

West Lancashire Borough Council

Risk Management Tool Kit

Version 2: January 2022

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1. Foreword



As Chief Operating Officer I am responsible for enabling the efficient and effective governance of significant risks, and related opportunities across West Lancashire Borough Council.

As we face increasing uncertainty and challenging times it is of increasing importance that we have robust management and can make difficult decisions over resource priorities. It is important that the maximum amount of resources can be channelled into achieving the Councils vision and priorities for West Lancashire.

Central to the ability to do this is the need for efficient and effective risk management which allows us to

take advantage of more opportunities and make decisions that pay full regard to risk consideration.

The Council is risk aware not risk averse, it needs to take full advantage of opportunities for improving services. Therefore, it needs to be pro-active and prepared in the way that it manages risk.

Risk Management is recognised as a key element in the management of the Council. By all staff having a better understanding of the importance and implementation of risk management it will make a huge contribution to improving overall corporate governance. In addition, it will assist in ensuring that mandatory rules, regulations, and obligations are complied with.

Better identification of risks and their management will result in better use of resources. If we all use the resources available to us more efficiently and effectively then the service to our customers can only improve.

Risk Management needs to be embedded in all our activities and it's important that we align risk management activities with other policies, procedures, and strategies to ensure effective operations and service delivery.

This toolkit has been developed to allow officers to identify risks which would prevent them from achieving their objectives (including failing to take advantage of opportunities) and to provide information and guidance on how these risks can be managed.

Jacqui Sinnott-Lacey

Chief Operating Officer

West Lancashire Borough Council

Date: January 2022

2. Introduction

Risk management is about making the most of opportunities by making informed decisions and about achieving objectives once those decisions are made. It is about being risk aware and not risk averse.

The Council accepts that some level of risk is inevitable if it is going to achieve its objectives. It is important, however, that these risks are actively controlled, managed and monitored. One of the biggest risks that could face WLBC would be to not identify the risk in the first place and take no action at all.

The risk management process has been made as simple as possible, and jargon has been kept to a minimum. There may be some terms that you may not be familiar with; therefore, a list of the more common terms has been included at Section 16, (key definitions) for your guidance.

This toolkit is a working document for managers and staff to use in maintaining the documentation required to support their Service and the Council's Key Risk Register. Although risk owners will be tasked with updating risk registers and managing risks, risk management is the responsibility of all Council employees.

This toolkit should be read in conjunction with the Council's Risk Management Policy & Strategy.

3. Attitude to and Principals of Risk Management

Effective risk management enhances:

- the likelihood of us delivering our objectives
- our reputation
- our financial sustainability
- our planning and decision-making activities
- our leadership, management and governance
- our ability to innovate

The approach adopted to risk management ensures that our risk management activities are:

- Proportionate to the level of risk that we are prepared to accept
- Aligned with other Council activities
- Comprehensive, systematic and structured
- Embedded within the Council and our procedures
- Dynamic and responsive to emerging and changing risks.

4. Benefits of Risk Management

When applied appropriately, risk management can be very beneficial. It can help us to achieve our stated objectives and deliver on intended outcomes. It can also help managers to demonstrate good governance, better understand their risk profile and better mitigate risks (particularly uninsurable risks). Externally it can help us to enhance community support and satisfy stakeholders' expectations on internal control. This results in:

- Improved efficiency in the delivery of services
- Enhanced risk reporting
- More satisfied stakeholders
- Better management of change programmes
- Support for innovation
- Fewer complaints
- Greater control of insurance costs
- The provision of evidence to support Assurance Statements
- Better information available for decision making
- Enhanced ability to justify actions taken
- Protection and enhancement of our reputation
- Reduced risk of mistakes
- Conformance with Council policies across all areas of risk
- Improved management performance (good risk management is good management)
- Consistent approach avoiding potentially damaging errors
- Compliance with legislation, rules and regulations
- Securing funding (funding bodies including the government are increasingly interested in the effective management of risk)
- Improved contingency arrangements as set out in our business continuity plan
- A reduction in the risk of fraud and corruption
- Enhanced ability to identify new opportunities and the challenges associated with current opportunities
- Being able to anticipate the risks that could affect performance and put in place actions to minimise disruption
- Better assessment of overall resource needs
- The ability to quickly foresee and respond to change.

The above list is not exhaustive, and all these benefits are achievable as long as we all embrace our risk management responsibilities.

5. Risk Management Policy & Strategy

Our Risk Management Policy including our Strategy support our corporate aims and objectives.

The Council has a clear vision for West Lancashire:

West Lancashire together; the place of choice to live, work, visit and invest

Our priorities are:

- > Create empowered, engaged and inclusive communities
- > Support businesses to adapt and prosper
- > Become a Greener West Lancashire
- > Be a financially sustainable Council by 2023
- A clean, safe environment with affordable homes to buy or rent for everyone in West Lancashire
- > Everyone to be healthy, happy, safe and resilient
- > Everyone to be proud of their Council

Robust risk management will help to support delivery of this vision and associated priorities.

The Risk Management Policy & Strategy sets out the Council's risk management aims and objectives and how these will be achieved. This document is subject to annual review to ensure that it remains up-to-date and continues to reflect our approach to risk management.

It is vital that we develop the use of risk management in our dealings with third parties such as through partnerships, contracts, and other new service delivery models.

While these areas contain significant risks for the Council, they also have the potential to provide significant opportunities if well managed. The use of risk management to mitigate risks while also exploring opportunities is key to ensuring that these working arrangements contribute positively to service delivery.

