South Ayrshire Council

**Report by Head of Legal, HR and Regulatory Services
to Audit and Governance Panel
of 7 September 2022**

Subject: Strategic Risk Management

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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 Panel:

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 1 December 2021 for scrutiny and to the Leadership Panel on 18 January 2022 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/

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.
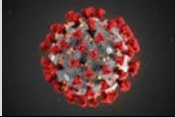
Background Papers   None

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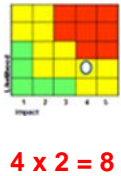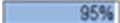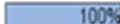
Date: 26 August 2022

SOUTH AYRSHIRE COUNCIL - STRATEGIC RISK REGISTER (draft July 2022) Appendix 1
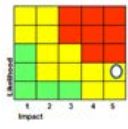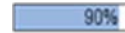
South Ayrshire Council has identified the following risks of strategic significance in line with the themes of Governance, Protection and Resources. The ongoing impact of external risk factors out with the Council's control are fully considered and risk mitigations have been modified and agreed to form 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.		

Risk 1			Risk Title – Decision Making and Governance			Risk Theme - Governance
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**	
Accountable – ELT Responsible - CLT Risk Owner – Head of Legal, HR and Regulatory Services	1. There is a risk that key decisions are taken on behalf of the Council which may contradict agreed Council Plan objectives or increase risk exposure to the organisation.	Updates to Government legislation and advice. Changes to political structure. Levels of scrutiny.	Lack of compliance; Failure to meet statutory requirements; Poor best value audit. Reputational damage.	 **4 x 2 = 8**	1. Members are supported by a range of training programmes to ensure effective Panel participation and good decision making. 2. Service Leads ensure there is full consultation with PFH's on Panel reports.	

Proposed Mitigations (with dates)	Status	Progress Bar
1.Members are supported to deliver good decision making through training and briefings. The Service Lead – Democratic Governance 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).	▶	95% *Increased from 90%*
2. Webcasting/live broadcasting solution that allows both hybrid meetings and public access now live and fully operational. External public website now has an area dedicated to this where meetings can be live streamed, the future meeting schedule is visible and recordings of the meeting archive can be viewed.	✔	100% *Increased from 75%*
3. Installation of camera, recording and broadcasting equipment in County Hall to support hybrid meetings now complete and system is live and operational – actively being used post May election.	✔	100% *Increased from 55%*

Risk 2				Risk Title – External Factors including Contingency Planning		Risk Theme - Governance
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**	
Accountable – ELT Responsible - CLT Risk Owner – Head of Legal, HR and Regulatory Services	There is a risk that a range of external factors out with the Council's control such as COVID-19, Brexit, Ukraine or other, may adversely impact on ability to fulfil Council objectives and deliver critical services.	Adverse incidents or Civil Emergencies, eg Kincaidston, Covid19. Factors imposed upon the Council such as legislative change, Government policy change, implications of Brexit, Ukraine, political change nationally or locally. Unanticipated updates to Government legislation and advice.	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**	1. Continued Horizon scanning to anticipate and respond to risks – four main civil contingencies risks identified for Ayrshire this year. 2. Watching brief and continual discussion on funding requirements for any unanticipated emergencies. 3. Dissemination of information to officers and members around COSLA and Chartered Institute of Public Finance and Accounting (CIPFA). 4. 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. 5. The Level of Interaction between Health / Councils and partners has increased and allows for more efficient collaboration in emergency planning. The HSCP Risk and Resilience Forum is well established and attended by the Service Lead – Risk and Safety and the ACCT Coordinator. 6. 24/7 on call service in place via Civil Contingencies to respond to, and coordinate, Council emergency response to major incidents. 7. Staffing and resourcing arrangements are in place to support those individuals and families arriving in South Ayrshire from Ukraine.	

