Risk 1: Delivery of the Adult Social Care (ASC) Transformation Programme

Risk Owner: Executive Director of People (Adults)

Description:	Current Controls:
If the adult social care transformation programme does not deliver changes in a timely and effective way there will be a negative impact on quality of service with residents directly affected, savings will not be achieved and a balanced budget will not be delivered.	 Adult social care business case and implementation plans Adult social care transformation board – reporting into recovery and renewal board Tracking of actions and savings Support and challenge from People Too consultant partners
Consequence:	 Better Care Fund (BCF) additional contribution to ASC confirmed. Additional income of £0.75m for 21/22 and
Increasing number of people waiting for assessment, service or review. Increasing number of safeguarding cases. Provider	£0.46m for 22/23
failures and reduced quality. Demand increasing. Use of agency increasing.	Actions Required:
Budget not balanced, savings not delivered, cost and price increasing.	 Manage increased income from client contributions – by end of March 22 by Marc Gadsby Based on the Financial Assessment and Charging
	Workstream, live from July:
Health funding to support the changes may be withdrawn	New Client invoices raised to the value of £275,000
	Backdated invoices raised the value of £775,000 Debt collected to the value of £382,000
	Our target linked to this workstream is £300k for this year.
	Deliver the workstream actions in the adult social care transformation programme by end of March 23 by Marc
	Gadsby and Jane Senior - Good progress being made – monthly reporting of progress to ASC transformation programme board, monthly project report to Exec Board

and weekly financial tracking progress to lead members and directors.

	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	5	4
Impact	3	3	2
Score	18	15	8

Risk 2: Covid Pandemic Risk Owner: Executive Board

Description:	Current Controls:
Further waves of covid infections overwhelm our ability and /or our partners ability to provide services to required standards and staff continue to work under this pressure.	 Slough Local Outbreak Management Plan Weekly covid silver 3 x weekly outbreak meeting 1 x weekly partner outbreak meeting
Consequence:	 Local contact tracing in place Use of covid grants
Increased demand on health and care systems. resulting in system pressures that impact ability to transform services or provide value for money and service quality.	 Continue efforts to increase vaccination rates Revision of local covid plan Revised contact tracing plan Staff wellbeing
Increase in death rate and long term conditions arise which increasing demand on council services	Actions Required:
Significant impact on workforce availability due to illness	Agreement on priority use of covid grants -Silver command
Schools and local businesses impacted – closures	Priority areas for spend confirmed in revised Local Outbreak Management Plan – regular monitoring of covid grants and expenditure ongoing.
Stretched council resources to manage the work	 Return to workplace hybrid working policy
Staff wellbeing and health deteriorates	
Additional unforeseen costs arise due to continuing impact of pandemic.	

	Inherent Risk	Residual Risk	Target Risk
Likelihood	5	4	3
Impact	4	4	3

Score	20	16	9

Risk 3: Temporary Accommodation Risk Owner: Executive Director of Place and Community

Description:	Current Controls:
If we fail to manage the increasing demand for temporary accommodation it will cost us financially and damage our reputation. There are financial and reputational risks arising from the increasing demand for temporary accommodation. We have increasing numbers of UK nationals presenting as homeless now that evictions are being allowed. We have pressure to receive asylum seekers – currently 300 asylum seekers are in the borough awaiting immigration status and further to this the UK has specific commitments to Hong Kong and to Afghanistan and has "bridge head" infrastructure in place in Slough as a result of our existing cohort of asylum seekers	 Housing Needs officers are being supported in taking an appropriate approach when assessing eligibility for temporary accommodation (number of units) Temporary Accommodation officers are being supported in negotiating better rates (cost/unit) with landlords and other housing providers Actions Required: Ensure our approach seeks out and replicates best practice. Additional landlords to be found to increase supply and force down cost/unit

	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	4	3
Impact	3	3	2
Score	18	12	6

Date last updated: 12th November 2021

Risk 4: Disposal of Assets

Risk Owner: Executive Director Place and Community and Director of Finance

Description:	Current Controls:
 If we don't dispose of sufficient assets to realise capital receipts we will be unable to: ➤ finance the anticipated capitalisation direction and ➤ to allow the Council's external borrowings and debt charges to be reduced 	Appointment of external support to advise and manage the programme of asset disposals as approved by the Cabinet report on 20 September 2021. Cabinet report 20 September 2021 sought permission to (1) progress with an orderly asset disposal programme (2) use
Consequence:	receipts generated from these disposals to minimise new external borrowing and where possible repay existing short-
Without a programme of asset disposals to finance reduction of external debt, the Council's external borrowing per head of population will remain one of the highest in the UK and debt	term loans (3) obtain external support in terms of capacity and expertise to manage the programme of asset disposals.
charges will increase to a significant proportion of the net revenue budget.	Final stages of procurement process is underway including the two week cooling off period and signing of the contract, with work due to start in March.
Without significant asset disposals the Councils long term financial position is not sustainable and will compromise the Council's ability to:	Alongside this work there has been progress in locating the deeds for all assets to ensure they are up to date and will be required for any assets to be disposed of.
 set a balanced budget and provide existing levels of services in the future. 	The supplier is confident that the asset disposal programme of work can achieve the anticipated capital receipts in line with the report that went to Cabinet in September.
	Actions Required:
	(1) Formal appointment of successful bidder