6. Key Responsibilities

The Risk Management Policy & Strategy details all risk management responsibilities however some of the key responsibilities are highlighted in the following diagram.

| CMT & Members | Determine the risk appetite of the Council Determine the nature and extent of the principal risks we are willing to take in achieving our strategic objectives Ensure that the risks on the Key Risk Register fit within the definition of a key risk |
|--|---|
| Heads of Service | Ensure that key risks are added to and removed from the Key Risk Register as appropriate Carry out live reviews of Service Risk Registers on a quarterly basis. Implement the Risk Management Framework and disseminate best practice throughout the Council. |
| Senior Managers | Manage risk effectively in their area of responsibility. Complete the risk management process as per the Council's Framework. Complete, track and monitor the progress of action plans |
| Risk Management Officer | Develops and maintains the risk management framework Provides training and advice |
| Risk Management Champions | Support their Head of Service in implementing the Risk Management Framework within their Service. Promotes and embeds Risk Management within their Service to engage staff in the management of risk. |
| Audit & Governance Comittee | Review, scrutinise and challenge current and proposed risk management procedures and processes, including progress against planned actions |
| Executive Overview & Scruitny Comittee | Review, scrutinise and challenge current and proposed risk management procedures and processes, including progress against planned actions |
| Cabinet | Approve the risk management policy, strategy and related documents Approve content of key risk register and proposed risk mitigation plans, and monitor implementation |
| Control Owners | Communicate the effectiveness of controls to risk owners. |
| All Employees | Be familiar with, understand, accept and implement the Risk Management Framework. Monitor work on an ongoing basis to identify new and emerging risks and escalate as required. |
| Internal Audit | • Evaluate risk management processes continuously to provide assurance to Members and Senior Management that significant risks are being managed appropriately and that the Risk Management and Internal Control Framework is operating effectively. |

7. Three Lines of Defence Model

The Council operates a Three Lines of Defence Model which provides assurance that Risks are being actively managed and controlled. By having the three lines of defence in operation it allows us to safeguard against breakdowns in risk management. It also emphasises that risk management is everyone's responsibility.

The Three Lines of Defence model distinguishes among three groups (lines) involved in effective risk management:

- Functions that own and manage risks.
- Functions that oversee risks.
- Functions that provide independent assurance.

First Line of Defence

Chief Operating Officer, Heads of Service , Managers and Employees

- Responsible for identifing risk
- Responsible for managing and escalating risks
- •Responsible for mitigating the risks within each Section/ Service Area / Department
- Responsible for implementing and processing adequate internal controlls.

Second Line of Defence

Risk & Insurance Officer and the RMWG

- Responsible for Maintaining and developing the Risk Management Framework
- •Responsible for Reporting to CMT, Cabinet & Committees
- •Advisor to the first line of defence

Third Line of Defence Internal Audit

Independent Assurance

- Reporting to the COO, CMT and appropriate Committees
- Advisory role to improve processes

In addition to the three lines of defence there are then a further two functions:

4th Line of Defence - External auditors will be required to confirm and attest to the accuracy of financial records.

5th Line of Defence – Certain regulators will require compliance with the rules and regulations within their scope.

Our risk and control processes are structured effectively in accordance with the Three Lines of Defence model in that;

- Each line of defence is supported by appropriate policies, role definition and training.
- There is coordination among the separate lines of defence to foster efficiency and effectiveness.
- Risk and control functions operating at the different lines share knowledge and information to assist all functions in better accomplishing their roles in an efficient manner.
- Lines of defence are not combined or coordinated in a manner that compromises their effectiveness.

A more detailed breakdown of the roles and responsibilities of each line is detailed in the Risk Management Policy & Strategy.

8. The Risk Management Process

Our risk management processes has 6 key stages:



8.1 Risk / Opportunity Identification

The purpose of risk identification is to generate a comprehensive inventory of risks based on events that might create, prevent, accelerate or delay the achievement of our objectives. It is important that all risks are identified at each level of the Council e.g., CMT, services, departments, and teams.

The starting point for the identification of risks and opportunities should be to examine the Councils, directorate, service or project's objectives and required outcomes. It is important that officers carry out risk identification and examine all identified risks and link them to the appropriate Council, Service or project objectives and outcomes where possible.

It is mandatory that risk management features on the agenda of quarterly DMT meetings and therefore senior managers should be aware of emerging risks or changing risk context.

It is important that all members of staff are involved in the risk management process. Managers should ensure that there is a process in place for employees to actively report any risks as and when they arise, and for them to report when the extent of the risk changes.

Officers assigned to risks i.e., risk owners should update Pentana with new risks that have been identified and continue to keep risks updated with real time updates.

Some risks will be identified on an on-going basis but will be rectified almost immediately and will therefore not form part of the formal risk register e.g., a missing sign on an emergency exit should not be included but should be rectified as soon as possible. If, however, it was noted that emergency exit signs were being stolen on a regular basis, this fact should be recorded.

A variety of techniques and methods can be used to identify risks

- Experience
- Horizon Scanning
- Checklists and questionnaires
- Inspections of premises
- Audits (Internal e.g. internal audit, health & safety or external)
- Accessing relevant national reports, technical briefings, specialists (including internal experts) and guidance.
- Equality analysis
- Directorate / service / team meetings
- Workshops and brainstorming
- Internal control processes
- Day to day operations
- Local / national or social media
- Alterations to legislation
- Performance Indicators
- Service Action Plans
- Insurance claims / losses information

The list that follows is provided as a guide and is not designed to be all encompassing but is intended to prompt thought to assist as a starting point to identify risk(s). The risk identification stage should be repeated regularly to ensure that new risks arising are identified and brought into the risk profile as appropriate.

| Cultural The cultural environment in which the Council is operating Environmental Environmental events as well as increased environmental awareness or regulation can all impact public service organisations Financial risks Issues arising from the budgetary, financial planning and control framework | Cultural diversity of the local area and the Councils ability to ensure everyone is catered for. Services are no longer in demand due to changing behaviours. Nature of environment Waste disposal and recycling issues Pollution issues, e.g. fly tipping, Growing environmental, social and governance agenda Severe weather or public health emergency increases demand on services Flooding and other severe weather and the need for investment in counter measures Financial situations such as areas of significant over or under spending Flexibility to allocate budgets to address areas where control weakness is identified Level of reserves and budgetary control Monitoring and reporting systems Fraud / mal-administration and corruption Changes in government priorities and fiscal policies that can influence the need for alternative revenue streams Changing international economic relationships that can impact local businesses and the support they require Push towards engaging partnering/ outsourcing to the private sector |
|--|--|
| Health & Safety Risks The need to provide a safe environment for staff, citizens and all stakeholders | Commitment to health, safety and well-being of staff, partners and the community. |

