South Ayrshire Council

Report by Head of Legal and Regulatory Services to Cabinet of 27 September 2022

Subject: Strategic Risk Management

1. Purpose

1.1 The purpose of this report is to update Members on the reviewed Strategic Risk Register (Appendix 1) in line with the agreed reporting framework.

2. Recommendation

- 2.1 It is recommended that the Cabinet:
 - 2.1.1 considers the reviewed Strategic Risk Register (Appendix 1) updated by Chief Officers; and
 - 2.1.2 notes the 12 key risks and endorses the work currently being undertaken or proposed by risk owners to mitigate these risks.

3. Background

- 3.1 The Strategic Risk Register is reported in accordance with the framework within the Corporate Risk Management Strategy.
- 3.2 The Strategic Risk Register was reported to the Audit and Governance Panel of 7 September 2022 for scrutiny and referred to Cabinet for endorsement.
- 3.3 Risk Management is also undertaken at Directorate level and within the Health and Social Care Partnership.

4. Proposals

4.1 The Strategic Risk Register has been reviewed by Chief Officers / Risk Owners and updates provided on progress against implementation of proposed risk mitigations. Risks are referenced against the themes of Governance, Protection and Resources. 12 Strategic Risks are managed and these are listed as follows:

	Risk	Theme
1.	Decision Making and Governance	Governance
2.	External Factors including Contingency Planning	Governance

	Risk	Theme
3.	Strategic Planning – Recovery and Renew	Governance
4.	Integrity	Governance
5.	Child and Adult Protection	Protection
6.	Public/ Employee Protection	Protection
7.	Sustainable Development and Climate Change	Protection
8.	Ash Tree Die Back	Protection
9.	Financial Constraints	Resources
10.	Workforce Planning	Resources
11.	ICT – Digital Resilience, Protection and Capability	Resources
12.	Management of Assets	Resources

- 4.2 Full detail of strategic risk management arrangements is provided within the register (Appendix 1). Ownership is assigned to ensure there is clear accountability and responsibility in terms of risk management. The cause, potential effect, risk score and current mitigations are also recorded.
- 4.3 Although the financial risk relating to Covid has receded, the recent Scottish Government Spending Review and the effects of inflation are additional causes which are impacting on this risk and the risk rating has been adjusted accordingly.
- 4.4 Proposed risk mitigations have a target completion date and their progress is outlined by use of a percentage completion bar in the report. A status icon is also included which indicates whether or not the specific initiative is on target.
- 4.5 Members are requested to note that the Health and Social Care Partnership (HSCP) provide information on the risk management of Child and Adult Protection within the Council's Strategic Risk Register. HSCP also develop and report on wider Partnership risk issues within their own bespoke Strategic Risk Register which is provided on a 6 monthly basis for scrutiny to the HSCP Performance and Audit Panel. A link to the HSCP's risk register is provided on pages 6 and 7 of Appendix 1.
- 4.6 Following a request from Members, a review has been undertaken in respect of the Workforce Planning risk. A Corporate Working Group has been established to develop a workforce plan for 2022-25 that links to the Council's strategic priorities and improvement areas in relation to Best Value. Further information on this can be found on page 12 of the Strategic Risk Register at Appendix 1.
- 4.7 Members are also requested to note that Chief Officers regularly consider new or emerging risks and there is a process whereby significant operational risks, managed at directorate level, can be elevated to strategic level as required.
- 4.8 It is anticipated that Members will consider the strategic risk management arrangements outlined within this report and be assured that there is a robust system in place for identifying and managing those threats which could have a significant impact on the successful delivery of the Council's objectives.

5. Legal and Procurement Implications

- 5.1 The recommendations in this report are consistent with legal requirements.
- 5.2 There are no procurement implications arising from this report.

6. Financial Implications

6.1 There are no cost implications associated with the recommendations in this report.

7. Human Resources Implications

7.1 There are no human resource implications associated with the recommendations in this report.

8. Risk

8.1 Risk Implications of Adopting the Recommendations

8.1.1 Risks have been identified and assessed in line with the Council's Risk Management process. This report seeks to confirm that risk mitigation at Strategic level is ongoing and risks are being managed at a tolerable level.

8.2 Risk Implications of Rejecting the Recommendations

8.2.1 Rejecting the recommendations may give rise to external criticism, breach of statute or legal challenge.

9. Equalities

9.1 The proposals in this report allow scrutiny of performance. The report does not involve proposals for policies, strategies, procedures, processes, financial decisions and activities (including service delivery), both new and at review, that affect the Council's communities and employees, therefore an equality impact assessment is not required.