Proposed Mitigations (with dates)	Status	Progress Bar
1.Practitioner Ayrshire Local Resilience Partnership (ALRP) and Strategic Ayrshire Local Resilience Partnership meet with required frequency to co-ordinate 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)		90% *Increased from 85%*
2. Risk and Safety Team and the Ayrshire Civil Contingencies Team continue to support SAC civil contingency and business continuity arrangements. SAC civil contingencies response plan is under review and Council Incident Officer training is being rolled out to key Chief Officers, operational Service Leads and Coordinators. Council Managers undertake a rolling review of Service Business Continuity Plans on 6 monthly basis. Civil Contingencies exercises to test plans continue to be developed and rolled out (ongoing) .		90% *Increased from 85%*
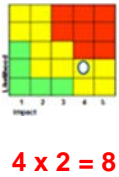
Risk 3			Risk Title – Strategic Planning – Recovery and Renew		Risk Theme - Governance
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**
Accountable – ELT

Responsible - CLT

Risk Owner – Assistant Director – People | 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. | COVID-19.

Corporate and Directorate Planning processes. | 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 and 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 and reporting in place.
6.Robust financial governance in place. |

Proposed Mitigations (with dates)	Status	Progress Bar
1. Budget monitoring ongoing to measure full year financial impact (ongoing monthly)	▶	85% *Increased from 75%*
2. Business Continuity Plans continue to be updated by Service Leads on a 6 monthly basis. (ongoing)	▶	85% *Increased from 75%*
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)	▶	50% *Increased from 10%*
4. Teams have begun to settle into new ways of working. Letters have been issued by HR to staff to confirm their new working style. Officers have begun the process to move hybrid and office workers into their 'villages' within County Buildings. Other staff have increased their face to face presence in a range of other Council buildings across South Ayrshire. (Sept 2022)	▶	50% *New*

Risk 4		Risk Title – Integrity			Risk Theme - Governance	
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**	
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 / encryption / firewalls, specifically mandatory online Data Protection training, robust processes for reporting and dealing with data breaches. 2. Adherence to the Records Management Plan that has been agreed with the Keeper and is being implemented. 3. Standing Orders relating to Contracts and to Meetings, Scheme of Delegation, Financial Regulations, Council Procurement Policy. 4. SAC Code of Conduct, range of HR / H&S, Fleet policies, employee vetting processes. 5. Fraud Officers, Fidelity Guarantee Insurance Policy and National Fraud Initiative. 6. Internal Audit activity. 7. Establishment of Integrity Group / management of Integrity Group Risks. 8. Additional Communications with Staff and Public with advice re Cyber Crime and Fraud.	

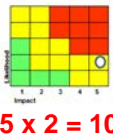| **Proposed Mitigations (with dates)**	**Status**	**Progress Bar**
1. The actions referred to above are progressed by an Integrity Group, which monitors existing risks and identifies any new and emerging risks for SAC .The Group monitors and develops appropriate mitigations. The Chief Executive chairs 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).	▶	90% *Increased from 85%*
2. The reporting process of the risks from Integrity Group to Members is being reviewed. Reporting mechanisms to Members by other authorities is being considered and then a paper will be taken to next integrity group - any good practice that is identified will be implemented (December 2022)	▶	30% *No change*

Risk 5			Risk Title - Adult and Child Protection			Risk Theme – Protection
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**	
Accountable – ELT Responsible - CLT Risk Owner – Director of Health and Social Care and Chief Social Work Officer (CSWO).	1. There are 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. 3. There are additional risks facing the HSCP and these are being managed, monitored and reviewed via the HSCP Strategic Risk Register which is reported and scrutinised at the HSCP Performance and Audit Panel.	COVID-19 More complex family and adult needs Quality Assurance Framework has been Absent	Potential harm to clients and vulnerable service users. Potential for litigation, financial loss or reputational damage.	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.	

