Oadby & Wigston BOROUGH COUNCIL

Law & Democracy
Democratic Services

TO COUNCILLOR:

G A Boulter
C S Gore
S Z Haq
K J Loydall (Chair)
I K Ridley

I summon you to attend the following meeting for the transaction of the business in the agenda below.

Meeting:	Audit Committee
Date & Time:	Wednesday, 21 January 2026, 6.00 pm
Venue:	Civic Suite 2, Brocks Hill Council Offices, Washbrook Lane, Oadby, Leicester, LE2 5JJ
Contact:	Democratic Services **t:** (0116) 257 2775 **e:** democratic.services@oadby-wigston.gov.uk

Yours faithfully

Council Offices
Oadby
13 January 2026

Anne E Court
Chief Executive

Meeting ID: 2962

ITEM NO. **AGENDA** **PAGE NO'S**

Meeting Live Broadcast | Information and Link

This meeting will be broadcast live.

Press & Public Access:

A direct link to the live broadcast of the meeting's proceedings on the Council's Civico platform is below.

https://civico.net/oadby-wigston/23239-Audit-Committee

1. Apologies for Absence

To receive apologies for absence from Members to determine the quorum of the meeting in accordance with Rule 7 of Part 4 of the Constitution.

2. Appointment of Substitutes

To appoint substitute Members in accordance with Rule 26 of Part 4 of the Constitution and the Substitution Procedure Rules.

3. Declarations of Interest

Members are reminded that any declaration of interest should be made having regard to the Members' Code of Conduct. In particular, Members must make clear the nature of the interest and whether it is 'pecuniary' or 'non-pecuniary'.

4. Minutes of the Previous Meeting **3 - 4**

To read, confirm and approve the minutes of the previous meeting in accordance with Rule 19 of Part 4 of the Constitution.

5. Action List Arising from the Previous Meeting **5**

6. Petitions and Deputations

To receive any Petitions and, or, Deputations in accordance with Rule(s) 11 and 12 of Part 4 of the Constitution and the Petitions Procedure Rules respectively.

7. Internal Audit Progress Report (January 2026) **6 - 20**

Report of the Chief Finance Officer / S151 Officer.

8. Strategic Risk Register Update (Q2 2025/26) **21 - 28**

Report of the Chief Finance Officer / S151 Officer.

Access all available public meeting information, documents and live broadcasts on:

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MINUTES OF THE MEETING OF THE AUDIT COMMITTEE HELD AT CIVIC SUITE 2, BROCKS HILL COUNCIL OFFICES, WASHBROOK LANE, OADBY, LEICESTER, LE2 5JJ ON TUESDAY, 9 DECEMBER 2025 COMMENCING AT 6.00 PM

PRESENT

K J Loydall Chair

COUNCILLORS

Meeting ID: 3029

G A Boulter
C S Gore
S Z Haq
I K Ridley

OFFICERS IN ATTENDANCE

R Anderson	External Auditor
S A E Ball	Finance Manager
S J Ball	Legal & Democratic Services Manager / Monitoring Officer (Solicitor)
C Warren	Chief Finance Officer / Section 151 Officer
S Wheeliker	Senior Democratic & Electoral Services Officer

OTHERS IN ATTENDANCE

R Anderson	Grant Thornton UK LLP

65. APOLOGIES FOR ABSENCE

None.

66. APPOINTMENT OF SUBSTITUTES

None.

67. DECLARATIONS OF INTEREST

None.

68. ANNUAL FINANCIAL STATEMENT (2024/25)

The Committee gave consideration to the report and appendices (as set out at pages 3 – 225 of the agenda reports pack) which sought approval of the Statement of Accounts 2024/25.

It was moved by the Chair, seconded by Councillor S Z Haq and

UNANIMOUSLY RESOLVED THAT:

i) The Audited Financial Report (2024/25) (Appendix 1) including the Annual Governance Statement (Appendix 2) (approved June 25) for the year ending 31 March 2025, subject to any final changes required in agreement with the Councils external auditors, Grant Thornton, be

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approved;

ii) The Audit Findings Report (2024/25) (at Appendix 3) be noted;

iii) The publication of the Audited Financial Report and Annual Governance Statement be approved and the S151 Officer be authorised, in consultation with the Chair of the Audit Committee, to make any final changes to the accounts as agreed with the external Auditors, in order to comply with the Councils statutory obligations; and

iv) The Letter of Representation (Appendix 4) be approved.

THE MEETING CLOSED AT 6.25 pm

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Audit Committee

ACTION LIST

Arising from the Meeting held on Wednesday, 01 October 2025

No.	Minute Ref. / Item of Business	*Action Details / Action Due Date	Responsible Officer(s)' Initials	Action Status
1.	**7. - Internal Audit Progress Report (October 2025**) More information requested on how the Finance Department has used benchmarking to improve economy, efficiency and effectiveness (Amber rating)	Simon Ball to provide information on any benchmarking activities carried out by Finance Department. ***Due by Jan-26***	**SiBa**	Complete
		Email providing response provided to all members of this Committee on 12/01/2026.		
2.	**8. - External Audit Progress Report (October 2025)** Request to have all of the "Questions to ask Officers" answered and replies to be made available to members (Pages 71-74).	Simon Ball to provide responses to all "Questions to ask Officers" ***Due by Jan-26***	**SiBa**	Complete
		Email providing response provided to all members of this Committee on 12/01/26.		
3.	**9. - Strategic Risk Register Update (Q1 2025/26)** Confirmation requested that Homeless and Government reorganisation are included in the risk register.	Simon Ball to provide requested information. ***Due by Jan-26***	**SiBa**	Complete
		Email providing response provided to all members of this Committee on 3/10/25.		

* | All actions listed are those which are informally raised by Members during the course of debate upon a given item of business which do not form part of - but may be additional, incidental or ancillary to - any motion(s) carried. These actions are for the attention of the responsible Officer(s).

Agenda Item 7

Audit Committee	Wednesday, 21 January 2026	Matter for Information

Report Title: **Internal Audit Progress Report**

Report Author(s): **Colleen Warren (Chief Finance Officer / S151 Officer)**
Lucy Cater (Assistant Director, SWAP)

Purpose of Report:	To present a summary of the audit work concluded since the last meeting of this Committee.
Report Summary:	To provide an update on the progress of the Internal Audit Plan, along with Final Reports and Updated Agreed Actions
Recommendation(s):	**That the Audit Committee discusses and notes the content of the report**
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	Colleen Warren (Chief Finance Officer / S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk Lucy Cater (Assistant Director SWAP) 020 8142 5030 lucy.cater@swapaudit.co.uk
Strategic Objectives:	Our Council (SO1)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications directly arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Effective Utilisation of Assets / Buildings (CR5) Regulatory Governance (CR6) Organisational / Transformational Change (CR8) Increased Fraud (CR10) Cyber Threat / Security (CR11) Other corporate risk(s)
Equalities and Equalities Assessment (EA):	There are no implications arising from this report.
Human Rights:	There are no implications arising from this report.
Health and Safety:	There are no implications arising from this report.

Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	The report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	None.
Background Papers:	The following documents have been identified by the author of the report in accordance with section 100D.5(a) of the Local Government Act 1972 and are listed in accordance with section 100 D.1(a) for inspection by members of the public: • Internal Audit Progress Reports These documents will be available for inspection online at www.oadby-wigston.gov.uk or by contacting democratic services democratic.services@oadby-wigston.gov.uk for a period of up to 4 years from the date of the meeting.
Appendices:	**1.** Internal Audit Progress Report 2025/26 **2.** Open Agreed Actions January 2026

1. Executive Summary

1.1 The Council must ensure that it has sound systems of internal control that facilitate the effective management of all the Council's functions. The work delivered by SWAP Internal Audit Services (SWAP), the Council's internal audit service, is one of the control assurance sources available to the Audit, Compliance and Governance Committee, the Executive Leadership Team and Service Leadership Team and supports the work of the external auditor.

1.2 The Annual Internal Audit Opinion presented to the Audit Committee provides an overall assurance opinion at the end of the financial year. This Internal Audit Progress Report, however, is designed to give the Audit Committee the opportunity to comment on the work completed by the partnership and provide 'through the year' comment and assurances on the control environment.

2. Background

2.1 The report attached at **Appendix 1** sets out the work undertaken by SWAP for the Council since the last meeting of this Committee. It follows the risk-based auditing principles and, therefore, this is an opportunity for the Committee to be aware of emerging issues which have resulted in SWAP involvement.

2.2 Officers from SWAP will be in attendance at the Committee meeting and will be available to address Members' questions.

3. Main Points

3.1 The progress report enables the Audit Committee to monitor the work of the Internal Audit Service and ensure that it remains effective. It also provides the Committee with assurance opinions over areas reviewed within the reporting period, details of audit recommendations and the outcome of follow-up reviews conducted on previous audit recommendations.

3.2 We have finalised 2 assurance audits since the last meeting of this committee

- Elections – High Reasonable
- Payroll – High Substantial

We have also completed the grant certification work for the Housing Pooling Capital Receipts

3.3 We will follow up all agreed actions. A report **(Appendix 2)** showing all open agreed actions has been included for Members information.

Oadby and Wigston Borough Council

Report of Internal Audit Activity

January 2026

Appendix 1

Internal Audit ▪ Risk ▪ Special Investigations ▪ Consultancy

Unrestricted

Contents

The contacts at SWAP in connection with this report are:

Lucy Cater
Assistant Director
Tel: 01285 623340
lucy.cater@swapaudit.co.uk

Jaina Mistry
Principal Auditor
Tel: 01285 623337
jaina.mistry@swapaudit.co.uk

- Contents:

Internal Audit Definitions

Audit Plan Progress

Finalised Audit Assignments

SWAP work is completed to comply with the International Professional Practices Framework of the Institute of Internal Auditors, further guided by interpretation provided by the Public Sector Internal Audit Standards (PSIAS) and the CIPFA Local Government Application Note.

Internal Audit Definitions

At the conclusion of audit assignment work each review is awarded a "Control Assurance Definition";

- **No**
- **Limited**
- **Reasonable**
- **Substantial**

Audit Framework Definitions

Control Assurance Definitions

No	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
Reasonable	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Substantial	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

Non-Opinion – In addition to our opinion based work we will provide consultancy services. The "advice" offered by Internal Audit in its consultancy role may include risk analysis and evaluation, developing potential solutions to problems and providing controls assurance. Consultancy services from Internal Audit offer management the added benefit of being delivered by people with a good understanding of the overall risk, control and governance concerns and priorities of the organisation.

Internal Audit Definitions

Recommendations are prioritised from 1 to 3 on how important they are to the service/area audited. These are not necessarily how important they are to the organisation at a corporate level.

Each audit covers key risks. For each audit a risk assessment is undertaken whereby with management risks for the review are assessed at the Corporate inherent level (the risk of exposure with no controls in place) and then once the audit is complete the Auditors assessment of the risk exposure at Corporate level after the control environment has been tested. All assessments are made against the risk appetite agreed by the SWAP Management Board.

Audit Framework Definitions

Categorisation of Recommendations

When making recommendations to Management it is important that they know how important the recommendation is to their service. There should be a clear distinction between how we evaluate the risks identified for the service but scored at a corporate level and the priority assigned to the recommendation. No timeframes have been applied to each Priority as implementation will depend on several factors; however, the definitions imply the importance.

	Categorisation of Recommendations
Priority 1	Findings that are fundamental to the integrity of the service's business processes and require the immediate attention of management.
Priority 2	Important findings that need to be resolved by management
Priority 3	Finding that requires attention.

Definitions of Risk

Risk	**Reporting Implications**
High	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.
Medium	Issues which should be addressed by management in their areas of responsibility.
Low	Issues of a minor nature or best practice where some improvement can be made.

Audit Plan Progress

Audit Type	Audit Area	Status	Opinion	No of Rec	Priority			Comments
					1	2	3	
Governance	Transparency Agenda	Final Report	High Limited	7	-	7	-	Reported in July
Operational	Section 106 Process	Final Report	High Substantial	0	-	-	-	Reported in October
Grant Certification	Pooling Housing Capital Receipts	Complete	N/A	0	-	-	-	
Operational	Elections	Final Report	High Reasonable	3	-	2	1	Report Included
Core Financial	Payroll	Final Report	High Substantial	1	-	-	1	Report Included
Operational	Health and Safety	Draft Report						
Core Financial	Revenues and Benefits	In Progress						
Operational	Housing Service Recharges	Deferred						Audit Deferred to Quarter 4
Governance	Data Breaches	Deferred						Audit Deferred to Quarter 4
Operational	Data Protection (to include Data Retention Procedures)	Deferred						Audit Deferred to Quarter 4

Audit Plan Progress

Audit Type	Audit Area	Status	Opinion	No of Rec	Priority			Comments
					1	2	3	
Follow-Up	Follow-Up of Agreed Actions (not included in an audit above)	On Going						
Other Audit Involvement	Management of the IA Function and Client Support	On Going						
Other Audit Involvement	Contingency – Provision for New Work based on emerging risks							

Summary of Audit Findings

The following are the Internal Audit reports, of each audit review finalised, since the last Committee update

Elections – Final Report – December 2025

Audit Objective	To review and assess the effectiveness of the Council's Election Service.