10. Sustainable Development Implications

10.1 Considering Strategic Environmental Assessment (SEA) - This report does not propose or seek approval for a plan, policy, programme or strategy or document otherwise described which could be considered to constitute a plan, programme, policy or strategy.

11. Options Appraisal

11.1 An options appraisal has not been carried out in relation to the subject matter of this report.

12. Link to Council Plan

12.1 The matters referred to in this report contribute to the delivery of all Council strategic objectives.

13. Results of Consultation

13.1 Consultation has taken place with Councillor Martin Dowey, Portfolio Holder for Corporate and Strategic, and the contents of this report reflect any feedback provided.

14. Next Steps for Decision Tracking

14.1 If the recommendations above are approved by Members, the Head of Legal and Regulatory Services will ensure that all necessary steps are taken to ensure full implementation of the decision within the following timescales, with the completion status reported to the Leadership Panel in the 'Council and Leadership Panel Decision Log' at each of its meetings until such time as the decision is fully implemented:

Implementation	Due date	Managed by		
Adopt recommended approach to Strategic Risk Management	30 September 2022	Service Lead – Risk and Safety		

Background Papers Report to Audit and Governance Panel of 7 September 2022 –

Strategic Risk Management

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Date: 21 September 2022

South Ayrshire Council has identified the following risks of strategic significance in line with the themes of Governance, Protection and Resources. The ongoing impact of external risk factors out with the Council's control are fully considered and risk mitigations have been modified and agreed to form the basis of revisions to the Strategic Risk Register.

Risk Themes and Title								
Governance	Protection	Resources						
1.Decision Making and Governance	5.Adult and Child Protection	9.Financial Constraints						
2.External Factors including Contingency Planning	6.Public and Employee Protection	10.Workforce Planning						
3. Strategic Planning – Recovery and Renew	7. Sustainable Development and Climate Change	11. ICT – Digital Resilience, Protection and Capability						
4.Integrity	8. Grounds Maintenance - Ash Tree Die Back	12. Management of Assets						

The successful mitigation of these risks will support the delivery of the Council Plan. Input is provided by Risk Owners identified at Strategic level to ensure clear responsibility in terms of their management. Detail is provided on risk mitigations – both current and proposed.

Target dates are recorded in respect of the achievement of the proposed mitigations.

	participation and goo						
1.Members are supported to deliver good decision making through training and briefings. The Service Lead – Democratic Governance							
1.Members are supported to deliver good decision making through training and briefings. The Service Lead – Democratic Governance	Progress Bar						
reviewed arrangements for briefings for Member and Committee Services in discussion with the Leader. Induction training and bespoke Panel training sessions have taken place in May/June 2022. Specific recommendations were made for one to one meetings with new Members to assess training needs and produce an individualised plan. Following recess these will take place utilising the Improvement Service's Political Skills Self- Assessment tool and this will allow Members to consider particular areas that they would benefit from training on. (December 2022).	Increased from 90%						
2. Webcasting/live broadcasting solution that allows both hybrid meetings and public access now live and fully operational. External public vebsite now has an area dedicated to this where meetings can be live streamed, the future meeting schedule is visible and recordings of he meeting archive can be viewed.							



