Resilience Forum LRF Community Risk Register Debriefing following significant emergency events Safety of Sports Grounds and Events Safety structures Planned actions Increase resilience through wider engagement with managers in all departments and Alternative Service Delivery organisations (Rob Fisher, through review at each RSEMB meeting) Emergency planning training event for NCC Extended Leadership Team (Rob Fisher, date to be arranged) Establishment of Public Health Covid Response Team (Jonathan Gribbin, Autumn 2021)	The Council's emergency response arrangements have stood up well to the challenges of the pandemic period. There is some concern over capacity to deal with concurrent emergencies	Derek Higton	2	3	M

ID	Risk Description	Inh	eren	t Risk		Curre	nt Risk	Statu	ıs	Trend	Key risk management activities	Risk Status Rationale	Risk Owner	Target F	isk	
No.							202	-								
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10	Failure to protect vulnerable adults at risk of harm	6	6	4	VH	3	4		Н	Same	Current Controls Care home response hub in place		Melanie Brooks	3	4	Н
											ICS Care Sector Strategic Group to manage risk with partners	The Adults Social Care				
	☐ Cause:										across care sector	and Pulic Health				
	Rising demand for services: public health implications of										ICS Care Sector Quality Oversight group to support quality challenges in the market and coordinate further COVID19	Department is moving				
	the pandemic and economic downturn; rising drug mis- use and mental health concerns; Ability to respond to										outbreaks	into Recovery from the Pandemic with demand				
	public health emergencies or incidents;Tolerance										ICS Collaborative provider forum	for services increasing				
	exceeded for waiting lists across critical services within										Safeguarding Board and partnership working in place Safeguarding policies and precedures in place	and a fragile, unstable				
	Adult Care Services; Tolerance exceeded for s42 safeguarding enquiries waiting for allocation within										Safeguarding policies and procedures in place Scrutiny through Chairman's meetings and monthly Adults'	care sector market.				
	Adults;Tolerance exceeded for increased demand seen										Social Care and Public Health Committee					
	from Customer Service Centre into frontline										Additional government funding to external providers					
	services;Reports provider capacity in the market to meet current demand demonstrated through NHS Care Home										Additional support and training for external providers Quality assurance framework in place , along with contract					
	and Homecare capacity tracker; Task Force data source										monitoring and market development					
	linked to the NHS Capacity Tracker (care homes on										External workforce oversight group					
	watch. Service delivery vulnerabilities arising from: cashflow										Contract management and oversight of crucial providers on monthly basis					
	issues for external care providers; Insurance issues for										Weekly communications with the care market					
	external care providers (Covid Insurance/Car insurance										Daily OPEL Reporting through capacity and flow meetings					
	for Business purposes – Class A); inadequate funding to meet legislative changes across the department;										Bi-Monthly review of ASCPH Risk Register Departmental risks managed through RSEMG					
	recruitment and retention of suitably trained and										Strengthened domestic violence, substance misuse and					
	qualified staff is a key challenge for providers – staff										mental health procedures/funding					
	being 'lost' to other industry, impacting on service delivery. Limitation to effective market management										Work with agencies to respond to post Brexit staffing issues Relationship with CQC/CCG quality monitoring of staff					
	and robust quality monitoring of external provision; poor										Learning from Safeguarding of Adults Reviews, LGSCO					
	data quality; unreliable ICT provision; Human Rights										reviews,complaints					
	breaches;post-Brexit supply issues. External inspections: CQC insitigated actions; Coroner's										Early warning signs from review of core metrics monitored through Departmental Performance Board					
	enquiries; national surveys; Number of Safeguarding										Temporary investment to increase in workforce to meet					
	Adults Reviews Exceeds 3 for the year;Local Government										demand as outlined in Jul 2021 committee report					
	Social Care Ombudsman exceeds 20 per year										Public Health Covid Response Team in place until Sept 2023					
	☐ <i>Impact</i> : Death or harm to service users. Inability to															
	provide care services due to external service providers															
	having insufficient funds to meet additional costs, which															
	could lead to safety and safeguarding concerns for both those in receipt of care and those providing it. Harm to															
	staff and risk to their health and wellbeing. Judicial															
	review and litigation. Failed inspections and loss of															
	reputation															
		l				l							Marjorie			
11	Failure to maintain effective governance	3	3	4	Н	1	4		M	Same	Current Controls Five programmes of work established to manage the		Toward	1	2	L
											response to the emergency					
	☐ Cause: Disruption to the effective operation of the										Committee system met using virtual technologythrough the					
	Corporate Leadership Team, the Risk, Safety &										lockdowns, but all are now meeting in person again CLT/RSEMB/RSEMGs meeting regularly to manage continuity					
	Emergency Management Board (RSEMB) and the Risk, Safety & Emergency Management Groups (RSEMGs).										of critical services in line with business continuity plans.	Governance of the Council continued				
	Suspension of, or significant change in functioning of,										Frequency of meetings is stepped up/down as circumstances	effectively through the				
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ID Risk Description	Inherent Risk	Current Risk Status Q2 2021/22 L I	Trend	Key risk management activities	Risk Status Rationale	Risk Owner	Target Risk
senior management team meetings (e.g. Senior Leadership Teams, Extended Leadership Team). Disconnect or conflict between the priorities and objectives of Councillors and Senior Officers. Ineffective communications with Nottinghamshire residents and businesses. Lack of openness and accountability for decision making. Inability to make lawful and effective decisions and comply with Standing Orders and Financial Regulations. Failure to abide by legislation and best practice guidelines. Inability to address FOI and DPA records and produce Data Subject Access Requests Impact: The operations and activities of the Council become unlawful. Lack of effective strategic and operational direction. Reputational damage. Loss of confidence in the ability of the Council to maintain effective services. Increased risk of unlawful expenditure and waste. Reduced decision-making transparency (Note: Principle 10 of the COVID-19 Pandemic Plan is: 'The Council's democratic mandate must be exercised', 4.1, p. 9).				Regular briefings by senior officers with the Council Leader and Committee Chairs Regular briefings to staff by the Chief Executive Communications strategy in place for the Council's stakeholders Urgent Decision procedures contained within the NCC Constitution set the parameters for the use of urgent decision-making powers and require record-keeping and reporting to relevant committees CLT receiving situation reports from 2nd line assurers around governance Quarterly updates to CLT of the Annual Governance Statement's Action Plan continue. The Local Code of Corporate Governance has been updated. Daily dashboard in place for CLT to monitor staff capacity in critical services and across the Council Assurance mapping process in place, aligned with the corporate risk registers and covering some key aspects of governance. This now incorporates continuous assurance feeds for key corporate systems and activities RSEMB reviews the corporate risk register regularly Planned actions Review depatmental risk registers to mesh with the revised corporate approach to risk management (Rob Disney, commencing August 2021 and to run through to December	height of the pandemic and the committee structure was restored promptly.		