| | Potential physical hazards such as monitoring the condition of trees on WLBC owned land or pathways, and slips and |
|---|--|
| | trips on WLBC owned land |
| Legislative / Regulatory/ Compliance The legal and regulatory framework in which the | Preparedness for new, and compliance with existing, legislation and regulations including European law / regulations Exposure to regulators - e.g. auditors / inspectors Changes to the litigation environment |
| Council exists | |
| Operational risks The need to effectively deliver services which meet the needs and expectations of customers and residents | Why is service delivery not effective? Do residents, taxpayers, businesses and partners receive the services they require when they need them? Are expectations being managed? Extent and nature of consultation with / involvement of community, e.g. community groups, local businesses, focus groups, resident's panels, etc. |
| Partnership / Contractual Key strategic partners from public, private and third sectors, County strategic partnerships, joint ventures and outsourced services | The delivery of services Investment of time, money and expertise Meeting organisational objectives Fair procurement Risk of financial and reputational risk. |
| People The need to be managerially and professionally competent and for staff to be satisfied | Professional / managerial standing of key officers Stability of officer structure - particularly at the top Turnover, absence, stress levels, illness Workforce planning Equalities issues Managing major changes |
| Physical risks to Systems & Assets Physical hazards associated with systems, property, vehicles, plant and equipment. | Nature and condition of assets e.g. buildings and other property owned, dilapidation of leased property Testing of systems to ensure efficiency |
| Political Political decisions can impact on many areas in public service organisations. | Central Government initiatives impacting on Local Government Changes to devolution and powers of councils Political uncertainty and changing priorities of local and national groups Pressure to become more commercial and provide support for local businesses |
| Sociological Changes in social trends can dramatically impact public service organisations, both on service demand and supply. | An ageing population increases pressure on certain services The impact of social media on patient or public activism is a potential opportunity as well as a threat Changing expectations of the local community |
| Technological New technologies create new products and new processes that can impact service providers and end users. | Impact on reputation and services of not implementing new technologies Need to invest in provision of quality telecommunications to all communities Effective communication is essential. |

8.2 Risk Analysis

In the risk analysis phase, we analyse the size of risk based on the likelihood of the risk occurring and the impact that the risk may have if it did occur.

Risk analysis involves a detailed consideration of uncertainties, risk sources, consequences, likelihood, events, scenarios, controls and their effectiveness. An event can have multiple causes and consequences and can affect multiple objectives.

Measures of Likelihood

| Score | Descriptors | | |
|----------|---|--|--|
| Certain | Almost certain, is expected to occur in most circumstances. | | |
| | Greater than 80% chance. | | |
| Probable | Likely, will probably occur in most circumstances. 50% - | | |
| | 80% chance. | | |
| Possible | Possible, might occur at some time. 20% - 50% chance. | | |
| Unlikely | Unlikely, but could occur at some time. Less than a 20% | | |
| | chance. | | |

Measures of Impact

| Score | What is the worst that could happen? |
|-------------|--|
| Low | Minor loss, delay, inconvenience or interruption, very minor damage to reputation and very minor health & safety issues. Opportunity to innovate/make minor improvements to performance missed/wasted. Short to medium term effect. |
| Medium | Waste of time and resources. Good opportunity to innovate/improve performance missed/wasted. Moderate impact on operational efficiency, output and quality. Minor health & safety risk, short term damage to reputation. Medium term effect which may be expensive to recover from. |
| Significant | Major impact on costs and objectives. Substantial opportunity to innovate/improve performance missed/wasted. Significant impact on output and/or quality. Significant damage to reputation and moderate health & safety consequences. Medium to long term effect and expensive to recover from. |
| High | Severe / Critical impact on the achievement of objectives and overall performance. Critical opportunity to innovate/improve performance missed/wasted. Huge impact on costs and/or sustained damage to reputation. Major health & safety issues. Very difficult to recover from and possibly requiring a long term recovery period. |

The first time that a risk is assessed the likelihood and impact of the risk against the Council's risk impact categories will need to be considered as if no controls exist; this will give the inherent risk.

The likelihood and impact of the current risk is then assessed, this is an assessment of the risk with all current controls in place. This step is then repeated for all future assessments.

There will need to be consideration of what the target risk is. This is the level of risk that you are aiming to manage the risk down to, over time. This will need to be considered at each future assessment.

Risks must be assessed against each appropriate impact category.

The following table gives examples of how the **impact** score can be determined for each category.

| Risk Type/ Category | Low | Medium Significant | | High | |
|---|--|--|---|--|--|
| Reputational | Single adverse article in local media or specific professional journal that is not recirculated (e.g.: through social media). WLBC may be one of a number of agencies referred to. | A number of adverse articles in regional media mentioning WLBC. Some circulation via social media. Single request for senior officer / Member to be interviewed on local TV or radio. Adverse reaction by West Lancs residents in social media / online forums. Short term reduction in public confidence. | Series of front page / news headlines in regional or national media. Wider recirculation via social media. Sustained adverse reaction by West Lancs residents in social media. Repeated requests for senior officer / Member to be interviewed on local TV or radio. Long term reduction in public confidence | Sustained adverse publicity in regional media and / or national media coverage. Extensive / prolonged recirculation via social media channels. Repeated requests for Leader / Chief Operating Officer to be interviewed on national TV or radio. Possible resignation of senior officers and or elected members. Total loss of public confidence. | |
| Legislative / Regulatory / Compliance | Failure to meet internal standards. | Minor breach of statutory legislation / regulation. Breach of best practice requirements. | Single breach in statutory duty. Challenging external recommendations / improvement notice. | Several breaches in statutory duty. Enforcement action and improvement notices. Critical report. Censure by regulator; breach of legal or contractual obligation. | |
| Financial | Impact on in year budget pressures to be resolved within Service. | On-going financial pressures which require corporate resolution and should be addressed through the budget setting process. | Significant financial pressures leading to alternative approaches to service delivery. | Inability to continue as a going concern and leading to potential external intervention. | |
| People | Short term low staffing level that temporarily reduces service quality. Some minor staff dissatisfaction | Medium term low level / insufficient experienced staff to deliver quality service. Low staff morale. | Late delivery of key objective / service due to lack of experienced staff. Very low staff morale. | None delivery of key objective / service due to lack of experienced staff. | |
| Health & Safety | Minor injury requiring no first aid treatment or medication. | Short lived / minor injury or illness that may require first aid or medication. No overnight hospitalisation. | Injury that requires short term hospitalisation. Small number of work days lost. | Injury that requires medium to long term hospitalisation. Fatalities and / or incidences of permanent disability or ill health. Risk of prosecution from enforcement agencies. | |