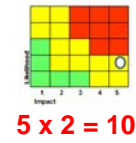| Risk 5	Risk Title - Adult and Child Protection (Continued)		Risk Theme – Protection	
Proposed Mitigations (with dates)		**Status**	**Progress Bar**	
1. Develop and implement the quality assurance framework within commissioning, building on COVID-19 additional measures and the work of the Care Home Oversight Group (31.03.22)		✔	100% *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)		✔	100% *Increased from 80%*	
3. Recruitment to strengthen commissioning and Chief Officer Social Work teams (31 .03.22)		✔	100% *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)		▶	80% *Increased from 20%*	
5. The ADP Is developing a framework in relation to risk around drug related deaths (31.12.22)		▶	90% *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)		▶	85% *Increased from 65%*	
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				
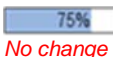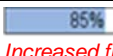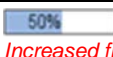
Risk 6			Risk Title - Public and Employee Protection			Risk Theme – Protection

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	1. There is a risk of failure to provide the agreed standards of protection to the Public and Council Employees in line with Scottish and UK Government and Health and Safety Executive legislation and guidance. 2. There is a risk that health & safety risk assessments in some areas may not currently identify adequate mitigations to 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 reduce response to fire alarms will impact people safety and property protection.	Legislative / SG Guidance change and ambiguity. Budget constraints across Services. Ambiguity around responsib-ilities or inconsistent application of policy. Lack of training.	Accident, 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 Mitigations (with dates)	Status	Progress Bar
1. Review and refresh a range of health and safety policies, guidance, sample risk assessments and work procedures. Development of new online health and safety training modules for managers / employees. (March 2023)	▶	20% *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).	▶	75% *No change*
3. All duty holders / building managers monitoring and updating outstanding H&S actions via Pentana (March 2023)	▶	85% *Increased from 80%*
4. Utilise self-evaluation method to ensure all Services have identified significant hazards and fully developed their H&S risk assessments – (Internal Audit Action). (ongoing).	▶	75% *Increased from 60%*
5. Working with SFRS to agree alternative solutions to non-attendance of Fire Appliances following automated alarm signals. Action Plan prepared and progressing (March 2023)	▶	50% *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	There is a risk of failure to meet climate change duties, reduce emissions and also support the community to adapt and mitigate risks in relation to climate change. Risk of failure to ensure a just transition and a green recovery.	Services do not necessarily recognise the role they need to play, lack of input and accountability by services leaving key areas inadequately addressed. Decisions and infrastructure while meeting short term goals are currently not fit for the future. Actions in place are currently not fully coordinated across services.	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**	1. Council approved Climate Change Strategy 2. Baseline data on Sustainable Development and Climate Change now assembled to allow future progress to be measured. . 3. Proposals endorsed by the MOWG now agreed at Leadership Panel and assigned for implementation. 4. Carbon budgeting system in place.	

Proposed Mitigations (with dates)						Status	Progress Bar
1. Fully implement Climate Change Strategy (target date 2024, at which point strategy will be reviewed). Mid term review to be undertaken in summer 2022 to ensure delivery of strategy outcomes in a changed landscape, increased national targets and new national duties.						▶	50% *No change*
2. Introduce a mechanism for cross cutting implementation of Strategy by embedding within Council policy making, as well as service planning. (revised to December 2021)						⚠	30% *Increased from 15%*
3.Investigation of scope 3 accounting methodologies for council procurement emissions to complement existing carbon budgeting process. (December 2022)						▶	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)						⚠	10% *No change*
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)						⚠	20% *No change*
6.Assess the Council against Scotland's Adaptation Capability Framework and set out priority actions. (March 2023)						▶	10% *No change*
7. Adopt a green recovery communications plan and climate literacy training plan. (December 2022)						▶	50% *Increased from 20%*
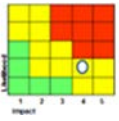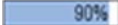
Risk 8			Risk Title - Ash Tree Dieback		Risk Theme - Protection
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**
Accountable – ELTResponsible- Asst Director Place

Risk Owner – Service Lead Neighbourhood Services | There is a risk of injury / damage to SAC residents and infrastructure as a result of Ash Dieback – a disease proliferating through SAC woodland. Disease has been identified and is spreading. | Principle cause is the spread of Ash Dieback throughout South Ayrshire /Scotland.

Neighbourhood Services is currently not resourced to manage the extent of Ash Die Back. | 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.Survey of trees within lands managed by Neighbourhood Services has commenced.

