

READING BOROUGH COUNCIL

HEAD OF FINANCE

TO:	AUDIT & GOVERNANCE COMMITTEE		
DATE:	8 JULY 2015	AGENDA ITEM:	6
TITLE:	STRATEGIC RISK REGISTER		
LEAD COUNCILLOR:	JO LOVELOCK	PORTFOLIO:	FINANCE
SERVICE:	FINANCE	WARDS:	N/A
LEAD OFFICER:	PAUL HARRINGTON	TEL:	9372695
JOB TITLE:	CHIEF AUDITOR	E-MAIL:	Paul.Harrington@reading.gov.uk

1. EXECUTIVE SUMMARY

- 1.1 The primary purpose of this report is to update the Audit & Governance Committee on the Q1 status of the Council's 2015/16 Strategic Risk Register, in line with the requirements of the Council's risk management strategy.
- 1.3 The Council Management Team (CMT) maintains the Register on behalf of the Council, with the assistance of the Council's Chief Auditor.
- 1.4 The Register is reviewed on a quarterly basis by CMT.
- 1.5 The Register is presented to the Council's Audit & Governance Committee a minimum of six monthly or quarterly in the case of any risks where the position has worsened or for residual red risks where the Audit & Governance Committee shows a particular interest. It was last presented to the Committee in Apr 15.
- 1.6 The following documents are appended:
- Appendix 1 - 2015/16 Q1 Strategic Risk Register.
Appendix 2 - Risk scoring guidance

2. RECOMMENDED ACTION

- 2.1 The Audit & Governance Committee is requested to consider the Q1 status of the Council's 2015/16 Strategic Risk Register.

3. BACKGROUND

3.1 The revised Strategic Risk Register as at Jun 2015 (Q1) is reproduced at appendix 1. Arrows are used to indicate direction of change in any scores since the previous quarter.

3.2 The following key points should be noted to aid understanding:

↑↓ have been used to indicate movements in the net (residual) risk scores since the previous quarter, where a → is shown no change has occurred.

A "mitigation" column has been added for each risk so as to provide a summary of the mitigating (controls) actions in place to minimise risk.

3.3 Members are reminded that although guidance is provided to officers in relation to the scoring of risks, with a view to providing as much consistency as possible, it still remains very much a subjective process. The primary aim of this report is to identify those key vulnerabilities that the officers consider need to be closely monitored in the forthcoming months and, in some instances, years ahead. In many cases this will be because the risk is relatively new and, whilst being effectively managed, the associated control framework is yet to be fully defined and embedded. In such circumstances it follows that not only will the potential impact be large, but the risk of likelihood of occurrence could also be increased. Furthermore, it is possible that the likelihood can be influenced by events outside of the Council's control e.g. the economic climate and its impact on financial planning, or severe weather etc.

3.4 Directorate level risk registers generally only contain risks whose impact would not be felt wider than the directorate to which they belong should they materialise and are managed within the directorate.

3.5 The Strategic Register is compiled from risks identified at directorate level, which have been escalated along with high-level generic risks, which require strategic management. Entries within the Register reflect the risks identified by the Council Management Team thereby strengthening their strategic perspective, management response and controls.

3.6 The inclusion of risks within any level of risk register does not necessarily mean there is a problem. On the contrary, it reflects the fact that officers are aware of potential risks and have devised strategies for the implementation of mitigating controls.

3.7 Each entry within the register is scored to provide an assessment of the residual level of risk. All risks have been scored based on an assessment of their impact and likelihood. These assessments are made at two points, before any actions are in place (inherent risk) and after identified controls are in place (residual risk).

3.8 Whatever level of residual risk remains, it is essential that the controls identified are appropriate, working effectively and kept under review.

3.9 Plans are in place to mitigate the risks identified in the Strategic Risk Register.

4.0 CONTRIBUTION TO STRATEGIC AIMS

- 4.1 Risk management underpins all aspects of the council strategic aims.
- 4.2 The risks within the risk registers are directly linked to the projects and work streams that are in place to deliver the strategic aims.
- 4.3 Budget risks directly influence all strategic aims.