(2) A strategic overview of the council's asset portfolio to identify assets suitable for disposal, whilst maintaining the
council's ability to deliver services. Recommend packaging of assets into disposal lots so the council can obtain best
consideration

	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	3	3
Impact	4	4	4
Score	24	12	12

Description:	Current Controls:
In March 2021 the Council requested Exceptional Financial Support from the Department for Levelling Up, Housing & Communities (DLUHC) in respect of the financial year 2021/22 to help it balance its budget. DLUHC agreed in-principle to provide support and commissioned CIPFA to undertake an independent and detailed financial assurance review of Slough Borough Council (the Council). Since the original capitalisation request for 2021/22 of up to £15.2m, the Council has identified further very substantial liabilities for previous years, which the Council is unable to meet from its reserves. These past liabilities also impact substantially on the financial position for the Council in the current financial year and beyond	meeting on the 10 th March. These will include: Revenue budget Capital programme Treasury management S25 DSG Council Tax Support These reports are in the final stages of preparation and will include a wide range of proposals that will set a new start for the Council moving forward which will be considered by
The S151 officer issued a statutory S114 notice in July 2021,	
outlining then estimated total potential liabilities across the Council of some £174m up to 2024/25, which had not been	
accounted for hitherto. As recognised by CIPFA in its <u>report</u> in October 2021, there was a high likelihood that this figure could	The Council needs to balance its immediate budgets for:
grow, and this has proven to be the case. The latest forecast is	
that the Council will need an unprecedented level of support of a capitalisation direction of a base case of circa £223m to 31 March	2022/23 – when agreed by Council
2022, with a further \pounds 84m for 2022/23 in order to sustain it for this	
period and allow it to set a balanced budget for 2022/23. Initial forward planning indicates that a further £172m will be needed for	
the period to 2028/29. These figures assume that the Council can	The immediate actions include:

deliver circa £20m per annum of recurrent incrementa savings. This will be addressed by Cabinet on the 9 th March The Council's financial position has been the subject of regula briefings to members and DLUHC throughout 2021/22. Th seriousness of the financial situation and how the Council foun itself in this position remain of significant concern. This has bee acknowledged and a financial recovery plan agreed. Whilst th current request of Government is unprecedented it has to b noted that the accounts and audits of the 2018/19 (including eigh prior period adjustments), 2019/20, 2020/21 and 2021/2 accounts are yet to be completed, further prior period issues hav since been unearthed and it is very likely that more may b uncovered during the continuing closure of the accounts proces Consequence: In the medium to longer-term the Council cannot become financially self-sustaining council without considerabl Government support. The availability of significant future suppo is a key assumption underpinning the 2022/23 budget and will b for several future years	 Ensure 22/23 budget savings can be delivered Work up options for 23/24 savings Training: Programme of officer training has commenced Development of member training programme and support on financial matters
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	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	4	1
Impact	6	5	4
Score	24	20	4

Description:	Current Controls:
The accounts and audits of the 2018/19 (including eight prior period adjustments), 2019/20, 2020/21 and 2021/22 accounts are yet to be completed, further prior period issues have since been unearthed and it is very likely that more may be uncovered during the continuing closure of the accounts process	The Council is operating a structured and well tested method for preparing its accounts using a whole team approach involving as many of the existing finance team as possible in order to upskill permanent members of staff and to spread the workload. This reflects that a number of key finance staff are likely to be heavily involved in other tasks such as the
As has been reported to Council recent work on the 2018/19 accounts has identified that all the core statements, group	expenditure control panels
accounting statements and 60% of the notes will need to be restated and work is ongoing on undertaking this. This will then form a solid base to take forward work on the 2019/20 and 2020/21 accounts	The standard approach is that individual officers have been assigned a disclosure note to prepare (the preparer) and that each disclosure note will be subject to first line QA review by a reviewer. Given that some staff assigned a review role may be unfamiliar with undertaking QA review, then all work be
In more detail the three issues with the 2018/19 accounts identified at the Audit and Governance Committee in May 2021 ie that:	subject to second line QA review. This will ensure that both the quality is maintained and the first line reviewer and the preparer understand the standard that the Council is aiming for
 the appeals provision was understated because a business rates appeal had not been provided for; 	For the 2019/20 and 2020/21 accounts standard closing
• long-term debtors were overstated because a loan to Slough Children's Trust had not been impaired for non-payment;	folders for both years have been set up with folders for each core statement and disclosure note
 agreeing a way forward regarding the understatement of minimum revenue provision (MRP) for the period 2016/17 to date. 	All working papers are being filed on these folders so that there is a clear trail back from the accounts to centrally filed working papers rather than information filed on personal folders which seems to have been the experience in the past