Executive Summary

Assurance Opinion	Management Actions		Organisational Risk Assessment	Medium
The review highlighted a generally sound system of governance, risk management and control in place. We identified some issues, non-compliance or scope for improvement which may put at risk the achievement of objectives.	Priority 1	0	Our audit work includes areas that we consider have a medium organisational risk and potential impact.	
	Priority 2	2		
	Priority 3	1		
	Total	3		

Key Conclusions

£	Returning Officer Claims need to be fully reconciled to Payroll & Creditor Systems to ensure Transparency. Failure to reconcile the Returning Officer Charges to relevant systems presents a risk of financial misstatement.
	Where Elections Staff also hold posts within the Elections Team there must be assurance that there is no overlap between Election duties and usual pay. Failure to ensure these payments are justified and/or proportionate could result in non-compliance with the Returning Officer Claim and the Council's Pay Policy, leading to financial loss and reputational damage.
	While Voter Registration Procedures align with the Elections Act and are sourced directly from the Electoral Commission's website, there is currently no comprehensive framework in place to coordinate and consolidate the team's daily operations.
	The Electoral Register is well maintained, and the team make full use of available data matching resources to ensure accuracy of the register. A small number of duplicate records were found; however, the full population was tested which meant that overall results were excellent. Access controls to the Electoral Register are well maintained and appropriate for user roles.

Audit Scope

This was an assurance audit where discussions were held with Officers and testing was undertaken in the following areas reviewing 2024 and 2025 elections and the current register:

- Maintenance of the Electoral Register.
- Accuracy & security of Elections Data.
- Planning & Resourcing of the Annual Canvass and Elections.
- Elections Staff Training procedures.

Other Relevant Information

Our review found planning and resourcing of the Annual Canvass and Elections process was sound. There was evidence that the Canvass is successfully planned, emails provide details of information gathering, recruitment, training & distribution of the relevant registration forms & letters. Election staff training records reconciled to staffing lists accordingly.

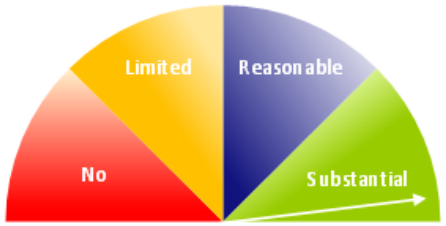
Unrestricted

Payroll – Final Report – December 2025

Audit Objective

To provide assurance that the Council has robust controls in place to manage the payroll function ensuring that the Payroll is accurate, timely and in accordance with policy guidance.

Executive Summary



Assurance Opinion

The review confirmed a sound system of governance, risk management and control, with internal controls operating effectively and being consistently applied to support the achievement of objectives.

Management Actions

Priority 1	0
Priority 2	0
Priority 3	1
Total	1

Organisational Risk Assessment — Low

Our audit work includes areas that we consider have a low organisational risk and potential impact.

Key Conclusions

The Council intranet HR page shares guidance relating to pay, pensions, mileage and overtime. Payroll policies are linked ensuring easy access to employees. However, the Travel and Subsistence Policy approved in September 2009, although not held on the intranet requires review and updating. We understand this work is underway and the updated policy will be presented for approval in due course.

The BACs data is collated by the HR Advisors with oversight by the HR Manager prior to being sent to EMSS to run payroll.

Payroll system data for starters, leavers and variations is accurately maintained against employee records.

Key control testing:

- Exception reporting is reviewed monthly with oversight by the HR Manager.
- The clearing of the suspense account is maintained regularly.
- The payroll reconciliation is reconciled to the general ledger monthly and with oversight by the Finance Manager. Records evidenced salaries are reconciled back to the individual cost centres.

Audit Scope

This was an assurance audit where discussions were held with Officers and testing undertaken to support statements made. We obtained an overview of the arrangements in place, including, but not limited to, a review of the following areas for the period covering April 2025 to November 2025:

- Payroll policy and procedures,
- Accuracy of starters, leavers and variation data in the payroll system,
- Key control testing – independent review of exception reporting, timely clearing of items in Payroll Suspense and reconciliation processes,
- Payroll and BACs authorisation,
- Follow up of recommendations from the last 360 Assurance audit.

Other Relevant Information

We can confirm that the action reported in the previous Payroll audit has been implemented, transactional testing of overtime and mileage claims have appropriate documented approvals.

The Council outsource payroll to the East Midlands Shared Services (EMSS) and have a contract in place which clearly defines EMSS responsibilities and performance expectations. Monthly meetings are held between the Council and EMSS to raise, discuss and resolve issues. We suggest the Council get assurances that EMSS are processing payroll according to legislation and Council policy.

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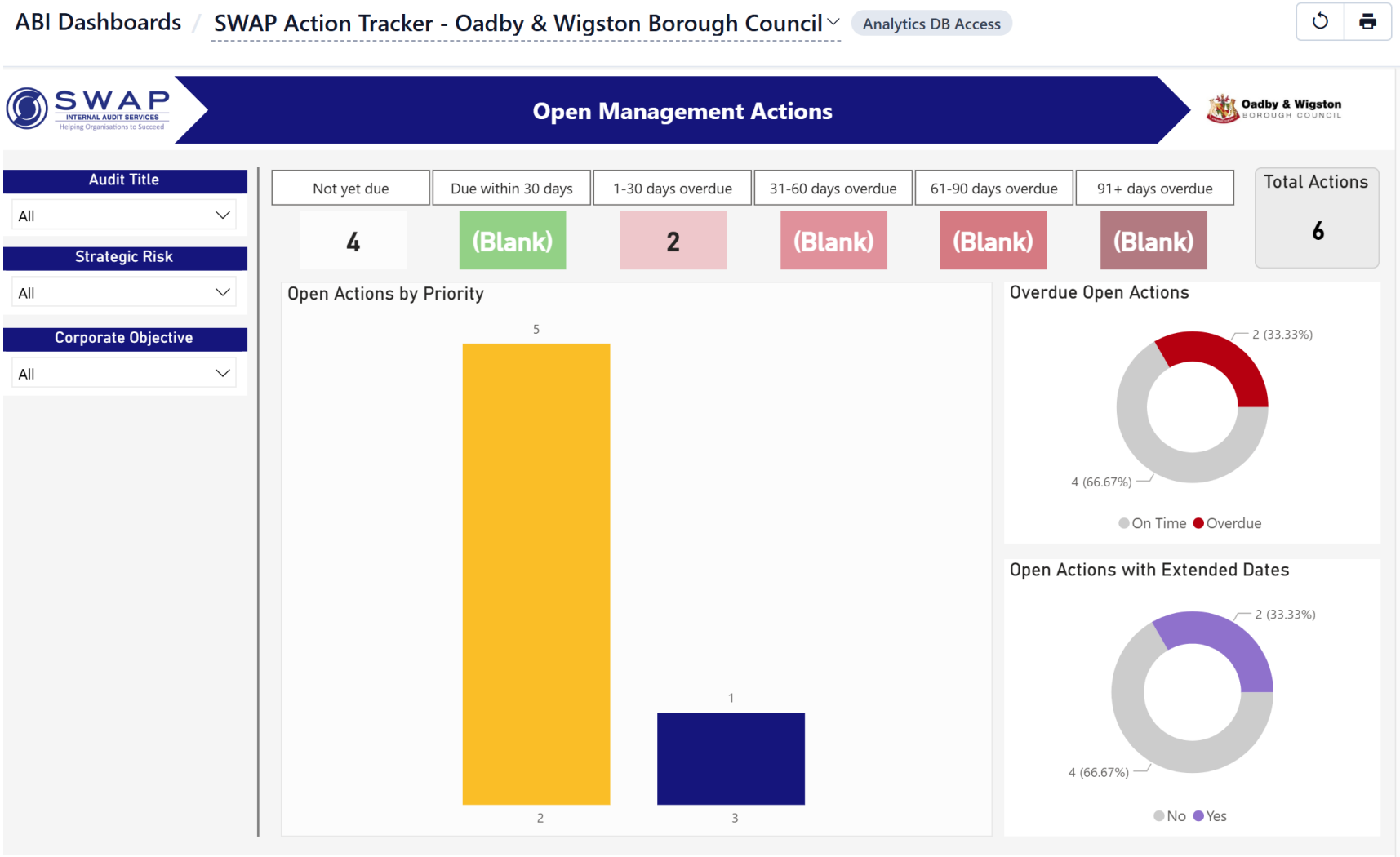
Unrestricted