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Risk 2			Risk Title – Ext	ernal Factors in	ncluding Contingency Planning Risk 1	heme - G	overnance	
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations			
Accountable – ELT Responsible - CLT Risk Owner – Head of Legal, HR and Regulatory Services	that a range of external factors out with the Council's control such as COVID-19, Brexit, Ukraine or other, may adversely	Factors imposed upon the Council such as legislative change, Government policy change, implications of Brexit, Ukraine, political change	Requirement to re-allocate resources, failure to deliver services to an acceptable level or drive desired improvements. Restrictions on budget, reputational damage.	5 x 2 = 10	 Continued Horizon scanning to anticipate and respond to risks – four mair civil contingencies risks identified for Ayrshire this year. Watching brief and continual discussion on funding requirements for any unanticipated emergencies. Dissemination of information to officers and members around COSLA and Chartered Institute of Public Finance and Accounting (CIPFA). Risk and Safety team and the Ayrshire Civil Contingencies Team (ACCT) support the Ayrshire Local Resilience Partnership (ALRP). The structure of the Practitioner and Strategic ALRP was refined to respond more efficiently to Ayrshire Risks. Chief Executive attends Strategic ALRP. The Level of Interaction between Health / Councils and partners has increased and allows for more efficient collaboration in emergency planning. HSCP Risk and Resilience Forum is well established and attended by the Service Lead – Risk and Safety and the ACCT Coordinator. 24/7 on call service in place via Civil Contingencies to respond to, and coordinate, Council emergency response to major incidents. Staffing and resourcing arrangements are in place to support those individual families arriving in South Ayrshire from Ukraine. 			
Proposed Miti	gations (with da	ates)				Status	Progress Bar	
1.Practitioner Ayrshire Local Resilience Partnership (ALRP) and Strategic Ayrshire Local Resilience Partnership meet with required frequency to coordinate individual responses from all agencies to major incidents. An Ayrshire wide Tactical Group has been established to specifically focus on contingency arrangements and additional actions deemed necessary to manage increasing numbers of refugees from Ukraine. Additionally the Ayrshire ALRP identifies and manages 4 concurrent civil contingencies risks to support an Ayrshire response. These are 1. Pandemic or Emerging Infectious Diseases, 2. Marauding Terrorist Attack, 3.Disruptive Weather and 4.National Electricity Transmission System (NETS) Failure (Power Resilience/Black Start) (ongoing)							Increased from 85%	
arrangements. operational Ser	SAC civil conting vice Leads and	gencies response plan is	s under review and lanagers undertak	d Council Inciden e a rolling review	SAC civil contingency and business continuity at Officer training is being rolled out to key Chief Officers, of Service Business Continuity Plans on 6 monthly basis.		Increased from 85%	

Risk 3		Risk Title	– Strategic Planning – Recovery an	d Renew	Risk TI	neme - Governance		
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations			
- CLT Risk Owner	1. There is a risk that the Council fails to fulfil strategic objectives in light of the recent pandemic and related pressures, and that current service, financial and resource planning is therefore not aligned. 2. A significantly negative economic impact was anticipated in light of Covid-19 which could impact on a range of Council services, particularly those who generate income including Housing, Council Tax, Tourism and Events, Sport and Leisure, Health and Wellbeing. 3. There is a risk relating to the future operating model for the Council establishment.	Corporate and	Failure to deliver on Corporate and Directorate Plans or achieve priority outcomes Failure to meet expectations of the public, partners, service users, local businesses Reputational damage Decrease in income to the Council which will detrimentally impact service areas and may impact on future delivery models	4 x 2 =8	1.Recovery and Renew Framework approved 2.Implementation of Operational Recovery at Renew supported by Assistant Directors and Heads of Service. 3.Plans developed from each Council Service Lead to take account of future operational delivery models 4.Existing Council Plan with clearly defined priorities is in place. 5.Delivering Good Governance framework at reporting in place. 6.Robust financial governance in place.			
Proposed Mi	itigations (with dates)				Status	Progress Bar		
	nonitoring ongoing to measure full year financia s Continuity Plans continue to be updated by Se					Increased from 75%		
2. Business	b community in and community to be apacied by co	51 1100 20000	on a o monany baoie. (ongoing)			Increased from 75%		
longer te buildings fair, flexil engaged	3. A Group has been established to implement the Council's future operating model, with a purpose of establishing a longer term, sustainable model of working, including working from home, which will help us reduce the amount of buildings we occupy, present opportunities for savings and reduce our carbon footprint. Key to this will be establishing fair, flexible and supportive working arrangements to ensure staff have a good work life balance and remain healthy, engaged and productive. (Sept 2022)							
working s Buildings	ave begun to settle into new ways of working. style. Officers have begun the process to move. Other staff have increased their face to face (Sept 2022)	e hybrid and	office workers into their 'villages' with	in County		New		