 have been followed up and competed and will result in: the appeals provision being increased by £4.5m in 2018/19; the loan to Slough Children's Trust being impaired by £2.4m; 	For each core statement and disclosure note standard template workbooks are being used to collate information and produce the relevant disclosure. The purpose of using the standard template workbooks is to ensure there is a clear audit trail between the information reported in the accounts back to source documentation, and to provide clear evidence of quality assurance in the accounts preparation process
• a prior period adjustment of £27m in respect of understated MRP has been calculated for the period to 31/3/2018 and a further understatement of £6m in 2018/19. i.e. MRP was understated by £33m to 31/3/2019. The cumulative understatement of MRP to 31/3/22 is £69m.	Each accounts workbook is structured with the following: a) summary sheet to collate and summarise the work done and containing hyperlinks to supporting information b) QA checklist – a standard checklist to evidence the QA, each checklist is tailored to the individual disclosure note c) review sheet for the reviewer to document their review and the preparer to use to
In addition to these previously identified issues, work on the accounts has recently identified the following further matters:	respond to queries raised through the review process d) disclosure checklist – an extract from the CIPFA Accounts Disclosure checklist to ensure that the disclosure meets Code
• £13m of s.106 contributions recognised as capital grants unapplied in 2016/17 will need to be restated as a long-term creditor, because the conditions associated with the agreements had not been met, therefore the contributions had been incorrectly recognised as income;	requirements e) analytical review to compare the current year with the previous one and seek explanations for variances over £1m; f) Grant Thornton (GT) expected paper checklist – an extract from GT's expected working paper list relevant to the disclosure or core statement linked to the information requested; g) disclosure note; h) supporting working papers –
• a lease for a plot of land to be used for an Extra Care Home development had been incorrectly accounted for as follows:	which may be in the same workbook or hyperlinked files For 2018/19, the standard working paper filing system will be
a) lease rental payments of £2m had incorrectly been capitalised even though ownership of the land did not transfer to the Council. Consequently the payments should have been charged to revenue and a prepayment recognised in 2019/20;	used and populated with the existing working papers. Discussions with external audit highlighted that although GT had provided an expected working paper checklist for the 2018/19 audit, the Council's finance team did not complete this. Consequently, most of the working papers used to support the final accounts for 2018/19 had to be requested

b) as a result of the cancellation of the capital project in 2021, £0.6m of development costs currently charged to assets under construction will have to be written off to revenue and	individually by GT and were supplied to them via GT's audit software – Inflo
have been added to the capitalisation direction;	A review of the 2018/19 working papers on the Council's X:
c) also as a result of the cancellation of the project, a £4.5m provision has to be recognised for an onerous contract in respect of the remaining 40 year term of the contract.	drive does not readily show a suite of working papers pulled together for GT. A copy of the working papers provided to GT has been requested from them so that the Council has a record and can see what was provided, and from what source
• a number of cases where accruals have not been raised including:	For all three years main accounts, the Council will be moving away from the Big Red Button approach which the Council had been using in previous years. Instead, the Council will use
a) £2.2m of capital expenditure relating to 2019/20 but paid in 2020/21; and	a model with in-built validation checks which has been used before. The format will be A4 landscape and thus easier to view on-screen which is the way most users of the accounts
b) £1m of DSG-related expenditure paid in 2021/22 but relating to 2020/21.	view the annual statement of accounts
• 132 assets misclassified as investment properties but which are operational assets. Correcting the misclassification will alter the asset values which is currently being worked through.	Clearly this will mean restating the draft 2018/19 Statement of Accounts into the new format, but the 2018/19 accounts will be subject to triage to provide assurance for the s.151 officer. Restating the accounts will form part of that triage and enable us to draw out underlying issues
• officers have reconciled the asset register to the housing management system for council dwellings for the years 2018/19 to 2020/21. This has identified minor discrepancies between the two systems and work is ongoing to identify the causes and rectify these. This does not have a material impact on the accounts.	
• an exercise has been undertaken to review all provisions and contingent liability disclosures for completeness.	