OPEN AGREED ACTIONS – JANUARY 2026



Appendix 2

OPEN AGREED ACTIONS - JANUARY 2026

ID (Action Plan)	ID (Issue)	Audit Title	Title (Issue)	Issue Status	Period	Priority Score	Original Timescale	Timescale	Follow-Up Assessment
7649	7170	OWBC - Elections	There is no overarching Procedure Manual for Election Processes	Pending Remediation	2025/26	3	31/03/2026		
7768	7281	OWBC - Elections	Elections Payments to Permanent Elections Staff need to be reviewed.	Pending Remediation	2025/26	2	31/03/2026		
7813	7323	OWBC - Elections	Returning Officer Charges Claims need to be reconciled.	Pending Remediation	2025/26	2	31/03/2026		
7621	7143	OWBC - Payroll 2025/26	The Travel and Subsistence Policy	Pending Remediation	2025/26	2	30/06/2026		
6592	6174	OWBC - Transparency Agenda 2025/26	Local land and building assets are not published	Pending Remediation	2025/26	2	31/10/2025	31/12/2025	Will be followed up during January
6595	6177	OWBC - Transparency Agenda 2025/26	Fraud data is not published	Pending Remediation	2025/26	2	31/10/2025	31/12/2025	Will be followed up during January

Audit Committee	Wednesday, 21 January 2026	Matter for Information

Report Title: **Strategic Risk Register Update (Q2 2025/26)**

Report Author(s): **Colleen Warren (Chief Finance Officer/S151 Officer)**

Purpose of Report:	To present the latest Strategic Risk Register to Committee for information.
Report Summary:	In accordance with the requirements of the Councils Risk Management Policy, this report presents the Strategic Risk Register for the Committees consideration. The register is updated in a regular basis through discussions with the internal Risk Management group, members of the SLT and CMT.
Recommendation(s):	**That the content of the report and the Strategic Risk Register, as set out in Appendix 1, be considered and noted.**
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	Colleen Warren (Chief Finance Officer/S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk
Strategic Objectives:	Our Council (SO1)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications directly arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Effective Utilisation of Assets / Buildings (CR5) Regulatory Governance (CR6) Failure to Respond to a Significant Incident (CR7) Organisational / Transformational Change (CR8) Economy / Regeneration (CR9) Increased Fraud (CR10) Cyber Threat / Security (CR11)
Equalities and Equalities Assessment (EA):	There are no implications directly arising from this report. EA not applicable.
Human Rights:	There are no implications directly arising from this report.
Health and Safety:	There are no implications directly arising from this report.

Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	As the author, the report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	Risk Management Group Senior Leadership Team Corporate Management Team
Background Papers:	None.
Appendices:	**1.** Strategic Risk Register (Q2 2025/26)

1. Section Title

1.1 In line with the Risk Management policy, which was approved by the Audit Committee in January 2023, this report presents the Strategic Risk Register (Q2 2025/26) at Appendix 1.

1.2 The Risk Management Group, SLT and CMT have reviewed and updated the Risk Register.

1.3 This report presents a high-level summary of the risks contained within the register and highlights any movements in the scores since the last report presented in October 2025.

2. Strategic Risk Register

2.1 The Strategic Risk Register contains a total of 14 risks, and no additional risks have been added.

2.2 The change in mitigated score is visually represented by the arrows shown in the far-right column "Direction of travel of mitigated score risk".

2.3 Changes have been made to the existing controls, management actions and target dates, which are detailed in the review Commentary column of the Risk Register and are highlighted in red for ease of reading.