| Risk Type/ Low Medium | | Medium | Significant | High | |
|---|---|--|--|--|--|
| Category | | | | | |
| OperationalSome short term disruption to a non- critical service to citizens / customers. No significant effect on customer satisfaction. Low chance of fraudulent activity occurring.Short term disruption to a prolonged disruption to a no- critical service of prolonged disruption to a no- critical service. | | disruption to a critical service or prolonged disruption to a non- critical service. Noticeable to customers and affecting their satisfaction with the service provided. Medium chance of fraudulent activity | in the Business Continuity Plan as requiring notification of the Emergency Planning Officer. Customer satisfaction | | |
| Environmental | Superficial impact on environment with cosmetic remediation. | Environmental damage with short term remediation. Less than 3 months. | Environmental damage with medium term remediation. | Major environmental damage, reversible with long-term remediation. | |
| Physical Systems & Assets | Minor property, asset or facilities damage and minor disruption to systems. | Significant but temporary damage or disruption to assets, property, facilities or systems. Sustained damage to property, assets, facilities or systems. Repair or replacements lasting more than 1 month. | | Long term or permeant loss or disruption to critical property, assets, facilities and systems. | |
| Political | Minor disruption to service provision which leads to need to notify political members for awareness. | Moderate disruption to service provision and / or objective delivery, leading to regular involvement of political member responsible for the Service. | Major impact on costs and objectives of service delivery, leading to regular review by Members Committee and constant updates to Lead Member for the Service | Critical disruption to delivery of objectives leading to resignation of political members elected position within the Council leading to elections process, delay in achievement of objectives whilst vacant roles filled. | |

All risk impact categories must be considered but there will be few, perhaps no, risks you identify that will have a quantifiable impact across all categories. You need only consider against those categories where the risk may impact.

Carrying out risk assessments using agreed risk impact categories will allow us to identify accumulations and interdependencies of risk.

Once the likelihood and impact for each appropriate category is scored on Pentana an overall risk score will be generated.

If for example you have a risk with a potential high environmental risk, but only a low financial impact this does not mean that Pentana will average the overall impact to medium. There can be no trade-off of impacts. The Council has decided that each of the risk impact categories is individually scored independently of how they affect others. For example, a high reputational impact is not made more acceptable by the Council not having suffered a financial loss to get to that point. Your impact score will be equivalent to the highest score you have assessed in any single domain, which will then also act as a guide to where you may best focus your risk treatment (see Section 8.4).

To determine the likelihood, you could:

- look at past records
- consider personal relevant experience (and intuition)
- look at industry-relevant experience of the risk
- consult published literature on the risk
- do some testing or experiments (for example, market research)
- use economic or statistical models to make forecasts
- use experts in the area of that risk to make judgements.

8.3 Risk Evaluation

The purpose of risk evaluation is to support decision making. Risk evaluation involves comparing the results of the risk analysis with the Council's risk appetite to determine where additional action is required. This can lead to a decision to:

- do nothing further
- consider risk treatment options
- undertake further analysis to better understand the risk
- maintain existing controls
- reconsider objectives

The Councils full risk appetite statement is set out in pages 10-13 of the Risk Management Policy and summarised in the following chart.

| Risk Type | Risk Appetite |
|--|------------------|
| Reputational | 3 |
| Legislative / Regulatory / Compliance | 2 |
| Financial | 3 |
| People | 3 |
| Health & Safety | 1 |
| Operational | 2 |
| Environmental | 3 |
| Physical Systems & Assets | 3 |
| Political | 2 |

| Ratings | Risk Appetite | Meanings |
|---------|----------------------|-------------------------------|
| 1 | Low | Residual risk only acceptable |
| | | in extreme |
| | | situations (e.g. where the |
| | | risk has a very low |
| | | impact and likelihood) |
| 2 | Medium | Residual risk is managed |
| | | down on a cost-benefit basis. |
| | | A medium amount of risk is |
| | | acceptable however, on |
| | | balance, control is weighted |
| | | higher than acceptance. |
| 3 | Significant | Residual risk is accepted to |
| | | significant levels. |
| | | Significant implies a pure |
| | | cost-benefit approach. |
| | | |
| 4 | High | Residual risk is accepted to |
| | | high levels |
| | | |
| | | |

Key

Once the inherent risk has been classified it is mapped onto the Councils corporate risk matrix. The colours are a "traffic light" system that denotes the risk appetite of the Council.

The mapping is repeated to record the current risk as this will show how controls in place have influenced the level of risk e.g., the inherent risk could place a risk within the red zone as a critical risk, but because controls in place are evaluated as being effective and consistently applied the current risk could fall within the green (comfortable) zone. The mapping should be repeated to record the target risk to provide a view of how much further it is aimed to reduce the level of risk to.

We are more concerned with whether the current risk is within our risk appetite than how it scores. What really matters is that we can clearly identify what else we need to do to reduce the risk so that it falls within our accepted risk appetite level. Ask yourself is the current risk tolerable? Evaluation of the risk will lead to decisions regarding the treatment of risk.

| | | Impact | | | |
|------------|----------|--------|--------|-------------|------|
| | | Low | Medium | Significant | High |
| | Certain | 4 | 8 | 12 | 16 |
| Likelihood | Probable | 3 | 6 | 9 | 12 |
| | Possible | 2 | 4 | 6 | 8 |
| Like | Unlikely | 1 | 2 | 3 | 4 |

WLBC Impact / Likelihood Matrix

| Level of Concern | Action Required | | |
|------------------|---|--|--|
| Critical | Urgent attention required at highest level to ensure risk is reduced to an acceptable level. Action planning should start without delay. Progress on actions should be reported to the Chief Operating Officer and / or the Leader. | | |
| Concerned | Requires mitigation and a contingency plan. Report on progress to CMT. | | |
| Cautious | Acceptable level of risk however the risk requires mitigation /consideration. Reviewed at Head of Service level. | | |
| Comfortable | Acceptable level of risk. Keep under review but no action required unless changes occur. | | |

8.4 Risk Treatment & Management

The purpose of risk treatment is to select and implement options for addressing risk.

Risk treatment involves an iterative process of:

- formulating and selecting risk treatment options
- planning and implementing risk treatment and controls
- assessing the effectiveness of that treatment / control
- deciding whether the remaining risk is acceptable
- if not acceptable, taking further treatment

Controls are methods used by managers to assure them that they are achieving their aims, meeting service objectives and delivering the outcomes required, and that the service is being provided in the most efficient and effective way. The cost and robustness of existing or additional controls is a key consideration and needs to be balanced against the potential consequences if the event occurred. The cost of implementing and operating a control should not normally exceed the maximum potential benefit.

Risk action planning or risk treatment should only address those risks considered to be at an unacceptably high level, so requiring additional treatment.

For risks requiring additional treatment, there are four primary responses, these are known as the 4T's.