LOYALTY-											
Risk 4 Risk Title – Integrity Risk Theme - Gover											
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitiç	gations					
Accountable – ELT Responsible - CLT Risk Owner – Head of Legal, HR and Regulatory Services	1. There is a risk that the integrity of the Council is breached through a range of failures such as Information Security, Cyber Crime, non- compliance with the General Data Protection Regulations (GDPR), Procurement Fraud, Contractual Failures, Vetting or Financial Irregularities. (COVID-19 may exacerbate the impact of the integrity risk). 2. There is a risk of failure to maintain sources of assurance and levels of scrutiny during COVID-19 response and recovery. 3. There is a risk associated with Brexit of any data being dealt with out with UK.	Existing Council Policy or systems may be ineffective or inconsistently implemented. Lack of training or communication. Difficulty to respond timeously to FOI and GDPR requests. Additional levels of Cybercrime and Fraud because of external global events.	Reputational damage, financial loss, fines, prosecution, civil liability.	4 x 2 = 8	1. Current policies / encryptic specifically mandatory online training, robust processes fo with data breaches. 2. Adherence to the Records that has been agreed with thimplemented. 3. Standing Orders relating to Meetings, Scheme of Delega Regulations, Council Procure 4. SAC Code of Conduct, rar policies, employee vetting prospectives, employee vetting prospectives, employee vetting prospectives, and National Fraud In 6. Internal Audit activity. 7. Establishment of Integrity of Integrity Group Risks. 8. Additional Communication Public with advice re Cyber 6.	e Data Pro r reporting s Manager e Keeper o Contract ation, Fina ement Pol nge of HR ocesses. uarantee Ir itiative. Group / m	tection I and dealing I and dealing I and is being Is and to Incial I icy. I H&S, Fleet I hsurance I anagement I aff and				
Proposed Mitigations (with dates) Status P											
1. The actions referred to above are progressed by an Integrity Group, which monitors existing risks and identifies any new and emerging risks for SAC .The Group monitors and develops appropriate mitigations. The Chief Executive chairs the group and officers responsible for each key heading report on the risks. Various Service Leads attend and report on their operational areas as they relate to integrity. (ongoing).											
	process of the risks from Integrity Group to Md and then a paper will be taken to next integr						30% No change				



Risk Title - Adult and Child Protection

Risk 5

Risk Theme – Protection

Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations
- CLT Risk Owner - Director of Health and Social Care and Chief	increased levels of hidden harm in our community as a result of Covid and reduced community presence of services. 2. There is a risk of failure to provide adequate protection and the necessary level of support to vulnerable adults and children.	complex family and adult needs Quality Assurance Framework has been Absent	Potential harm to clients and vulnerable	5 x 2 = 10	1. There are monthly Chief Officer Group (COG) meetings to monitor the impact of Covid on public protection matters. 2. There are monthly Public Protection sub groups (Child Protection; Adult Protection; Violence Against Women/Criminal Justice and Alcohol and Drugs Partnership) reporting into COG that are monitoring the operational context and responding in a coordinated way to issues. 3. APC and CPC receive a Covid update at each meeting that charts the response to Covid and actions taken. 4. HSCP Directorate Management Team meets regularly to provide leadership and oversight of response 1. Established governance in place via Clinical and Care Governance 2. APC and CPC meet regularly and review business plans 3. Multi Agency Public Protection Arrangements (MAPPA) including Management Oversight Group and Strategic Oversight Group) are in place and report monthly to COG. 4. The Community Services Oversight Group seeks to support the sector and provide assurance on a range of issues to key local and national stakeholders. 5. Regular updates to procedures and guidance have been shared as national Covid guidance has been published. 6. Initial Referral Data (IRD) activity is now audited monthly to provide scrutiny and assurance in relation to this key activity 7. Adult Support Protection Lead Officer engaging first line managers in developing our response to vulnerable adults 8. CSWO engaging with operational staff in relation to complex cases in both adult and children's services where there are complex risk factors 9. Care First implemented across all children and adult social work teams. 1. New CPC/APC sub group structure now established and the Policy and Performance Sub Group is leading this review work and will report progress at each meeting 2. Governance on new policy and procedure will be via CPC/APC through to COG.
					3. Development of Practice Standards in Social Work is in progress to support the policy framework.

Risk 5	Risk Title - Adult and Child Protection (Continued)	Risk The	me - Protection					
Propo	sed Mitigations (with dates)	Status	Progress Bar					
1.	Develop and implement the quality assurance framework within commissioning, building on COVID-19 additional measures and the work of the Care Home Oversight Group (31.03.22)	~	Increased form 60%					
2.	Full refresh of HSCP strategic and operational risk registers is complete and is now approved by HSCP Performance and Audit Committee. (31.06.21)	~	Increased from 80%					
3.	Recruitment to strengthen commissioning and Chief Officer Social Work teams (31 .03.22)	~	Increased from 95%					
4.	Learning reviews have been commissioned in relation to the ADP, Public Protection and Adult Social Work services that will identify areas for improvement (31.12.22)		Increased from 20%					
5.	The ADP Is developing a framework in relation to risk around drug related deaths (31.12.22)		Increased from 25%					
6.	The implementation of the transformational work within Children and Families which has been supported by the Council. Belmont family support has been commenced and the implementation of Signs of Safety is progressing in partnership with the National Signs of Safety organisation. (31.12.22)		Increased from 65%					
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Further explanation on progress to date in terms of implementation of the above mitigations can be found by cross-referencing to the HSCP Strategic Risk Register.