Strategic Risk Register

Ref	Risk Definition What is the headline risk/issue?	2019-2024	Root Cause: What is the root cause or problem? What could go wrong?	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score (no controls)			Existing Controls (sources of assurance)	Mitigated Risk Score (with controls)			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score
					Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating				
CR1	**Decreasing Financial resources / Increasing Financial Pressures**	Resourceful and Resilient	□Increase demand for services e.g. benefits □ Continuing Austerity □ Political promises □ Change in priorities □ Deflated housing market □ Lack of business growth □ Further changes in legislation □ Pooling/Unpooling of NNDR □ Universal Credit □ Political hesitancy in decision making for fundamental service reform. □ Cost-of-living crises □ Supplier price variations as a result of inflation Spending Review Fair Funding Review Homelessness Government Grants	□ Cuts in services □ Political and customer expectations not met □ Quality of service □ Reputation damage □ Knock on impact on the local community and economy e.g. spiral effect □ Legal challenge, □ Reduction in rent/monies owed to the council through the introduction of UC, □Increased homelessness adding stresses to council finances and the local economy. □ Supplier price variations significant. Devolution /LGR Reduction in Government Funding Reduction in NNDR (pooling) Further budget pressures/ larger budget gap - further sustainabilty plans needed.	5	4	20	□ Budgetary Control processes and committee reporting □ Medium Term Financial Strategy and HRA Business Plan - including scenario planning □ Setting and monitoring of savings and efficiency targets □ Annual Fees and Charges review □ Disclosure of expenditure over £250 □ Review of reserves and balances □ Treasury Management and Investment Strategy □ Prudential Indicators □ Revised Financial Regulations □ Business Rates Pooling □ Procurement Policy, □ Homelessness team increased □ Assessment of viability of capital projects. □ Financial Inclusion Officer assists vulnerable residents □ Service/Review Transformation Programme across the council to improve service delivery □ Ongoing impacts of inflation captured in medium term financial plan. □ New MTFS approved February 2025 □ Engagement with MP, LGA and MHCLG about the council's unique financial Sustainably Programme now □ The savings targets are constantly monitored by SLT and is a standing item on SLT agenda and opportunities for innovation are regularly sought such as winning an award to install solar panels at Wigston Pool and parklands, therefore reducing energy costs for the Council. Final budget presented to full council in February 2025. Financial challenges of Devolution to be managed through budget set aside from reserves. Vacancy Management Part of the S151 Leicestershire Group/SDCT Marketing of public spaces fror income generation Homelessness Strategy, purchasing of additional properties, leasing properties, reducing use of B&B	4	4	16	□Delivery of Service Delivery Changes – Financial Sustainability Plan. Regular review of savings targets. New PID developed including all aspects linked to sustainability of the Councils finances, eg establishments, contracts etc Final Budget for 2025/26 approved at FUll Council in February 2025. Monitoring of reserves quarterly - set amount for Devolution with further requirements to be brought to members for approval. Complete Government surveys, monitor information from Government Sustainability Plan reviewed by SLT in Qtr 1 24/25 Addition of Homelessness Officer in 26/27 to purchase properties for homelessness, use of grants available from Government.	□ Monthly reviews 2025	4	4	16	Chief Financial Officer	Mar-26	**Updated existing controls to remove historic / controls no longer relevant. The delivery of Service Delivery Changes – Financial Sustainability Plan, where activity is well under way. New PID completed.**	
CR2	**Key Supplier Failure**	Our Borough - the place to be. Resourceful and Resilient.	Business failure	□ Cost implications □ Business Continuity □ Loss of revenue □ Service failure □ TUPE issues □ Potential court action □ Increased complaints □ Reputation issues □ Political damage □ Delays Impact of TUPE Inability to process payroll	5	4	20	□ Formal contracts and agreements including realistic notice periods □ Tender arrangements and pre qualification financial assessments □ Qualified internal officers to provide legal advice □ Use of external counsel □ Performance management of contracts, Comprehensive Contract Register, Partnership working with Local Authority Partners □ Part of management Board to oversee delegated services such as Lightbulb and Building Control. □ Creation of Project and Procurement Team and Procurement Policy promotes use of established frameworks, thus reducing risk of supplier failure. □ Partnership and contract risk registers □ Contract term renegotiation with key providers as necessary □ Contract Management review is undertaken as part of the Sustainability Programme □ Contracts information has been incorporated into draft service plan template. □Contracts an item on 1-2-1's. □ Specialists engaged where required i.e. Leisure Operator Contract (LOC) negotiations. □LOC Contract renegotiation approved at Council 12 December 2023 and SLM has agreed to changes. Formal Contract management training has been rolled out via CMPP Contract Procedure Rules training to be rolled out Summer 25 Contract Assurance Board meeting September 25	4	3	12	Contract review complete (Sustainability programme). Further external review of our contract management process and support with improvements (CMPP) Updating of Contract Procedure Rules went to PFD in June 25 Contract Assurance Board meetings to be held Bi-annually from Sept 25	Monthly reviews	2	2	4	CFO/Monitoring Officer	Mar-26	Updated management control	

Appendix 1

Strategic Risk Register

Ref	Risk Definition What is the headline risk/issue?	2019-2024	Root Cause: What is the root cause or problem? What could go wrong?	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score (no controls)			Existing Controls (sources of assurance)	Mitigated Risk Score (with controls)			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score
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CR3	**Failure to work effectively with other public sector partner organisations (PSOs) and 3rd sector organisations**	Our Borough - the place to be. Resourceful and Resilient.	□ Poor service delivery from PSOs the Council has agreements with □ Lack of engagement from partner PSOs □ Governance arrangements which foster effective relationships may be inadequate leading to relationship breakdown Failure of relationships at strategic level in County & across members	□ Loss of public confidence in Community Safety Partnership □ Loss of funding for LLR Sports Alliance partnership □ May not realise potential economies of scale □ Impact on staff morale	4	3	12	□ Formal agreements with public sector partners which clearly identify roles & responsibilities including H&WB, Lightbulb, Building Control and Local Land Charges. □ Governance arrangements which manage performance against agreements □ Lead officer arrangements/contract manager □ Financial controls ensuring payments are only authorised where service being delivered by partner organisation is received and is of appropriate quality □Strategic Planning Group - governance arrangements are in place for this. Member Advisory Group also in place Performance of these arrangements is formally reviewed and changes are made if necessary. □Regular account meetings with contracted 3rd sector organisations. □Service Level Agreements in place where necessary. Cost of Living support programme has funded 3rd sector organisations and support for warm hubs. Contract review complete. OWBC representation at all Partnership Executive Board Meetings. Working with all districts and boroughs across Leicestershire and Rutland. Partners attended Service Committee Meeting in September.	2	3	6	Partnership Consultaion planned for Quarter 3. Development of our offer to all partners also to be finalised in this quarter.	Monthly reviews	2	3	6	Strategic Director/Monitoring Officer	Mar-26	Updated management control	
CR4	**Hard to reach demographics feel disenfranchised through lack of specific communication and engagement.**	Our Borough - the place to be. Resourceful and Resilient.	□ Staff capacity could impact on engagement □ hard to reach communities □ some resident groups not digitally connected □ change in political power could result in non-statutory service being stopped □ Failure to consult when appropriate to do so □ Funding changes impacting on roles □ Digital exclusion as a result of cost of living crises	□ Reputational damage □ lack of support for community initiatives □ missed opportunity to impact on equalities agenda and HWB of residents □ Citizens panel not representative of demographic. □ Services may not meet the needs of this demographic	4	4	16	□ Public consultation surveys to obtain feedback for influencing strategy/policy through Citizens Panel and other communication channels, compliant with the Code of Practice on Consultations □ Communications Strategy in place □ Gov.Delivery digital e-mail system – targeted delivery on specific topics e.g. tenants newsletter in place □ Financial Inclusion Officer □ Volunteer community champion Digital Newsletter - specifically relating to health and wellbeing targeting socially vulnerable □ Events programme run by Community Health Improvement Officers to target vulnerable and hard to reach residents/communities. □ Statement of community involvement in place □ Residents Forums meet regularly □ Sports and physical activity commission plan to target hard to reach □ Customer Experience Strategy in place □ Appointment hubs in operation as well as reception point open at Brockshill □Website offers the facility to change language. □Use language line for translation services. □Tenant & Leaseholder focus group established and meeting on a quarterly basis. □Language Translation Service incorporate. All households are to receive 2*letter communications regarding change to the bin collection regime. □Customer Experience Strategy Action Plan being monitored □ Housing Regulators new Tenant Satisfaction collected Virtual Appoiintments to increase customer contact have commenced Volunteer event took place in November 24. Volunteer thank you lunch took place in June 25 Engaging with Local Communities in relation to LGR, Tenant Forum representation and young people. Volunteer event took place in Nov 25	2	2	4		Jun-25	1	2	3	Head of Customer Service and Transformation	Mar-26	Updated management control	
CR5	**Political Dynamics**	Our Borough - the place to be. Resourceful and Resilient.	□ Change in political power □ Change in leader □ New members □ Public perception changes Government changes	□ Change in priorities □ Change in member/officer engagement □ Breakdown in communication □ Inability to meet expectations □ Reputation issues (organisational and political) □ Reactive decision making (rather than planned) □ Failure to follow legislative requirements e.g. equalities □ Further strain on council finances	3	4	12	□ Member development programmes □ New Code of Conduct has been adopted which comes into force on 1/4/22, with training planned to familiarise members with its content □ Policies e.g. Safeguarding/Equalities and DBS checks □ Provision of chairing skills training □ Constitution, which is in the process of being reviewed to reflect new management structure □ Public consultation, □ Development of member enquiry system □ Training for members covering a range of areas including IT and Planning □ Buddying system in place for Elected Members to use □ Members bulletin □ Customer Service training and Political awareness training has been undertaken □ Member and officer training undertaken with Centre for Governance and Scrutiny November 2022 □ Full review of members induction programme has been completed. □ Induction training delivered for new members during May to July 2023. □ SLT/Member workshops July, Sept. Nov □ CMT/Member training sept 'meet the teams'. □ OFLOG Self Assessment presented to Full Council in April 2024. Member Working Group established to engage with the Alternate Weekly Waste Collection Project Member Advisory Group in place, funded by UK Government projects.	3	3	9	□ New Corporate Strategy to be presented to Members - presented 16/7/24 at full council □ Planning Member training externally facilitated Audit Committtee training to be investigated.(CIPFA)	Ongoing	2	3	6	Monitoring Officer	Mar-26	Updated management controls and updated further actions	