This has identified a number of provisions which had not been identified:	Actions Required:
a) £2.6m provision for refunds to tenants arising for the Thames Water v Southwark case;	The immediate actions are to prepare and have audited accounts from 2018/19 to 2020/21 and then 2021/22
b) Bad debt provisions had not been reviewed for some time and were materially understated. Work is ongoing, but the initial	To feed the outcome of these accounts into the Council's forward financial planning
indication is that bad debt provisions in respect of General Fund items have been understated by £11m.	To design a structure for the permanent Slough finance team
• four loan repayment instalments for a loan to a school had not been collected totalling £28,000 in the two years since the loan was advanced. Processes are being established to ensure collection is made automatically and that this does not recur.	
• a review of the arrangements with SUR LLP indicates that loan notes in respect of land optioned to SUR for the Old Library Residential site will have to be impaired by £0.4m, because the scheme is unlikely to make a profit. Currently the senior debt loan of £9.7m is not thought to be at risk of impairment.	
As part of embedding improvements in the Council's accounting processes:	
• a detailed programme of technical training for Finance staff was completed in November to bring staff up to date with technical developments and the new working paper templates for final accounts.	
• regular two weekly meetings are being held with Grant Thornton to discuss technical accounting issues as they arise	

and agree a way forward as part of the closedown process. This should reduce delays once the audit of the accounts commences.	
commences.	
Consequence:	
The Council has no properly prepared or audited financial base line since 1 April 2018 and thus has challenges preparing its budgets and financial planning going forward	
It has also not fulfilled its requirements to properly account for its stewardship of public monies	
It will face increased external audit fees and is having to have its staff spend a great deal of time "looking backwards" rather than planning forwards	

	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	2	1
Impact	6	5	4
Score	24	10	4

Risk 5c: Financial processes Risk Owner: Director of Finance

Description:	Current Controls:
Many of the Councils financial processes are not fit for purpose. These include by way of example:	Specialist resources have been brought in to understand the nature and scale of the problems and to address them
financial systems – the Agresso system is not fully used or documented	Finance action plan reported to full Council for each meeting (with the exception of March when the budget papers will be tabled)
 financial capacity and skills – the number and skills of permanent staff in the team have in some cases considerable room for improvement 	Finance and Commercial service business plan has been developed to ensure future sustainability of the service.
financial processes – basic processes such as reconciliations are not documented or upto date	Actions Required:
insurance and other provisions were inadequate	The finance action plan which is reported to Council as noted above sets out in detail the current position at each meeting on these issues and the actions being taken
Consequence:	
Breach of statutory duties	
Section 114 notice	
No recent accounts	
Challenges setting budgets	

	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	3	1
Impact	6	5	4
Score	24	15	4

Risk 6: The Council does not take adequate mitigation to reduce the risk of injury or death from incidents within the Council

Risk Owner: Director of Finance

Description:	Current Controls:
If the Council does not meet its wide range of Health & Safety requirements then there could be a risk to the safety of staff and	Health & Safety (H&S) professionals and advisers in post A backth and acfety management system (policy and
 citizens Key potential causes are: ➤ Lack of understanding of roles and responsibilities 	A health and safety management system (policy and codes of practice) in place. These are regularly reviewed and updated and clearly communicated and placed on SBC insite
Insufficient staff numbers to carry out work plans in a safe way.	 Corporate health & safety strategy (2018-2021) in place with directorate plans dovetailing
 Budget pressures resulting in inability to provide correct equipment 	Accident reporting system and procedure in place and communicated. Investigations occur and are reported.
 Lack of appropriate training. Lack of oversight and control by local management. 	Health & safety training programs in place, available face to face and on line. Mandatory training identified
Lack of information on the potential or known risks i.e. through lack of reporting	 and in place. ➤ Lone worker In-check and personal safety devices in
Lack of learning from previous lessons	place
Inadequate contract management arrangements. H&S legislation states you are still liable even if contractors undertake work.	Monitoring of health & safety indicators at Health & Safety Committees (bimonthly) and Health & Safety Board (quarterly).
 Lack of effective processes and systems consistently being applied. 	Trade Union consultation with health and safety trained representatives present
Health and Safety Policies are not kept up to date.	Compliance monitoring 'Building Compliance Group'
Lack of accountability and governance arrangements	(monthly)
	Audit program
The risk of injury or death is from high-risk activities:	
Ione working and violence	Actions Required:
use of machinery	