1. *Tolerating* risks means that you intend to manage the risk within your existing management routines. Risks should only be accepted where officers believe that the current risk is tolerable i.e. the risk falls within the green (comfortable) or yellow (cautious) category of the matrix.

Risks may also have to be tolerated where there is no option but to tolerate a risk associated with delivering an essential public service. In this case it is recommended that a contingency plan is put in place to deal with the risk should it occur.

- 2. *Treating* risk means that you identify additional action(s) to be taken that will reduce the likelihood and / or impact if the event occurs. Controls can be:
- **Preventative** which are designed to limit the possibility of an undesirable outcome being realised. Examples include, physically restricting access to hazardous chemicals, insisting on two signatories, ensuring segregation of duties exist within a system, implementing authorisation limits, or restricting levels of access on IT systems. These controls will help reduce risk levels from the outset.
- **Corrective** which are designed to limit the scope for loss and reduce any undesirable outcomes that have been realised. They may also provide a route of recourse to achieve some recovery against loss or damage. Examples include barriers should hazardous chemicals escape, rotation of staff, passwords and other access controls.
- **Directive** which are designed to ensure that a particular outcome is achieved. They are based on giving directions to people on how to ensure that losses do not occur. Examples include procedure manuals, guidance notes, instructions and training. Such controls advise on how to carry out processes safely but if they are not adhered to, they will not prevent risk events occurring. Insurance and contracts are also examples of directive controls.

- **Detective** which are designed to identify occasions when undesirable outcomes have been realised. Their effect is, by definition, 'after the event' so they are only appropriate when it is possible to accept that the loss or damage has occurred. Examples include health monitoring and screening, audit reviews and reconciliations.
- 3. *Transferring* risk means using an insurer or other third party to cover all or part of the cost or losses should a risk materialise. However, care needs to be taken to accurately specify the risks to be covered. Making arrangements with others such as joint working, partnerships or contracting out to provide services could also be used to transfer/ share risks. However, other risks can arise from these arrangements and the responsibility of providing the service could remain with the Council. When transferring or sharing risks with other parties, ensure that risk registers detail where liability and accountability lies between parties.
- **4. Terminating** risk means ceasing to carry out the activity because modifying it or controlling it would not reduce the risk to an acceptable level.

It may however be impossible to terminate some risks i.e., the delivery of essential public services. In this case the action you need to take is to ensure that we have a contingency plan in place so that should the risk occur, we can deal effectively with the consequences. See section 12 below for information on business continuity management.

8.5 Reporting and Recording

It is imperative that risks are recorded on the appropriate risk registers on the Pentana Risk System, the Council's corporate risk management software. Risks must continue to be regularly monitored and actively managed until they are realised.

Every risk should be assigned to a risk owner who is identified on the risk register. The risk owner (the officer named in the "assigned to" category) is the designated member of staff who carries the ultimate responsibility for agreeing and delivering the action plan to control the risk and for monitoring progress against it.

It is the responsibility of the risk owner to ensure that their risk is on Pentana, that it is kept updated and that the risk is escalated through the appropriate channels when necessary. It is also their responsibility to make sure that their risk is linked to their service action plan and performance indicators if appropriate.

The Council's risk register has several key elements to it and officers are expected to record those elements detailed below on their service risk register. Whilst the following information summarises the steps that need to be taken, all officers using Pentana risk should watch the <u>Pentana Risk Webinar</u> available on the intranet before inputting any risks into Pentana

Officers should also consult the flowchart for permissions required to add a risk to Service and Key Risk Registers at Section 10.

| Code & Title | Code: This is a unique identification number used to identify and track the risk in the risk register e.g. Insurance Risks have the prefix INS, then the first risk identified in this category has a unique ID of 01. Create an appropriate code for your risk. |
|--------------|---|
| | Title: A brief description of the potential risk. It should include the cause and trigger of the risk. The cause is our what and our where, it's the situation or event that exposes us to the risk. The trigger is our how and our why. Include the event that could or has occurred that results in a negative impact on the objectives being achieved. |

Notes, Owners & Profile Tab

| Risk Ownerships | Ensure that all ownerships in the section are assigned. |
|-----------------|--|
| | Assigned to - Assign the risk to the risk owner, i.e. the officer who has day to day responsibility for managing the risk. The risk is the responsibly of the assigned officer. They are the risk owner. |
| | Managed by - The person ultimately responsible for managing the risk, agreeing and delivering the action plan to control the risk and monitoring progress against it. |
| | Risk Champion – Allocate to the Risk Management Champion for your area. A list of Risk Champions is available on the risk management page of the intranet. |

| Corporate Priority | Select the appropriate priority from the dropdown box. |
|--------------------|--|
| | |

| Potential Effect | Refers to any effect associated with an action that is possible, in certain circumstances. The effect may refer to a threat or damage that may be caused to or by the Council e.g. bad publicity, loss of income, negative effect on local residents/stakeholders and staff. |
|------------------|--|
| | It may also refer to the potential opportunities that the risk may create e.g. jobs, facilities for local residents, income generation, opportunities for staff development. |
| | The potential effect is the consequence of the risk. What is the effect of the risk, how bid and how bad could it be? What's our worst-case scenario as it currently stands? |

| | Year Identified The year that you first became aware of the risk. |
|--|---|
|--|---|

| Notes | Note any details that you wish to note in this section. Examples include: |
|-------|--|
| | Why a risk category was not scored |
| | Reasons for changes in scoring |
| | Detail briefly the current position of the risk e.g. has a report gone to Cabinet / Council, has a report been approved, is a periodic review about to take place, has a project manager |
| | been appointed, is the risk being audited. |

Internal Controls Tab

| Internal Controls | Controls are activities designed to prevent, reduce or eliminate the risk from occurring (see section 8.4). |
|-------------------|--|
| | Detail the controls that are in place to reduce the inherent risk score to the current risk score and detail who the controls are assigned to, i.e. the control owner. |
| | Record the further controls that are required to reach the target risk and detail who the controls will be assigned to. |
| | Individual controls should be scored as not effective, partially effective or fully effective. |
| | The control should state whether is reduces the impact and / or likelihood of the risk. |
| | Enter a description to detail more information about the specific control and a note to explain why the internal control has been scored at its current level of effectiveness. If appropriate record where the evidence that the controls are operating effectively can be found. |
| | As actions are taken to move a control from not effective to partially or fully effective, remember to refresh the control detail. |
| | Controls must be allocated to a control owner to enable us to identity the responsibility for a control. |
| | Once internal controls are entered summarise them in the summary section and tick the "internal controls ok" box if you believe that adequate controls are in place. |