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CR6	**Reputation Damage**	Our Borough - the place to be. Resourceful and Resilient.	□ Litigation □ Breakdown in a partnership □ Failure to have regard to officers advice □ Whistle blowing □ Freedom of Information (FoI) □ Inconsistent decision making □ Poor Media Relations □ Poor communication □ Failure to provide or reduce services □ Poor performance □ Poor business planning and consideration of financial implications	□ Intervention □ Loss of public confidence □ Ombudsman findings □ Court costs □ Quality of service affected □ Breakdown in a partnership □ Adverse publicity □ Lower public satisfaction level □ Time spent mitigating damage/rectifying the situation □ Low Morale □ Difficulties to recruit/staff retention □ Inadequate budget provision, inappropriate financial decisions made	4	4	16	□ Review of external communication by Heads of Service □ Use of modern.gov □ Whistle blowing and Anti Fraud and Corruption policies □ Freedom of Information log □ Qualified in house legal team □ Officer complaints training & new complaints process □ Performance reporting and Key Performance Indicators □ Public and media consultation □ Achieved accreditation for customer service excellence award □ Communications Policy and Communications Plan in place □ Online customer care training in place for all new staff and a separate module also in place for managers. □ Partnership working eg Lightbulb & Local Plan □ Marketing & Communications Manager □ Social Media Policy □ Service Standards □ Project Comms Plans e.g. external communications regarding alternate weekly waste collection project. □ Performance Review Plans □ Standardised project appraisal and affordability approach as per Corporate Peer Review Action Plan built into new MTFS □ Complaints handling and investigation training for all managers undertaken □Safety Risk assessments always consider reputational damage as a risk. □Anti Fraud Policy in place. □Good relationships built with media i.e. cemetery □Consultations conducted i.e budget Recruitment pages revamped on Corporate website and Corporate Strategy published Aug 24 Staff Survey and Engagement group	2	2	4	Communications, internal & external throughout 2025 as Districts & Rutland CC Local Government Reorganisation submission progressed and submitted Nov 25. Communications will continue in 2026 as and when government consultation & decisions are made. Member/Officer relations training in Nov 25 by external provider. Further internal session planned on Local Government Association's updated practice guidance in early 2026	Ongoing	2	2	4	Chief Executive	Mar-26	Updated further controls	
CR7	**Effective utilisation of Assets/Buildings (non-housing)**	Resourceful and Resilient	□ Failure to follow Health and Safety □ Insurance/Public Liability □ Financial investment □ Contractor going into liquidation □ Political will □ Facility Management □ Depreciation	□ Loss of investment opportunities □ Loss of income □ Loss of capital □ Higher revenue costs □ Costs □ Death or injury □ Higher insurance premiums □ Reputation damage □ Public liability □ Personal liability for corporate team e.g. corporate manslaughter	4	3	12	□ Physical controls (e.g. Door Codes, fire alarms) □ Designated first aiders □ Capital Programme and HRA Business Plan - annual reiteration and regular monitoring □ Fixed Asset Register □ Annual valuation of property by external valuer □ Designated Health and Safety Officer □ Implementation of controls within Health and Safety Executive review □ Health and Safety risk assessments □ Designated Facilities Manager □ Accommodation Reviewed □ Health and safety assessments carried out on all buildings □ Move to Bushloe House to Brocks Hill complete □ Asset Management a theme as part of the Sustainability Programme □ Health and Safety Action Plan approved by full Council April 2023. . □Asset Review received end of November - Report to PFDC regarding disposal of assets in Sept 25. Further Asset work to be carried out re sale of garage blocks once transfer to General Fund from HRA complete.	3	3	9	□ Revision of Asset Management Policy and Capital Expenditure Plan □ Asset review □ Holistic Asset Management database/system purchased and timetabled for implementation. Roll out of the system has begun. □Completion of the sale of Bushloe House and Oadby Pool site. Marketing all of our assets for hire to generate additional income to support the sustainability plan	Ongoing	2	2	4	Monitoring Officer	Mar-26	**Further Management controls updated.**	
CR8	**Regulatory Governance**	Resourceful and Resilient	□ New or changes to legislation □ Resources (staff) □ Failure to identify new legislation	□ Substantial fines e.g. Data Protection □ Judicial review □ Reputation □ Code of conduct □ Financial loss □ Cost orders □ Personal liability	3	4	12	□ Data Protection Policy and log □ Freedom of Information log □ Code of Conduct and training □ HR Induction □ Statutory Monitoring Officer □ Subscriptions (e.g. legal journals and LGA) and CPD of legal officers □ Prosecution Policy r □Purchased GDPR/DPA learning modules to be rolled out in the future. □Appraisal training and 1-2-1 training has been rolled out. to all managers. □New Social Housing Regulation Act 2023 strengthens the regulation regime associated with the Council as a social landlord. A full inspection by the regulator can be expected by end of 2026 - Housing Manager is preparing for mock-inspection during 2024. □Building Safety Act 2022 places increased compliance responsibilities and scrutiny on Building Control and the construction industry generally and the Leiicestershire Building Control Partnership has put in place an action plan to manage this risk □ Reviewed and improved HR induction approach. All Key managers trained in undertaking investigations and Disciplinaries. Having Difficult Conversations rolled out to relevant managers. Building Contrrol Partnership has been audited and shows no major area of concern. New IT policies re usage and AI rolled out Dec 25	1	1	1	□ Refresher training on GDPR/DPA to be completed by all. Resources in Housing Team to be focused around meeting the requirements of the new act. Mandatory Bullying Harrassment and Dignity Respect training to be rolled out from June 2025 IT policies to be rolled out in Sept 25	□ Summer 2025	1	1	1	Monitoring Officer	Mar-26	Existing Control and further actions have been updated	