Additional information is also provided within this document on a range of other risks being managed by the Partnership including; Climate Change & Sustainability,

Communication and Reputation, External Factors including Contingency Planning, Financial Position, Good Governance, Strategic Planning and Business Resilience, ICT,

Population, Premises, Provider Organisations, Service Quality, Workforce Protection and Workforce Capacity and Capability

Risk 6		Risk Title	e - Public and Em	oloyee Protec	tion	Risk Th	eme – Protection	
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations			
Accountable – ELT Responsible - CLT Risk Owners – Service Lead – Risk and Safety and Service Lead – Asset Management	safeguard employees / service users from hazards such as Violence and Aggression. 3. There is a risk that proposals by Scottish Fire and Rescue Service to	Legislative / SG Guidance change and ambiguity. Budget constraints across Services. Ambiguity around responsib- ilities or inconsistent application of policy. Lack of training.	Accident, incident, incident, injury or ill health to employees /service users. Prosecution and Civil litigation. Damage to Council's reputation. Financial impact of claims, increased insurance premiums or fines.	5 x 2 = 10	1. Existing H&S Policies and procedures. Sample H&S Risk Assessments developed for Service use. H&S Guidance prepared and issued. Range of resources, information, links and training on H&S CORE page. 2. Central H&S team undertake H&S Audits and Fire Risk Assessments over a 3 year rolling programme. Risk Assessment self-evaluation process rolled out. 3. The PDR process identifies key H&S training requirements for all Council employees. 4. Healthy Working Lives (HWL) Gold Award re-accredited since 2012). 5. Risk Assessment Training & Support, plus Council Standard and a range of courses on Management of Actual or Potential Aggression, Dealing with Difficult Behaviour, De-escalation etc 6. V&A measures across services including a Customer Security Officer, Campus Police Officers, '2 to attend' protocols panic buttons in offices, modifications to office design. 7 Action Plan prepared to address Scottish Fire & Rescue Service protocol change from April 2023.			
Proposed Miti	gations (with dates)					Status	Progress Bar	
	d refresh a range of health and safety polic Ith and safety training modules for manage			ents and work	procedures. Development of new		New	
	2. Asset Management team continue to review and action, based on risk priority, compliance and/or property related issues raised through Fire Risk Assessments, Health and Safety Audits and Vacant Property Inspections. (March 2023).							
3. All duty holders / building managers monitoring and updating outstanding H&S actions via Pentana (March 2023)							Increased from 80%	
	evaluation method to ensure all Services hudit Action). (ongoing).	ave identified sig	gnificant hazards ar	nd fully develor	ped their H&S risk assessments –		Increased from 60%	
	ith SFRS to agree alternative solutions to nand progressing (March 2023)	on-attendance o	f Fire Appliances fo	llowing autom	ated alarm signals. Action Plan		Increased from 30%	

Risk 7 Risk Title - Sustainable Development and Climate Change Risk Theme - Protection									
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations				
Accountable – ELT Responsible - CLT Risk Owner – Service Lead Neighbourhood Services	change duties, reduce emissions and also support the community to adapt and mitigate risks in relation to	play, lack of input and accountability by services leaving key areas inadequately addressed. Decisions and infrastructure while meeting short term goals are currently	Reduction in emissions not achieved to 1.5 degrees scenario therefore accelerating the pace of climate change. United Nations Sustainable Development Goals not adequately addressed. South Ayrshire may not be climate resilient. Effect may be further detriment to those already disadvantaged, increasing inequalities and exacerbating deprivation. Communities may be unprepared for a low carbon future.	4 x 2 = 8	Council approved Climate Change Strategy Baseline data on Sustainable Development and Climate Change now assembled to allow future progress to measured.				
Proposed Mitig	ations (with dates)					Status	Progress Bar		
			point strategy will be reviewed). Mid term revieus lacape, increased national targets and new national targets.				No change		
2. Introduce a m (revised to Dece		ng implementation of Strategy by	y embedding within Council policy making, as v	vell as serv	ce planning.		Increased from 15%		
3.Investigation of (December 2022)		ethodologies for council procurer	ment emissions to complement existing carbon	budgeting	orocess.		10% New		
	4. Adopt a net zero buildings policy to delivery on the Council's targets and duties in relation to the existing estate as well as proposed refurbishments and new builds. (December 2021)								
	5.Adopt fleet decarbonisation strategy in line with council policy, targets and duties alongside ULEV infrastructure strategy for both fleet and public charging. (December 2021) No change								
6. Assess the Co	uncil against Scotland's	Adaptation Capability Framewo	rk and set out priority actions. (March 2023)				No change		
7. Adopt a greer			Increased from 20%						