Related To Tab

| Actions | Once risks have been updated on Pentana consider whether your Service Action Plan needs to be amended to take account of the work that still needs to be carried out to bring the risk down to an acceptable level. The aim is to shift the risk from critical to comfortable in the prioritisation matrix, at a reasonable cost. |
|---------------------------|---|
| | Action plans and risks should be linked on the Pentana system and it is recommended that where appropriate, or where the risk is a key risk that it is linked to an action and vice versa. |
| Performance Indicators | Performance indicators can assist in providing feedback for the risk management process. This has the advantage of helping to prioritise actions. |
| | Linking risk management to performance indicators assists in ensuring risk management is embedded in the Council. Performance indicators that fall short of expectations or target can |
| | indicate the effect of risk events or slowly operating control failures. |

| Risks | Link to any other appropriate risks |
|---|---|
| Assignment of a risk to a risk category | Key Risks should be allocated to the Key Risk Register by assigning them to category "KR Key Risks". |
| | You should discuss the risk with your Head of Service to ensure that they agree with allocating the risk to the Key Risk Register. (See Section 10) |
| | Project Risks should be assigned to a specific project risk register. |
| | If you require a new risk category to be set up, then please contact the Risk and Insurance Officer |

More Tab

| Management | Select how controlled the risk is Uncontrolled - no controls in place that reduce the impact or likelihood of the risk occurring Control Pending - controls considered but action not yet taken to implement them Controlled – controls in place are reducing the impact and/ or likelihood of the risk occurring. Over Controlled – the controls in place are disproportionate to the level of risk. |
|------------|---|
| Approach | For risks requiring additional treatment, there are four primary responses, these are known as the 4T's (see section 8.4). Select one of the 4Ts of risk management: tolerate, terminate, treat and transfer. |

Risk Assessments

| Current Risk Review Date | The date that you reviewed the risk. Even if no change is required to the risk this date should be updated so that those looking at the register can see that the risk has recently been considered and remains unchanged. |
|-----------------------------|---|
| Inherent Risk Matrix | This will be completed the first time you score a risk. Consider the Council's risk matrix and where the inherent risk sits in relation to likelihood and the impact of all categories then plot the score. |
| Current Risk Matrix | Consider the Council's risk matrix and where the residual risk i.e. the current risk sits in relation to likelihood and the impact of all categories then plot the score. The score should illustrate how the risk scored at the time of the review. |
| Target Risk Matrix | What we can do further to reduce the risk down to an acceptable level? Use the Council's risk assessment to calculate the likelihood and impact score. |

8.6 Monitor and Review

The purpose of monitoring and review is to assure and improve the quality and effectiveness of the risk management process design, implementation and outcomes. Ongoing monitoring and periodic review of the risk management process and its outcomes takes place, and the results are incorporated in our performance management, measurement and reporting activities.

In addition, monitoring and review should take place in all individual stages of the process. It is necessary to monitor the risks, controls and any documented actions and to regularly report on the progress being made in managing risks, or taking advantage of opportunities, so that the achievement of the Council's aims and objectives is maximised and losses are minimised.

There needs to be an assessment of the effectiveness of risk management actions put in place to reduce the likelihood / impact of adverse risk events occurring. Alternative action will need to be taken if the initial action has proved ineffective.

Reviews of risk registers to ensure they remain up-to-date and relevant should also be carried out as;

- Few risks and risk action plans remain static; risks change, priorities change, actions are completed, risk responses that were once effective may become irrelevant.
- Some may become less of a hazard, for example once all the affected staff have been trained. Others may become more likely if a key milestone is approaching, such as the end of a funding stream.
- It may become necessary to escalate a risk if the situation has changed or the initial assessment has proven to be inaccurate. Conversely it may be possible to downgrade a risk.
- New risks identified or opportunities arising will need to be added.
- It may be appropriate to deactivate risks.

Monitoring progress and reviewing the risk registers should take place on at least a quarterly basis, and more frequently if there are many changes or the project is progressing rapidly.

Documenting the review of the risk register, service action plans and performance indicators is also necessary, but need not be onerous. The fact that the review has been carried out should be recorded on Pentana along with a note of any changes made. The Corporate Risk Matrix provides a mechanism for escalating risks or highlighting changes that more senior management needs to be aware of.

Deactivation of Risks (See flowchart at Section 11)

When a risk is realised it may be deactivated from the Pentana system however risks should never be deleted so that an audit trail of the management of the risk exists.

It is important that risks are not deactivated until we are satisfied that the risk no longer presents.

Before risks are deactivated from Service Risk Registers the risk owner must obtain their line mangers permission to deactivate the risk. Text should be entered into the notes section advising who deactivated the risk, who approved the risk for deactivation and the reason(s) why the risk was deactivated.

Before risks are deactivated from the Key Risk Register the risk owner must obtain permission from their Head of Service to deactivate the risk. Risk owners must also make the Risk and Insurance Officer aware that the risk is being deactivated so that this can be reported to the

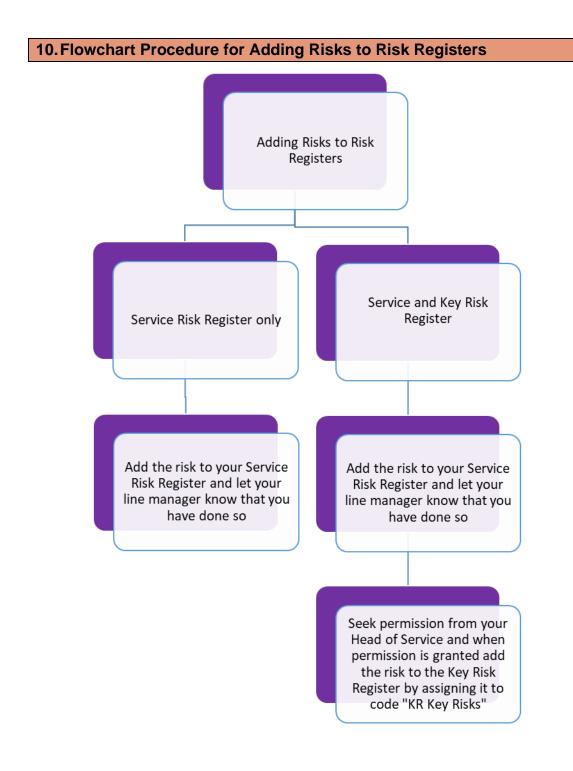
appropriate Cabinet & Committees. Text should be entered into the notes section advising who deactivated the risk, who approved the risk for deactivation and the reason why the risk was deactivated.