inadaguately managed buildings	Online agaident reporting for accurate manitoring and
 inadequately managed buildings inadequate contract management 	Online accident reporting for accurate monitoring and tracking. Business case will be submitted in April 2022.
	 Monitoring of actions from risk assessments, accidents
Consequence:	and audits to ensure lessons are learnt and actions are
	implemented through an online system. Business case
Death/injury to individuals and/or non-compliance with relevant	will be submitted In April 2022.
legislation resulting in prosecution and civil claims.	 Health & safety team auditing high risk areas of the council: asset management, environmental services, strategy and infrastructure and lone workers. Lower risk areas to self audit post Transformation Executive Board approved new audit format in November 21 following report from Health & Safety Board. Self-audits to be completed after Corporate Consultative Forum meeting on March 7th 2022 Gap analysis of training needs, provision and uptake. Work commenced with Workforce Development in identifying risk assessment and accident investigation training. All managers and staff encouraged to complete mandatory H&S on line training via communications issued to all staff and managers. All managers have been provided with instructions on how to determine the compliance status of staff. New corporate strategy to be developed for 2022 onwards and directorate plans to be developed H & S Board has requested a new strategy and this will be
	presented to Corporate Leadership Team (CLT) in March 2022

	Inherent Risk	Residual Risk	Target Risk
Likelihood	5	3	3
Impact	4	4	2

Score	20	12	6

Risk 7: Elections and Electoral Registration Risk Owner: Monitoring Officer

Description:	Current Controls:
	Project plan including detailed risk register
Failure to deliver elections and maintain the electoral register	Documented internal procedures
leads to a challenge of an electoral outcome:	 Monitoring by Electoral Commission through appropriate performance standards & surveying Adequate insurance (Returning officer - personal
Insufficient resources provided to Electoral Registration	liability)
officer (ERO) to deliver a comprehensive canvass & the	 IT reserve high level on-call
Returning Officer to deliver the elections.	Adequate insurance cover is in place for the RO, with a
 Failure of IT systems to maintain the electoral management system 	nil excess
 Failure to follow legislative and regulatory requirements. 	Actions Required:
	Adequate staffing to ensure canvass is completed in
Consequence:	the Autumn. (Electoral staff & canvassers).
	Follow the guidance and steps provided by the
Disenfranchisement of local residents.	Electoral Commission to maintain the register.
Potential to challenge any election which relies on an incomplete or inaccurate register.	Provide reporting & statistics on the management of the register for accuracy and completeness.
 Failure of local authority in its duty to provide sufficient 	 Ensure plans are in place early to manage the delivery
resources & funding to the Returning officer/Electoral	of any election and adequate resourcing.
Registration officer.	 Core staff put in place to deliver the elections.
 Loss of polling places & count venue 	 Staffing the election - resources need to be put in place
 Reputational damage. 	early to ensure staffing for all aspects of the election.
 All matters pertaining to elections are the personal 	 Polling places booked early.
responsibility of the RO and any failings would give rise to personal liability	

	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	3	2

	Impact	4	4	3
	Score	16	12	6
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Risk 8: Recovery and Renewal Plan Risk Owner: Executive Board

Description:	Current Controls:
The Council has a wide range of recovery and renewal actions to undertake arising from the various reports it has recently received	The Corporate Leadership Team is preparing the response to these requirements using a template designed to assist with this
A major focus at the moment across the Council is the completion of functional assessments by all services identifying gaps in capacity and capability to inform the construction of then costed plan action plans	The returns are then being shared between colleagues and held corporately in order to allow a comprehensive corporate plan to be drawn up
	Actions Required:
The requirements is to in the first three months prepare and agree an Improvement Plan to the satisfaction of the Commissioners (which may include or draw upon improvement or action plans prepared before the date of these Directions), with resource allocated accordingly and, as a minimum, the following components:	Complete review of all functions Costed improvement plans to follow Prioritisation of ongoing services and service levels Sale of assets Downsizing of the Council Investment in services that allow the Council to function safely
An outline action plan to achieve deliver financial sustainability and to close the long-term budget gap identified by the Authority across the period of its medium term financial strategy (MTFS)	Reprioritised digital and ICT improvement programme Data and Insight to support service delivery and decision making
An action plan to achieve improvements in relation to the proper functioning of democratic services, to include rapid training for council officers, a revised term of reference for the Audit and Corporate Governance Committee, and the agreement of an Annual Governance Statement for 2020-21	

An action plan to achieve improvements in relation to the proper functioning of the scrutiny function, to include a review of the Council strategic risk register to make it fit for purpose

An action plan to achieve improvements in relation to the proper functioning of internal audit, which addresses outstanding management actions and includes the commissioning of an independent review of the internal audit contract and a fully costed plan for establishing an internal audit function that reflects best practice

An action plan to achieve improvements in relation to the proper functioning of the procurement and contract management function, which includes an independent review

An action plan to achieve improvements in relation to the proper functioning of the Authority's IT