Risk 8	Betend'al Bial	0	Risk Title - Ash Tree Dieback		1	ne - Protection		
ELTResponsi ble- Asst Director Place Risk Owner –	infrastructure as a result of Ash Dieback – a disease proliferating	the spread of Ash Dieback	Potential Effect Potential for fatality / injury to residents / employees. Potential for damage to property, listed structures, headstones, power / phone lines Potential of falling Ash trees/limbs on roads/pavements/ footpaths within public open space and schools and associated obstruction to roads Increased liability to Council in respect of above potential incidents Financial pressure in terms of significant increased expenditure to mitigate risk including costs for replanting, cost of recruiting skilled operatives. Availability of skilled operatives likely to be restricted by market demand - this is a national problem. Potential for increased flooding risks for changes in waterways e.g. banking failures due to tree failure Loss of Ecosystems- air quality, biodiversity loss, increases in noise levels adjacent to roads, loss of visual screens Increased liability and insurance premiums for residents due to property risks. Risk to European protected species (roosts/ food source). Loss of biodiversity of species dependant on Ash	5 x 2 = 10	1.Survilands Neigh Servic comm 2.Com ARA h and re have I	rent Mitigations vey of trees within managed by bourhood ses has enced. Immunication with has taken place egular meetings been set up. Ash Dieback Plantently being oped		
Proposed Miti	gations (with dates)		St	atus	Progress Bar		
ongoing deterior	Ash Dieback plan is currently being developed which includes an inspection programme which will roll forward to highlight any ongoing deterioration. It will also contain proposed cost information for full implementation. Plan to be reported to Cabinet for approval by December 2022.							
2. On cor								

Risk 9				R	tisk Title - Financial Constraints	Risk Th	eme - Resources
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Current Mitigations		
Accountable – ELT Responsible - CLT Risk Owner – Head of Finance and ICT	1. There is a risk to financial resilience during COVID-19 response and recovery. 2. There is a risk that current, planned or expected levels of service cannot be delivered.	a result of implementation of a range of measures to protect SAC residents and service users. UK and Scottish Government reductions in	Incurring additional unbudgete d COVID-19 spend – strain on reserves. Failure to deliver key services or meet change in service demands.	4 x 2 = 8	 Annual 2022/23 budget prepared and approved in March 2022. Maintain pressure on Scottish Government to agree settlements which participation in CoSLA groups. A ten year LongTerm Financial Outlook and three year Medium Term F Leadership Panel in October 2021. Annual Treasury Management Strategy prepared, reviewed by A&G pa 2022. Details credit and counterparty risk. Treasury Management Practices (TMP's) updated annually to reflect T counterparty risk management, liquidity risk management, interest rate risrisk management. Covid-19 - Appropriate financial control and authorisation mechanisms budgetary control maintained to ensure appropriate monitoring of spend 7. Covid-19 - cash reserves remain sufficient to meet immediate cost impartunding announcements. Covid-19 - Initial COVID-19 cost impact assessment through Cost submadditional SG funding allocations. Covid-19 - Considerable Scottish Government funding utilised to offset income in 2020/21 and 2021/22. Covid-19 - significant business support package previously put in placimpact on business community and community in general. Covid-19 Programme of Recovery Activity 2021/22 to 2022/23 report a providing resources (funded by Covid-19 reserves brought forward and 20 impact of pandemic on Council Service provision. 2022-23 Budget approved in March 22 included Covid-19 budgets for service expenditure funded from Covid-19 reserves rolled over from 2021- 	inancial Plan approved and approved sk management are remain operation act in tandem with hission to CoSLA direct Council core by Scottish Go approved by LP in 221/22 SG fundirect continuing loss of continuing loss of the same approved by Continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approved by LP in 221/22 SG fundirect continuing loss of the same approximate approxima	proved by d by Council March as credit and and exchange rate hal and robust h SG previous A – resulted in ost impact/loss of evernment to mitigate in June 2021 – ng) to meet ongoing
Proposed Mitigations (with dates)						Status	Progress Bar
1. Lobby Scottish Government through discussions via CoSLA, Directors of Finance and Solace to ensure required funding continues to be made available to Local Government (ongoing).						Increased from 75%	
2. Rolling annual update of three year Medium Term Financial Plan to be implemented (next update due October 2022)						20% New	
3. Bi annual u	Bi annual update of ten year Long Term Financial Outlook to be implemented (next update due October 2023)						