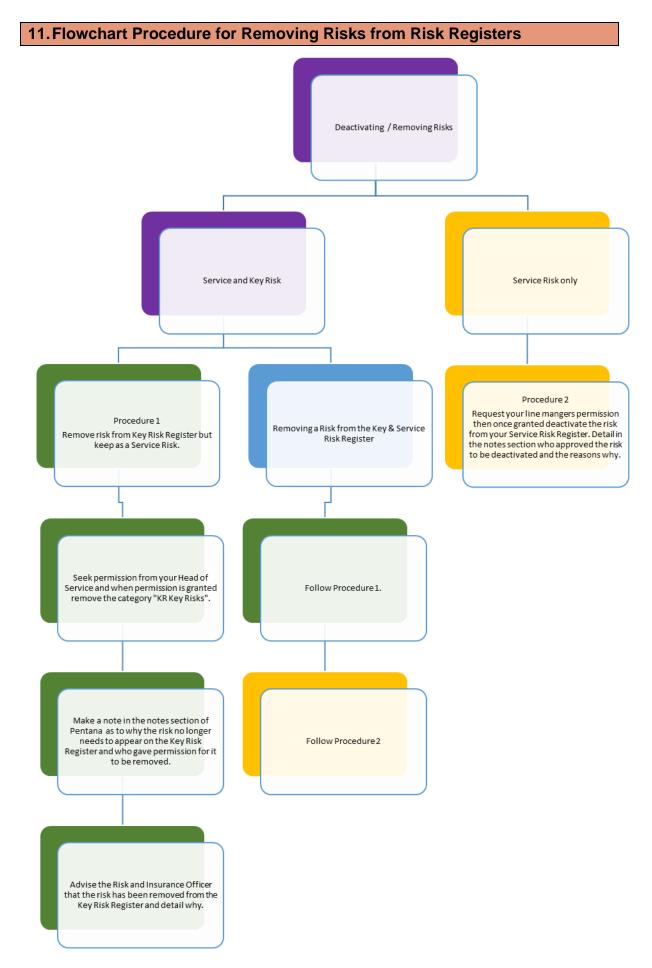
9. Risk at DMT Meetings

It is a mandatory requirement that risks are discussed at least quarterly at DMT meetings.

Although the exact process used will differ between management teams, the following questions can be used as a guide to promote discussion.

- 1. Are there any risks missing from the risk register that should be included?
- 2. Have any of the risks in the risk register changed significantly in terms of impact and/ or likelihood and require additional mitigation efforts?
- 3. Do any of the risks now require escalation?
- 4. Are service action plans and performance indicators still appropriate for the risks?
- 5. Is there anything planned in the next 12 months that may give rise to service or key risks?
- 6. Can any risks be removed from the register?
- 7. How might the risks on the key risk register impact the service?





12. Business Planning & Budget Setting

One of the keys to successfully embedding risk management is ensuring that it is explicitly linked to business planning. In a properly embedded process, remedial action should take place to mitigate those risks which managers believe are insufficiently controlled, i.e. where the current risk exceeds the Council's risk appetite. Managing under-controlled risks can require changes to the way services are delivered or structured, and this may require the allocation of additional resources.

Effective management of risks can only be achieved through the effective management of resources. Where control weaknesses are identified which create an unacceptable exposure to risk, resources should be allocated to 'plugging the gap'. This can take a variety of forms, depending upon the nature of the risk, the existing controls, and impact of the exposure.

Those controls currently in place may require strengthening, or new ones may need introducing. For example, it could be that an ICT solution is required to improve efficiency or enable additional monitoring; or possibly the feasibility of the service being provided by a partner instead of directly by the Council. These examples have a cost, some of which may be financial, some of which may have an opportunity cost. As a result, it is important that managers retain flexibility in their service and financial planning to enable developing risks to be managed. Of course, the converse may also apply; the risk process could identify risks which are over-controlled. Savings may be achieved by reducing the control environment, saving money and / or enabling the re-direction of staff to other areas to improve service delivery.

The risk register and service action plan should be used to record these responses. The agreed actions can be logged on both documents, with more detail added on the action plan. This could also include a discussion of where the resources to fund the strengthening will come from. The result will be a concise analysis of the nature of the risk exposure, the response to the problem and the financing of the solution. Where budget variances occur as a result of the additional expenditure, a concise and robust explanation should be available to support this.

It is important to use the knowledge we have acquired through management of our risks to inform and shape our future actions. Action plans should be updated with the results of risk assessments which have been previously undertaken. Risk management should not be viewed in isolation but should be used as an important tool in informing the business planning process. What we learn now should help us identify what we will do in the future, how we will achieve it, and the problems we may encounter. This will ensure that the risks and mitigations already identified are considered and included in subsequent action and business continuity plans. The benefit will be that business and service action plans are as relevant and accurate as possible and contribute effectively to the achievement of objectives and the delivery of the outcomes and services required.

13. Annual Report & Annual Governance Statement

There is an Annual Report & Annual Governance Statement (which includes a statement on internal control) signed off by the Leader of the Council and the Chief Operating Officer. These are published by July following the financial year end. The Annual Governance Statement is included within the Council's Financial Accounts.

Directors and Service Heads are specifically asked about risk management within the assurance statements they complete which provide supporting evidence for the Annual Governance Statement. Using risk management will assist Directors in completing other aspects of their directorate assurance statements.

Although the arrangements for preparing the directorate assurance statements are well established, it is imperative that the process continues to be driven down the organisation.

It is important that we encourage and where necessary demand the wider use of statements across directorates, to assist in demonstrating compliance and accountability.

14. Training

The Council acknowledges that risk management training for staff and Members is crucial to the effectives of embedding Risk Management. It strives to ensure that all employees have a basic understanding of risk management and how the Council's Risk Management Framework operates.

Employees undertake risk management training as a mandatory part of the induction process. Two presentations are available, one for Senior Management and Risk Coordinators and one for all staff. New employees should watch the appropriate presentation. If appropriate they should also watch the presentation on how to use the Pentana Risk System. These presentations may also be watched by any member of staff who requires refresher training.

A risk management toolbox talk should be given to those members of staff who do not have intranet access.