A suitable officer structure and scheme of delegation for the Authority which provides sufficient resources to deliver the Authority's functions in an effective way, including the Improvement Plan and its monitoring and reporting, prioritising permanent recruitment and/or longer- term contract status of interim positions

Other maters are related to the overall recovery and renewal plan and reported elsewhere – such as asset sales, budget and accounts preparation etc

Consequence:
Preparing these plans will set the Council on its way to recovery from its current position

	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	5	3
Impact	4	3	2
Score	24	15	6

Risk 9: Business Continuity and Emergency Planning Risk Owner: Director of Finance

Description:

The Council has a framework that can be utilised by the emergency planning team to respond to both a major incident and business continuity interruption. The risk identified here is if there was no Emergency Planning team in place to respond then the Council will lose its resilience to respond to the emergency. However, it should also have to support this a Business continuity plan and a Major Incident Plan for people to utilise to follow in an emergency should the EP team not be available.

Consequence:

Failure to have an Emergency Planning Team will place the Council at risk of being unable to continue its business should a serious event cause disruption or an emergency occurs.

Current Controls:

- Emergency planning and business continuity lead in place on an acting up arrangement
- There are managers who are aware of the emergency planning and business continuity process. See details below regarding a refresh.
- Assistance support is provided to officers that are leading Business Continuity in their service areas in how to complete the necessary documentation ie Business Impact Assessments.
- Have sufficient officers (Local Authority Liaison Officer (LALO) and Rest Centre Managers (RCM)) who can be utilised in an emergency for now.
- The role of Major Incident Managers has been moved to the Emergency Planning Team and the Associate Directors will now be Council Operations Silver and Emergency Operation Centre (EOC) Managers when required.

Actions Required:

- To implement a plan to review business continuity management in response to the organisation restructure and the availability of the IT disaster Recovery will assist and support this process. -
- Training will commence following the completion of all plans (Major Incident Plan and Business Continuity

	 Plan). Training is ready to launch and will be online and face to face for managers. We require the slight increase to LALOs, RCMs and a crucial need for Response Support Staff for the Emergency Rest Centres and the EOC. Appoint to the backfill for the Emergency Planning Officer
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	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	5	3
Impact	4	4	2
Score	24	20	6

Risk 10: Service delivery risk due to workforce recruitment and retention issues

Risk Owner: Director of Finance

	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	4	2
Impact	4	4	3
Score	16	16	6

Risk 11: Special Educational Needs and Disability (SEND) Local Area Inspection Risk Owner: Executive Director People (Children)

Description:		Current Controls:		
Se of F Th sel F Th Ac ad sul by F Th im like Sta de Consequ Fa Fa Vu	a SEND Local Area Inspection took place in eptember 2021. The report highlighted significant areas weakness. be local area includes the local authority SEND rvices, Children's Social Care and Health partners. be area is required to produce a Written Statement of ction (WSOA), which needs to highlight how we will dress the areas of concern. This will need to be bmitted to the Department for Education and approved Ofsted and CQC. be is an approximate timeline of 18 months for provements to be demonstrated in which Ofsted are ely to be back for inspection again. aff turnover and absence is impacting significantly on divery of SEND services be putational risk illure to carry out statutory duties an approximate time full support they are titled.	 Self-Evaluation Form needs updating in light of inspection findings Rapid Action Plan created by the LA will be replaced by the WSOA developed with all relevant partners Strategic oversight strengthened - Strategic board now meets every 6 weeks Actions Required: Review of current SEND staffing resources and plans to improve functioning of the team Implement, with all relevant partners, the WSOA when completed Implement Dedicated Schools Grant (DSG) recovery plan in partnership with the Department for Education (DfE) WSOA is in draft and will be submitted to Ofsted/CQC on 18th February 2022 Cabinet report on WSOA is being present on 21st February 2022 Interim staff required to cover absence and vacancies 		

	Inherent Risk	Residual Risk	Target Risk
Likelihood	6	5	2

Impact	4	3	2
Score	24	15	4

Risk 12: Cyber Security Risk Owner: Director of Finance

Description:	Current Controls:
Failure to adequately protect our information and technology assets against an attack specifically and deliberately (targeted), collectively as part of a wider attack or inadvertently by an internal actor breaching policy and procedures.	 Procured membership of SEGWARP and other government alert agencies This provides regional alerting on vulnerabilities that SBC needs to be aware of / intelligence sharing / threats / policy development SBC have also registered with the Cyber Resilience
Consequence:	Service for the south east to enable a regional approach to cyber alerting.
Worst case: Temporary or permanent loss of access to some or	
all of SBC data and / or IT systems.	 Ensure security patching is up to date and continues regularly.
<i>Likely case</i> : (some of) loss of reputation in handling personal data, removal of access to PSN and DWP direct data connections, removal or penalties for bank payment handling	An interim resource has been engaged to check and apply security patching.
and processing. Short term loss of access to data or systems.	 Periodic and regular 3rd party penetration testing. SBC procure the services of multiple security vendors
<i>Best case</i> : Isolated incident with minimal or no data loss and no loss of access to IT systems.	to perform at least annual security testing and health check scans to ensure any exposed system is identified and rectified. The test for 2021 is approaching and is currently being commissioned and the scope for the test is being set.
	 Cyber Security support from market leading 3rd party. Softcat are contracted to provide additional cyber security support. This covers the following Quarterly Security Controls Assessment Breach Assessment annually