Risk 10 Ownership	Potential Risk	Risk Title – Workforce F	Potential Effect	Risk Score		k Theme - Resources rrent Mitigations	
Accountable - ELT Responsible - CLT Risk Owner - Assistant Director - People	1. There is a risk that workforce planning arrangements may not be consistent across Council Services and the recent Best Value Assurance report identified the requirement for the Council to make improvements in relation to workforce planning. 2. A corporate workforce plan is in place which runs to 2022 along with a workforce planning toolkit, released in 2019, to assist services and teams to develop their own workforce plans. However, the guidance and toolkits are not embedded or consistently deployed throughout the Council, and plans do not extend beyond 2022. 3. There is also no identified link between workforce planning and the Council's priorities. 4. There is a risk that workforce recruitment and retention issues are creating pressure on Service delivery in key areas.	No recognised corporate WFP methodology No identified executive owner/sponsor Limited data maturity (lack of consistent workforce data provision and collation) Workforce planning is not specified/referenced within the service planning process	Services may not be delivered effectively or in line with statutory requirements or agreed standards. Additional unbudgeted spend may be incurred.	3 x 3 = 9	1.A corporate which runs to workforce pla 2019, to assistevelop their 2. A Corporate established (workforce plathe Council's	e workforce plan is in place 2022 along with a anning toolkit, released in st services and teams to own workforce plans. The Working Group has been June 2022) to develop a an for 2022-25 that links to strategic priorities and areas in relation to Best	
Proposed Mi	tigations (with dates)		Status	Progress Bar			
Value. (Decer	,			New Son			
(December 20	ate Leadership team will ensure consistent use of an a 022)	igreed worklorde planning to	empiate across servic	Jes.		New	

Risk 11		Risk Title – IC	T Digital Resilience,	Protection a	and Capability	Risk	Theme - Resources	
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Curren	t Mitigations	3	
- ELT Responsible - CLT	There is a risk that major or widespread ICT failure will adversely affect delivery of Council services. ICT failure risks include non-compliance, failure of business systems, cyber-attack, and failure of ICT equipment.	Lack of corporate ICT planning in a robust and consistent manner. Cyber intrusion. Outdated / obsolete equipment and systems. The Business Continuity Plans of some Services lack effective arrangements for ICT loss.	Inability to provide key services and recover quickly. Reputational damage, financial loss, litigation.	4 x 2 = 8	1. Resilient infrastructure in planetwork communication paths, 2. External contracts established support and expertise across of 3. Existing Disaster Recovery Bystems. Discussions remain of with regards to potential cross recovery opportunities. 4. A bespoke ICT Risk Register as part of standard operating positives. The Integrity Group meets recover and develop further miting. Compliance standards established process governance frameworks.	internet links and with service ritical technor Plan (DRP) in ongoing with the organisation or in place, where tice. The egularly to congations as results as particed with the place of th	and server hardware be providers for technical logies. In place for critical he NHS, EA and SA data centre disaster which is subject to review the nsider cyber security quired.	
Proposed Mi	tigations (with dates)					Status	Progress Bar	
	ices will be moved to McCall's A ed for resilience purposes (Dec 2		s enterprise facilities m	nanagement	services, with County Buildings		Increased from 10%	
Continuit	2. Further engagement with partner authorities is required in relation to Data Centre DR plans. Further reviews of the ICT Business Continuity Plan (BCP) post COVID-19 are also required, to ensure responses for loss of all key ICT Business Systems and Infrastructure are considered and mitigated. (Dec 2022). Works delayed due to pandemic.							
3. ICT continue to work with a Cyber Security partner to assess and improve the overall security of the Council's ICT infrastructure. ICT have introduced a Security Operations Centre (SOC) to monitor and respond to any evidence of compromise. Egress Defend has also been introduced to alert/protect against phishing emails. Looking to apply for Cyber Essentials and PSN accreditation late summer 2022. (Sept 2022)								
	4. All Service BC plans to include arrangements for resilience in respect of ICT failure –engagement with service areas will occur as it is likely that BC plans will require to change as result of the pandemic. (December 2022). Works delayed due to pandemic. No change							
plans are	t Management function being es in place for a number of techno on by Dec 2022 and will be docu	logy towers. Works to	formally document an	asset manag	gement plan now scheduled for		95% Increased from 90%	