Training for Officers will be arranged and provided annually by the Council's Risk and Insurance Officer. Such training may be outsourced or provided in house.

Training for Members will be arranged and provided every two years by the Council's Risk and Insurance Officer. Such training may be outsourced or provided in house. In addition, a risk management webinar is available and forms part of Members essential induction training. This webinar can also be viewed as refresher training.

Frequent "lunch and learn" sessions are run on a variety of risk management topics. These are recorded and are made available on the intranet for all officers to view.

The quarterly risk newsletter "The Risk Round Up" is a good source of risk information and is circulate to all staff and Members. It highlights training sessions that are available, digests risk disasters and lessons that can be learnt from other organisations and covers appropriate risk management topics.

The Risk & Insurance Officer welcomes she opportunity to attend DMT and service meetings to discuss risk and to act as a critical friend in reviewing the service risk register.

Please contact the Risk and Insurance Officer if any risk management training needs are identified within your department and training will be provided.

15. Useful Contact Points / Information

Head of Finance, Procurement and Commercial Services - James Pierce

Risk and Insurance Officer - Rebecca Spicer

Head of Internal Audit - Jacqueline Pendleton

Partnership & Performance Officer - Alison Grimes

16. Definitions

| Word / Term | Definition |
|-------------------------|---|
| Assurance | A positive declaration, given by a Director, that the risks within their service area are being managed effectively. |
| Control Owner | A control owner is accountable for implementing and maintaining the effectiveness of specific controls as recorded in a risk register, in a position description or in organisational policies and procedures. Control owners may also be responsible for designing or modifying controls to improve their effectiveness. |
| Cost | Of activities, direct and indirect, involving any negative impact, including money, time, labour, disruption, goodwill, and political and intangible losses. |
| Event | An incident or situation, which occurs in a particular place, during a particular interval in time. |
| Hazard | A source of potential harm or a situation with a potential to cause loss. |
| Impact | The probable effect on the Council if the risk occurs or the opportunity is not taken. |
| Inherent Risk | The likelihood and impact of the risk if no action is taken or existing actions cease. |
| Key Risk Register | This records those risks which if they occur would have the greatest impact on the Council, the achievement of its priorities, objectives and activities. They are strategic high-level Council risks. |
| Likelihood | How often a risk is expected to materialise |
| Loss | Any negative consequences, financial or otherwise. |
| Management Assurance | The opinion given by managers, based on evidence they have obtained from reviewing and improving the controls in place, regarding the adequacy of the management of risks and the achievement of service objectives within their area of responsibility. |
| Monitor | To check, supervise, observe critically, or record the progress of an activity, action or system on a regular basis in order to identify change. |
| Objective | A fundamental service delivery aim. |

| Residual Risk | The remaining level of risk after effective mitigating action has been | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|
| | taken to manage the likelihood and or impact of the risk. Often | | | | | | | |
| | referred to as the current risk. | | | | | | | |
| Risk | An event / series of events happening, or action(s) taken that will | | | | | | | |
| | prevent the Council from achieving its planned objectives, in part or | | | | | | | |
| | in full. A risk can also be the failure to take advantage of | | | | | | | |
| | opportunities to optimise the Council achieving its planned | | | | | | | |
| | objectives. | | | | | | | |
| Risk Acceptance | An informed decision is taken to accept the impact and the likelihood | | | | | | | |
| | of a particular risk. | | | | | | | |
| Risk Analysis | A systematic use of available information to determine how often | | | | | | | |
| | specified events may occur and the magnitude of their | | | | | | | |
| | consequences. | | | | | | | |
| Risk Appetite | The amount of risk that the Council is prepared to accept, tolerate | | | | | | | |
| | or be exposed to - see the Council's Risk Appetite Statement. | | | | | | | |
| Risk Avoidance | An informed decision not to become involved in a risk situation. | | | | | | | |
| | | | | | | | | |
| Risk Capacity | The capability of the organisation to take risk. | | | | | | | |
| Risk Control | That part of risk management that involves the implementation of | | | | | | | |
| | policies, standards, procedures and physical changes to eliminate | | | | | | | |
| | or minimise negative risk. | | | | | | | |
| Risk Exposure | How much is actually at risk | | | | | | | |
| Risk Evaluation | A decision point in which we decide whether to respond or not to | | | | | | | |
| | respond to the risk. | | | | | | | |
| Service Risk | Records operational risks which are faced in the day to day delivery | | | | | | | |
| Register | of services. Service risks are those that could have an effect on the | | | | | | | |
| 5 | successful achievement of the service priorities, objectives and | | | | | | | |
| | activities | | | | | | | |
| Stakeholder | An individual, group or organisation that can affect, be affected by, | | | | | | | |
| | or perceive itself to be affected by risk. | | | | | | | |
| Virement | Movement of funds between budget codes within the financial year. | | | | | | | |
| | | | | | | | | |

| Risk Management Working Group Meetings | | | RMWG Meeting | | | | | | RMWG Meeting | | | |
|---|-------------------------------------|-----|-------------------------------|--|--------|---|---|---------------------|-------------------------------|---|--|--|
| Training | *Training for Members & Officers | | | | | | | | | | | Review & Update On Line Training Sessions |
| Executive Overview & Scrutiny | | | | | | Risk Register reported Risk Register reported to Cabinet to Executive O&S | | | | | Risk Register reported to Executive O&S | |
| Cabinet Report / Update | | | | | | Risk Register reported to Cabinet | | | | | | Risk Register reported to Cabinet |
| Risk Monitoring by CMT | Risk Reporting to CMT | | | Risk Reporting to CMT (approval prior to Cabinet & Exec O&S) | | | Risk Reporting to CMT | | | Risk Reporting to CMT (approval prior to Cabinet & Exec O&S) | | |
| "Real Time" Review of Service Risk Registers by Heads of Service | | | Service Registers reviewed | | | Service Registers reviewed | | | Service Registers reviewed | | | Service Registers reviewed |
| Service Action Planning | SAPs agreed and implemented | | | | | | | SAP guidance issued | | | | Proposed SAPs finalised |
| Risk Management Policy (including Strategy & Risk Appetite Statement) & Toolkit | | | | | | | Reviewed and updated if required. Endorsed by CMT | | | Reported to Audit & Governance and Executive Overview & Scrutiny | | Approval by Cabinet |
| | April | Мау | June | VinL | August | September | October | November | December | January | February | March |

17. Risk Management Work Cycle

* Training for staff is provided annually and Members provided every two years