 Security Improvement Programme Leadership
Organisation and Execution of cyber essentials audit action plan. Actions to complete before the end of 2021
 Communications to staff has been increased through councils Newsround and subject specific emails in particular awareness on cyber security issues, including phishing emails, scam calls & data protection responsibilities.
 Documented and detailed security procedures have now been put in place for patching, testing and incident handling & testing of these is in progress
 DLUCH Funding obtained following application and workshops - £200k
Actions Required:
 Fund a continuous improvement programme for IT security hardware and software Remedial / Modernisation programme targeted security improvements under emergency funding and agreed with further proposal being prepared for March Cabinet Compliance - fortnightly monitoring audit actions

	Inherent Risk	Residual Risk	Target Risk
Likelihood	5	4	3
Impact	3	3	3
Score	15	12	9

Risk 13: Information Governance and General Data Protection Regulations (GDPR) Risk Owner: Director of Finance

Description:	Current Controls:
Failure to resource our ability to respond to GDPR legislation can incur significant fines and reputational damage.	There is an interim Data Protection Officer (DPO) assigned. The Act DPA2018 / GDPR only states that as a public authority SBC would need a named and nominated person to
GDPR came into force in May 2018. There needs to be a corporate and local response to the implementation of GDPR	act as DPO. SBC has that person (IT business development manager)
The team that manages information governance lacks sufficient resource.	The interim group manager for IT is also experienced in GDPR and has fulfilled the role of Data Protection Officer previously in other organisations.
GDPR has meant that workers who understand GDPR and how to mitigate the effects are becoming more valuable to all sectors, making it harder to fill posts with responsibility for GDPR	GDPR training for new starters to minimise breaches of GDPR External review of compliance by Internal Audit Initial data mapping completed by SBC supported by RSM
Consequence:	The council has updated its information governance policy in November 21 and this has been signed off by the IG board, the updated policy supports the process by which an
If there is not an adequate response to GDPR there is a chance that there may fines, criticism from the information Commissioner	organisation obtains and provides assurance that it is complying with its legal, policy and moral responsibilities in relation to the processing of information. Alongside this an IG Improvement plan has been developed and will be monitored
Damage to corporate reputation	through the Information governance board moving forward.
Civil claims for damages	Actions Required:

		and establish a programm implement required contro Ensure appropriate fundin DPO to be recruited thoug function and not a role. Th another function within SB IT restructure providing the available. The function of by the IT business develop	g is provided to enable a permanent h it should be noted the DPO is a e DPO would typically also have C. This role will be addressed in the e funding for the post is made DPO is still held on an interim basis
	Inherent Risk	Residual Risk	Target Risk
Likelihood	4	3	1
Impact	3	3	3
Score	12	9	3

Risk 14: Council Companies Risk Owner: Director of Finance

Description: Current Controls: If we fail to review the relevance and rationale for each of the Establishment of corporate oversight board for Slough \geq Council's Companies, we open the Council up to potential Urban Renewal which may be expanded to include other financial losses, reputational damage and legal challenge. companies > Appointment of new directors and senior responsible owners with clarity on roles and reporting The Council has a number of subsidiaries and joint ventures to deliver a range of services or address specific issues. Given the Regular Board meetings established at all active Council's current financial and operational circumstances, and companies issues that have been identified to date, the rationale for > Improved performance reporting to company Boards Establishment of monthly financial reporting from key continuing to have these companies needs to reviewed. \geq companies into the Council > Internal audit tracker for key issues to monitor progress In addition, a wide range of governance, management, operational and financial issues have been identified over a through to issues getting closed down number of years and not been addressed. These need to be (a) reassessed to reflect the latest available information relevant to the companies and (b) revised actions implemented. There is a **Actions Required:** risk of poor service delivery, ineffective decision making, poor oversight, poor value for money and additional reputational and A wide range of workstreams are underway with the financial risk for the Council (e.g. additional costs, nonimmediate actions focused on: repayment of loans, grant clawback) Closing down all dormant companies \geq Ground Rent Estates 5 – execution of loan and new financial arrangements, including completion of conditions **Consequence:** precedent for the Homes England Grant Funding Agreement; revised financial modelling and financial Additional financial pressure on existing Council budgets that exposure review; resolution on main works programme; are not within plan continue to support litigation proceedings; development of > Poor service delivery, especially in relation to housing, due to exit strategy; establish shareholder oversight group poor contract management and controls