2.Communication with ARA has taken place and regular meetings have been set up.

3.An Ash Dieback Plan is currently being developed |

Proposed Mitigations (with dates)	**Status**	**Progress Bar**
1. 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.	▶	30%
Increased from 20%
2. On conclusion and approval of above mitigation, a Communication plan will be developed for South Ayrshire area. (December 2022)	▶	20%
Increased from 5%

Risk 9					Risk Title - Financial Constraints	Risk Theme - 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.	COVID-19 Strain on budget as a result of implementation of a range of measures to protect SAC residents and service users. UK and Scottish Government reductions in funding over a number of years. This is now more significant given the recent Scottish Govt Spending Review. Impact of inflation on Council cost base.	Incurring additional unbudgeted COVID-19 spend – strain on reserves. Failure to deliver key services or meet change in service demands.	**4 x 2 = 8**	1. Annual 2022/23 budget prepared and approved in March 2022. 2. Maintain pressure on Scottish Government to agree settlements which reflect Local Authority needs through participation in CoSLA groups. 3. A ten year Long Term Financial Outlook and three year Medium Term Financial Plan approved by Leadership Panel in October 2021. 4. Annual Treasury Management Strategy prepared, reviewed by A&G panel and approved by Council March 2022. Details credit and counterparty risk. 5. Treasury Management Practices (TMP's) updated annually to reflect Treasury risk such as credit and counterparty risk management, liquidity risk management , interest rate risk management and exchange rate risk management. 6. Covid-19 - Appropriate financial control and authorisation mechanisms remain operational and robust budgetary control maintained to ensure appropriate monitoring of spend 7. Covid-19 - cash reserves remain sufficient to meet immediate cost impact in tandem with SG previous funding announcements. 8. Covid-19 - Initial COVID-19 cost impact assessment through Cost submission to CoSLA – resulted in additional SG funding allocations. 9. Covid-19 – Considerable Scottish Government funding utilised to offset direct Council cost impact/loss of income in 2020/21 and 2021/22. 10. Covid-19 - significant business support package previously put in place by Scottish Government to mitigate impact on business community and community in general. 11. Covid-19 Programme of Recovery Activity 2021/22 to 2022/23 report approved by LP in June 2021 – providing resources (funded by Covid-19 reserves brought forward and 2021/22 SG funding) to meet ongoing impact of pandemic on Council Service provision. 12. 2022-23 Budget approved in March 22 included Covid-19 budgets for continuing loss of income and service expenditure funded from Covid-19 reserves rolled over from 2021-22.	

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).	▶	90% *Increased from75%*
2. Rolling annual update of three year Medium Term Financial Plan to be implemented (next update due October 2022)	▶	20% *New*
3. Bi annual update of ten year Long Term Financial Outlook to be implemented (next update due October 2023)	▶	0%

Risk 10		Risk Title – Workforce Planning				Risk Theme - Resources
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current 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. Reliance on specialist or external organisations and contractors. Limited succession planning	 *3 x 3 = 9*	1.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. 2. A Corporate Working Group has been established (June 2022) to develop a workforce plan for 2022-25 that links to the Council's strategic priorities and improvement areas in relation to Best Value.	
Proposed Mitigations (with dates)					**Status**	**Progress Bar**
1. Develop a workforce plan for 2022-25 that links to the Council's strategic priorities and improvement areas in relation to Best Value. (December 2022)						50% *New*
2. The Corporate Leadership team will ensure consistent use of an agreed workforce planning template across services. (December 2022)						50% *New*

Risk 11		Risk Title – ICT Digital Resilience, Protection and Capability			Risk Theme - Resources
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**
Accountable – ELT Responsible - CLT Risk Owner – Service Lead - ICT	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 place with dual data centres, duplicated network communication paths, internet links, and server hardware 2. External contracts established with service providers for technical support and expertise across critical technologies. 3. Existing Disaster Recovery Plan (DRP) in place for critical systems. Discussions remain ongoing with the NHS, EA and SA with regards to potential cross organisation data centre disaster recovery opportunities. 4. A bespoke ICT Risk Register in place, which is subject to review as part of standard operating practice. 5. The Integrity Group meets regularly to consider cyber security issues and develop further mitigations as required. 6. Compliance standards established as part of technology and process governance framework.