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CR9	**Failure to respond to a significant incident**	Resourceful and Resilient	□ Loss of staff □ Loss of ICT □ Loss of Building □ Loss of Key supplier □ Loss of facilities □ Loss of systems □ Act of God □ Adverse Weather □ Pandemic □ Adverse staff impact as a result of cost of living	□ Insurance – higher premiums □ Loss of essential services □ Adverse publicity □ Reputation damage □ Loss of public confidence □ Loss of income □ Financial damage □ Death and injury □ Litigation risks□ Insurance – higher premiums □ Loss of essential services □ Adverse publicity □ Loss of public confidence □ Financial damage □ Death and injury □ Litigation risks □ Staff unavailable after major incident □ large proportion of staff becoming ill	4	4	16	□ Insurance policies and annual review - new insurers from 1 Jan 2024 □ Risk Management policies and procedures □ Membership of Local Resilience Forum □ Standby rota □ IT backup, Business Continuity Plans in place □ Community Engagement with Health professionals □ Agile Working Policy □ Coordination of Out of Hours Service □ Additional training from Leicestershire Resilience Partnership underway (incl power lose scenario) □ Business Continuity training exercise and refresh undertaken December 2022 □ BC Plans refresh and incorpored into service plans □ SLT and CMT additional training scheduled with LRF Mighty Oak national power outage LRF Training exercise □Brockshill project has incorporated business continuity improvements inc generator if power outage. □New accident investigation form □Refresher of Health and Safety Training □Health and Safety face to face training for manual workers delivered. BCPs being reviewed; Implications from Martyn's Law have been considered. □New insurance processes being rolled out to operational staff Foremost Security to carry out any Out of Hours calls for our assets. Emergency Centre resilience training taking place June 25 Protect Training has now been carried out. SLT review of the flooding incident in January 2025, recording what went well and aareas for improvement. In September 2025 we will be part of the LLR wide Operation Pegasus. Cyber attack workshops held	2	3	6		Sep-25	2	3	6	Monitoring Officer	Mar-26	Existing controls uand further management actions are updated	
CR12	**Organisational/ Transformational Change**	Our Borough - the place to be. Resourceful and Resilient.	□ Restructure □ Transformational change □ Transferable skills □ Reduction in funding □ Change in personnel □ Change in the way the council delivers services □ Redundancy □ Less controls in place due to limited resources □ Change in office location Devolution/Local Government Reform	□ Redundancy □ Staff morale □ Staff retention □ Change in working practices □ Impact on quality of service □ Legal implications □ HR implications □ Reputation damage/perception □ Financial loss □ Possible litigation □ Increased fraud Increased workload	3	3	9	□ Organisation review policy □ Recruitment and selection policies and procedures □ Union and staff consultation □ Staff Wellbeing Group and Wellbeing Teams □ Staff Health and Wellbeing Action Plan □ Internal Audit □ Staff newsletters □ Monitoring and supervision of management/1:1's □ Training and professional qualification support □ Performance appraisal process □ Formal induction programme □ Comms plans for key projects - includes PR, Public, Staff and member and other stakeholder comms plans □ Staff engagement on organisational culture and values as part of People Strategy undertaken □ Introduction of live vacancy management plan with SLT □ People Strategy approved by PFD 12/09/2023 □ Organisation Strategy update completed. □Clean & Green / Corporate Assets Service Review and Revs and Bens review underway / Service changes post budget approval are well underway . Project Management approach has been refined; Joint SLT/CMT Meetings are being programmed into diaries focusing on finance and performance/ Sustainability Plan is a standing itrem on SLT agenda Health Wellbeing Action Plan agreed in Feb 2025 SLT structure reviewed due to retirement, new structure in place from June 2025 . Neighbourhood Services Review completed in Quarter 2.	3	2	6	□Organisation Strategy to be approved. □Service Reviews being undertaken. Sustainability Plan Review /ongoing Management plan developed and implemented for Waste Transformation. Opportunities being considered for joint working with other local authorities. ILM Courses to be provided for all managers across the organisation to put them in a good postion regarding LGR and future job opportunities. (These will commence in 2026).	January 2025 □ Ongoing	2	2	4	Strategic Director	Mar-26	Existing controls updated for progress against budget/service implications and revised PPM approach and senior managemet meetings. Waste trnsformationn project has been delivered within timesacle. Agreement reached for Blaby DC to pay for additional days of IT support. Resilience Planning Paper to be taken to SLT in Quarter 3 to agree priority areas and posts to support this work.	