 Potential grant clawback across a range of companies which will have implications for the Council. e.g. James Elliman Homes, Ground Rents Estates 5 Reputational damage to the Council as a result of the failure of a number of high profile initiatives with a national interest. e.g. Nova House Key strategic sites are not developed – failure to achieve the Council's strategic objectives and key outcomes. e.g. Slough Urban Renewal 	 James Elliman Homes – complete options review (led by Local Partnerships); Council-led review of service level agreement arrangements including operations, management and finances and implementation of improvements, debt repayment plan; resolve grant allocation and council accounting matters re top-up payments; appoint new directors and establish shareholder oversight group; undertake review of rental levels across the portfolio. Slough Urban Renewal – Restructure the Council's commercial relationship including de-risking and minimising cash outlay. Complete North West Quadrant due diligence/negotiations with Homes England and complete transaction/disposal; Slough Urban Renewal sites – agree revised relationship/investment principles, agree revised heads of terms, approve updated business cases for Montem/Wexham, execute transactional requirements/disposal; reinstate key governance required under the terms of the partnership agreement and obtain approvals for revised business cases/plans DISH – establish regular performance reporting to the Board, commence high level options review to explore the potential of transferred DISH properties into the HRA, commercial review of DISH lease, preparation of a service level agreement to reflect the services the Council is providing.
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	Inherent Risk	Residual Risk	Target Risk
Likelihood	5	4	3
Impact	4	3	2

Score	20	12	6	

6X4 Matrix guidance

Likelihood	Negligible Impact	Marginal Impact	Critical Impact	Catastrophic Impact
Very High	6	12	18	24
High	5	10	15	20
Significant	4	8	12	16
Low	3	6	9	12
Very Low	2	4	6	8
Almost impossible	1	2	3	4

Assessing the SEVERITY/ IMPACT of a risk

Severity is assessed on a scale of Negligible to Catastrophic indicating increasing seriousness. The impact is assessed looking at credible scenarios (taking prevailing circumstances into consideration) and looking forward to the risks that arise from these scenarios.

The **examples** against each category are for your guidance and should be thought of as the consequences that would be likely to occur if things were left to go out of control.

The **examples** detailed below will help ensure a consistent approach.

	Negligible	Negligible Marginal Critical		Catastrophic	
	1	2	3	4	
Economic /Financial	Financial impact up to £50,000 requiring virement or additional funds	Financial impact between £50,000 and £500,00 requiring virement or additional funds	Financial impact between £500,000 and £1,000,000 requiring virement or additional funds	Financial impact in excess of £1m requiring virement or additional funds	
Political	Could have a major impact one departmental objective but no impact on a Council strategic objective	Could have a major impact on a Departments objective with some impact on a Council strategic objective	Council severely impact the delivery of a Council strategic objective	Council would not be able to meet multiple strategic objectives.	
Health & Safety	Reduced safety regime which if left unresolved may result in minor injury	Minor injuries	1 death or multiple serious injuries	Multiple deaths	
Environment	Minimal short- term/temporary environmental damage	Borough-wide environmental damage	Major long term environmental damage	Very severe long term environmental damage.	
Legal/Regulatory	Minor breach resulting in small fines and minor disruption for an short period	Regulatory breach resulting in small fines and short term disruption for an short period	Minimal CMT but major departmental management effort required	Very severe regulatory impact that threatens the strategic objectives of the Council	

	Negligible	Marginal	Critical	Catastrophic	
	1	2	3	4	
Management inc Contractual	Minimal contract management required	Minimal departmental but major contract management required	Minimal CMT but major departmental management effort required	Major CMT management effort would be required	

Assessing the LIKELIHOOD of a risk occurring

The LIKELIHOOD of the risk occurring is estimated on the basis of historic evidence or experience that such situations have materialised or are likely to.

The table gives example details of how the likelihood is assessed.

The likelihood needs to be assessed in terms of has it happened before and is it expected to happen in the near future

Almost Impossible	Very Low	Low	Significant	High	Very High
1	2	3	4	5	6
Less than 10%	10 – 30%	30 -50%	50-70%	70 – 90%	More than 90%
Event may occur only in	Event will occur	Event should	Event will occur	Event may occur	Event will occur
exceptional	in exception	occur at	at sometime	only in most	only in most
circumstances	circumstances	sometime		circumstances	circumstances