Proposed Mitigations (with dates)	Status	Progress Bar
1. Live services will be moved to McCall's Avenue Data, which has enterprise facilities management services, with County Buildings being used for resilience purposes (Dec 2022)	▶	85% *Increased from 10%*
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.	▶	60% *No change*
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)	▶	75% *Increased from 50%*
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.	▶	85% *No change*
5. ICT Asset Management function being established to ensure currency of technology assets is maintained. Rolling replacement plans are in place for a number of technology towers. Works to formally document an asset management plan now scheduled for completion by Dec 2022 and will be documented in the 2021/22 ICT Service Improvement Plan. Works delayed due to pandemic.	▶	95% *Increased from 90%*

Risk 12		Risk Title – Management of Assets				Risk Theme - Resources
Ownership	**Potential Risk**		**Cause**	**Potential Effect**	**Risk Score**	**Current Mitigations**
Accountable – ELT Responsible - CLT Risk Owner – Service Leads – Asset Management and Professional Design Services	1.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. 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 achieve some of the outcomes detailed in the Council's Sustainable Development and Climate Change Strategy.		COVID-19	Impact on efficient recovery of Council services. Failure to deliver Asset Management Plan. Project delay or additional costs. Adverse incidents and compliance failure. Damage to Council's reputation.	**3 x 2 = 6**	1. SAC Recovery Plan developed which provides a prioritised list of returning Services / Premises and is subject to Chief Officer Recovery Group approvals. 2. Property Project Team appointed to progress building assessments, agree occupancy levels and implement required physical reconfigurations within Council operational premises. 3. Professional Design Services to continue to monitor construction costs and contractor's ability to progress and deliver works. 4. Design work on energy projects has continued to ensure that some projects were able to commence once Scottish Government restrictions were eased.

Proposed Mitigations (with dates)	**Status**	**Progress Bar**
1. Property Project Team continue to work with the Future Operating Model Implementation Group to ensure recovery to offices in line with new working arrangements is achieved. (Sept 2022)	▶	50% *Increased from 25%*
2. Review Asset Management Plan (AMP), consult with stakeholders and Chief Officers prior to submitting to Council for approval. (March 2022). The AMP was not reviewed in March 2022. It requires to take into account the Transforming our Estate Report and Future Operating Model. A new proposed date for the review of the Asset Management Plan (Land and Buildings) is March 2023.	▶	30% *Increased from 25%*
3. There is a commitment to fully review the General Services Capital programmes (March 2022). The General Services Capital Programme was reviewed as part of the Council's budget setting process, resulting in a new 12 year capital plan being approved by South Ayrshire Council on the 3rd March 2022. Ongoing review will take place through quarterly monitoring reports to Cabinet.	▶	50% *New*
4.A number of Energy projects have commenced, whilst design work for future projects is also continuing (April 2022)	▶	40% *Increased from 25%*

Guidance - Recording Risks

Risk No. x			Risk Title - xxxxx		Risk Theme – Resources / Protection / Governance	
Ownership	**Potential Risk**	**Cause**	**Potential Effect**	**Risk Score**	**Current 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?	$3 \times 3 = 9$	What is already in place to manage the risk?	
S		**A**	**M**	**P**	**L**	**E**

Proposed 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>	▶	33% _Increased from…?_

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		
Governance	Protection	Resources
Risk Rating		

Impact	x	Likelihood	
1	Minor	**1**	Unlikely
2	Moderate	**2**	Possible
3	Major	**3**	Likely
4	Critical	**4**	Very Likely
5	Catastrophic	**5**	Almost Certain

Fig 3	**Status**
✔	Completed
▶	On Target
⚠	Not on target – some concerns
⬡	Not on target – major concerns
⚙	Not yet started

15