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CR11	**Economy/ Regeneration**	Resourceful and Resilient	□ Further decline in the economy BREXIT COVID Ukraine/Russia conflict and also energy costs crisis (uncertainty of cost impact) □ Pooling/Unpooling of NNDR □ Cost of living Crisis Economic Regeneration Manager and Economic Development posts removed from establishment to enable savings to Council budget Conflict in the Middle East could give further inflation rises (june 25)	□ Relocation (Business and Domestic) □ Lack of inward investment □ Increased demand for certain services e.g. benefits □ Loss of value in public assets □ Need to continually adapt/change □ Conflicting pressures - decreased funding – increased demand □ Spiral effect □ Short term decision making – uncertainty □ Increased autonomy leads to greater risk □ Decrease in collection levels	5	4	20	□ Demand management of services that come under pressure as a result of decline in economy □ Debt Recovery Policy in place □ Local Council Tax and Business Rate Retention scheme in place □ Contract monitoring of bailiffs □ Paying out business grants to support local businesses during pandemic □ Regular programme of business webinars to provide information and support to businesses □ Monthly newsletter issued to businesses □ Helping Hands - energy champion □ Business microsite live and accessible via Council's website. □ UKSPF Investment Plan 2022 to 2025 implemented □ Levelling Up bid developed in partnership with The University of Leicester and ready to submit if an opportunity arises. Currently supporting University in investigating a Heritage Lottery Fund bid □ Capital Projects Sub-committee established '□ Cost of Living report to members sets our proposal to review discretionary rates relief which may provide additional relief to businesses. □Business Networking Event held 14/09/2023 - 80 businesses attended and a programme in place to deliver more on a recurring basis. □Business Improvement District - Phase feasibility completed and to be progressed during 2024 - businesses voted not to implement Horsewell Lane Business Case agreed by Members - approach made to Homes England for potential funding. Awaiting details of new Government funding available. Discussions with members held regarding developing a 25/26 programme for the UKSPF funding. UKSPF programme has been singed off and is progressing well. In order to mitigate the risk of there being no single manager for the UKSPF programme and to provide advice to businesses inthe Borough funding has been identified to recruit an Economic Development Manager as a 2 year fixed term post on a zero hours contract from June 20205. Qtr 3 and 4 monitoring submitted on time. A Business Advisor has been recruited from October 2025 to 31st March 2026	4	4	16	Monitor progress against ER Strategy & UKSPF Programme. Project review meetings undertaken with all UKSPF funded projects to ensure outcomes and expenditure will be achieved by 31/03/26.	Ongoing	2	3	6	Head of Built Environment	Mar-26	Consideration needs to be given as part of the 26/27 budget setting process relating to UKSPF funded projects after 31/3/26 as there is currently no indication that this funding stream will continue beyond that date.	↓
CR12	**Increased Fraud**	Resourceful and Resilient	□ Dilution of internal controls due to less staff □ Increase in unemployment □ Reduction in benefits □ Inflation □ Debt □ Opportunity □ Sub-letting of Council properties	□ Homelessness, poverty and social deprivation □ Financial loss □ Resources of the authority to investigate fraud issues □ Reputation impact □ Litigation	3	3	9	□ Internal and External Audit □ Financial Regulations □ Segregation of Duties □ Supervision and Management □ Investigation and disciplinary procedures □ Litigation □ Anti Fraud and Corruption Policy □ Whistle blowing process □ Tone from the top - no tolerance □ Budgetary Control □ Participation in National Fraud Initiative □ Transaction review (e.g. invoices/mileage) □ All related Policies to be reviewed and an annual rolling training programme to be implemented. □Anti Fraud Policy reviewed and approved PFD July 2023 □ Fraud Awareness Training rolled out.	2	3	6	□ Update of anti-fraud acttivities to Audit Committee	Jan-26	2	2	4	Chief Financial Officer	Mar-26		↔

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CR13	**Cyber Threat/Security, Cyber security is seen as an ICT risk and not a corporate risk that needs to be managed and monitored by senior management.**	Resourceful and Resilient	Cyber threats are increasing on a worldwide basis, with criminals known to target public sector organisations in an attempt to obtain personal data on a significant scale. The Council is thus at high risk of being attacked.	□ Financial loss □ Resources of the authority to investigate fraud issues □ Reputation impact □ Litigation, Loss of data, breaches of GDPR, SMT lack of oversight	4	5	20	□ Cyber security is always the highest priority, and at all times. This is considered with any support ticket, change request or new digital implementation and must be approved through change . oThe IT Team is reviewing its security policies to ensure they are in line with the latest cyber security guidance and ensuring the organisation operates in a safe yet effective way. This includes managing the IT infrastructure, but also with how staff function, use equipment and undertake regular security training within their respective roles. oThe Council has now implemented a duplicate firewall, for added security and resilience to the Councils network. This further protects us, but also gives us dual connectivity so we are not restricted by a single point of failure in a key security component. oThe Council has a BCP but this will continuously be checked and updated to ensure we are as prepared as possible for emergency situations (if it were to arise). oMember briefing completed to advise of current security features and their responsibility as stakeholders to the authority. oAll Staff have undertaken their yearly security training (Q1 2024). oPSN compliance has been achieved and certification received in Q1 of 2024. The Council is currently submitting information for its 'Cyber essentials' certification as well – both giving assurance the organisation is as secure as reasonably possible. Member training delivered in September 24 with a mop up session planned for January 2025 and further sessions as needed Cyber Essentials of Excellence Assessment - shows high levels of protection. Commencement of 2 factor authentication from June 2025 Roll out of refreshed IT Policies Sept 25	2	3	6	Cyber security attack Work scenerio workshop training taking place 30th Sept Roll out of Multi Factor Authentication across the Councilcontuinues - staff complete end Sept - Members rollout Oct Updated acceptable use policy rolled out to Staff & Members in September	Ongoing	2	3	6	Head of Customer Service and Transformation	Mar-26		
CR14	**19. Staff lone working including out of hours**	Our Borough - the place to be. Resourceful and Resilient.	Increased risk of staff harm from violence & aggression from service users.	Staff could suffer physical and emotional harm, which could lead to long periods of sick leave.	4	5	20	□ Council has Lone Worker Policy & Procedure □ Equipment is available such as panic alarms & body cameras □ Records are maintained of challenging residents which are reviewed prior to visits taking place □ Relationship with local Police, who will attend visits where there is a potential for aggression & violence □ Training session undertaken for lone working staff on (pick Protect) system □Contract ended for Solo Protect and moved to Pick Protect. □Risk Assessment for appointment hubs included consideration of lone working and guidance provided. Head of SC&T and H&S officer reviewed the Customer Alert System including the monitoring of lone working procedures.	2	3	6	Moving to Foremost Security from 1/4/25 to mitigate risk to staff on call outs as this function will be carried out by the security company. Significant assurance on the 24/25 audit and continuous monitoring of lone working.	Jun-25	2	3	6	Monitoring Officer	Mar-26		

Risk Register - risk level and scoring

IMPACT		
Level	Score	Description
Insignificant	1	• no impact on service • no impact on reputation • complaint unlikely • litigation risk remote
Minor	2	• slight impact on service • slight impact on reputation • complaint possible • litigation possible
Moderate	3	• some service disruption • potential for adverse publicity - avoidable with careful handling • complaint probable • litigation probable
Major	4	• service disrupted • adverse publicity not avoidable (local media) • complaint probable • litigation probable
Extreme / Catastrophic	5	• service interrupted for significant time • major adverse publicity not avoidable (national media) • major litigation expected • resignation of senior management and board • loss of beneficiary confidence

LIKELIHOOD		
Level	Score	Description
Remote	1	• may only occur in exceptional circumstances
Unlikely	2	• expected to occur in a few circumstances
Possible	3	• expected to occur in some circumstances
Probable	4	• expected to occur in many circumstances
Highly probable	5	• expected to occur frequently and in most circumstances

Likelihood \ Impact	1	2	3	4	5
5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5

Risks that are red require mitigating action to reduce to amber or white