Diale 40						Diale Theor	D	
Risk 12 Ownership	Risk Title – Managem Potential Risk	Cause	Potential Effect	Risk Score		rent Mitig	ne - Resources pations	
- CLT Risk Owner - Service Leads - Asset Managemen t and	Accountable Accountable There is a risk that required physical modifications to Council Buildings will take time and additional resource to implement in light of Government Guidance on physical distancing and prevention of COVID-19 virus spread. All Council Buildings are affected by this if Council is to ensure recovery from pandemic and return to 'new normal'; including Office Spaces, Education establishments, Depots, Customer Contact Centres, Leisure facilities etc. 2. There is a risk that all Council premises will not reopen fully following COVID-19 and a review of the Asset Management Plan will need to consider further Asset Rationalisation. Risk Owner Service Leads — Asset Management Alanagement Plan will need to consider further Asset Rationalisation. 3. There is a risk of delay to projects to projects within the General Services capital programme due to hyperinflation of construction costs which could impact on deliverability of the programme. 4. There is a risk that Energy projects, for example LED lighting, that help to reduce the Council's carbon footprint are delayed leading to an inability to 1. SAC Recover COVID-19 Impact on efficient recovery of Council services / Prem Office Recover 3 x 2 = 6 2. Property Proprogress buildir occupancy leve physical reconforce in deliver Asset Management Plan. Project delay or additional costs. Adverse incidents and compliance failure. Damage to 3. Professional costs. 4. Design work continued to end works.					itised list on the control of the co	of returning as subject to Chief approvals. appointed to ments, agree olement required within Council ervices to continue osts and gress and deliver or projects has some projects once Scottish	
Proposed Mi	itigations (with dates)	•	•			Status	Progress Bar	
Property F new working	s in line with		Increased from 25%					
2022). The A	. Review Asset Management Plan (AMP), consult with stakeholders and Chief Officers prior to submitting to Council for approval. (March 022). The AMP was not reviewed in March 2022. It requires to take into account the Transforming our Estate Report and Future Operating Increased from 2 lodel. A new proposed date for the review of the Asset Management Plan (Land and Buildings) is March 2023.							
was reviewed	There is a commitment to fully review the General Services Capital programmes (March 2022). The General Services Capital Programme vas reviewed as part of the Council's budget setting process, resulting in a new 12 year capital plan being approved by South Ayrshire Council New 1 he 3rd March 2022. Ongoing review will take place through quarterly monitoring reports to Cabinet.							
4.A number o	A number of Energy projects have commenced, whilst design work for future projects is also continuing (April 2022) A number of Energy projects have commenced, whilst design work for future projects is also continuing (April 2022) Increased from 259							

Guidance - Recording Risks

				•			
Risk No. x			Risk Title - xxxxx	Risk Them	ne – Resources / Protec	tion / Governance	
Ownership	Potential Risk	Cause	Potential Effect	Risk Score	Curren	t Mitigations	
Who is accountable and responsible for managing the risk	What could go wrong?	What may have caused this risk?	Possible outcomes or adverse effects?	3 x 3 = 9	Impact		
	S	A	M	P	L	E	
roposed Mitigations (with dates) Status Progress Bar							
1. What is planned to mitigate the risk further? (and when it is due to be completed) <enter date=""> Increased from?</enter>							

A status icon (Figure 3) is displayed along with a calculation from Risk Owners on percentage completion of the mitigating actions.

This information is closely scrutinised by Chief Officers via CLT and Elected Members through the Audit and Governance Panel and Cabinet and this assists in determining decisions on reducing or increasing risk ratings utilising the matrix at Figure 1.

New risk identification is considered against a broad range of risk types and these are represented at Figure 2.

Risk types are cross-cutting and not considered in isolation.

Further explanation of SAC Council Risk Management Methodology is available within the Corporate Risk Management Strategy

Fig 1 Fig 2

_								
	Risk Themes							
0	Sovernance	Pro	tec	tion	Resources			
	Risk Rating							
In	npact	х		Likel	ihood			
1	Minor		1	Unli	kely			
2	Moderate		2	Pos	sible			
3	Major		3	Like	ly			
4	Critical		4	4 Very Likely				
5	5 Catastrophic			Alm	ost Certain			



Fig 3	Status
>	Completed
	On Target
	Not on target – some concerns
	Not on target – major concerns
	Not yet started