5.0 COMMUNITY ENGAGEMENT AND INFORMATION

- 5.1 Risk management is an internal management process that is open to scrutiny from councillors and the public at the Councils Audit and Governance Committee meetings.

6.0 LEGAL IMPLICATIONS

- 6.1 Local Government Acts 1999 and 2000 established a requirement of performance improvement in modernised local government. Risk management is an important element in ensuring that service delivery objectives are achieved.

7.0 FINANCIAL IMPLICATIONS

- 7.1 There are none associated with the recommendations in this report. The work recommended will be met from existing budgets.

8.0 BACKGROUND PAPERS

- 8.1 Council's Risk Management Strategy.
- 9.2 Delivering Good Governance in Local Government - Framework, CIPFA/ Solace 2012.
- 9.3 The Accounts and Audit Regulations 2011

Reading Borough Council

Strategic Risk Register Q1 2015/2016

Date of Review: June 2015

Date of next review: September 2015



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1	Budget risk: Unable to deliver services within the resources available to the Council to meet obligations and service standards, including keeping the current year's budget within the approved budget framework	5	5	25	<ul style="list-style-type: none"> Continuous development of a budget strategy and budget options to reduce spending by approximately £28m over the 3 years to 2017/18 by February 2016 Budget options to be presented to committee in July and the autumn to make savings Directorates are required by the budget framework to bring forward mitigating measures where practical to address adverse budget variances - at each budget monitoring 	IW IW Direct ors	4	4	16	→	IW/A C
2	Procurement & Commissioning: Creation and development of commissioning plans becoming disjointed and having conflicting priorities;	4	4	16	<ul style="list-style-type: none"> Corporate procurement board developing clear remit for governance and oversight of high risk procurements Board to develop a framework for delivery greater consistency in procurement practice WF Scoping by September Corporate group has joined national 'Commissioning Academy' programme and will develop from this an agreed corporate approach to commissioning including clear links to service strategies and plans BD/JL First draft Sept15 Updating register of major contract/tender procurement dates and phased implementation of new online contract management system JL First phase completion Sept 15 Identify issues and develop proposals to address shortfalls in capability and capacity to enable effective delivery BD/JL/LP July 2015 	WF BD/JL	4	3	12	↑	BD

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
3	Data Protection: Risk of breach of data by inadequate data handling and not adequately	5	4	20	<ul style="list-style-type: none"> Ongoing corporate training programme for data protection, raising awareness with staff groups of the need to handle personal data securely and properly during 2015/16 Need identified to roll out training corporately and 	CB/SK	3	4	12	→	CB

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	preventing and minimising security incidents, including ICT incidents, resulting in loss of data, unlawful sharing of data, reputational damage and significant financial penalties levied by the Information Commissioner's Office.				<p>introduce e-learning refresher training module</p> <ul style="list-style-type: none"> ▪ Need to test application of training by officers ▪ Incident management procedures mitigate loss or breach of data ▪ Need identified to update data protection suite of policies ▪ Need identified to provide for an information governance officer reporting to Sonal Khimji to assist with implementation of new policies and ongoing work advising officers ▪ Corporate ICT Security Policy implemented with clear audit trail ▪ BeCrypt Implementation and encrypted USB Stick Introduction provide seamless encryption on Council ICT equipment ▪ Increased Secure Email roll-out ▪ Policy Revision to be agreed (all by March 16) 						
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Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
4	<p>Property Risk - Corporate Property</p> <p>Failure to maintain the fabric and services of buildings resulting in injury to individuals and/or non-compliance with relevant legislation or unavailability</p>	5	5	25	<ul style="list-style-type: none"> • The comprehensive review of assets has included a rolling program of condition surveys that has informed a prioritised program of works shortly to be approved and implemented. • Review of Building Management responsibilities to ensure that responsibilities are clear and adequate training is in place in relation to FLASH responsibilities 	GF / RP/ JS JS/ PE Corp H & S Team BD	4	4	16	➔	AB/GF

	of asset.				<ul style="list-style-type: none"> A number of Business Continuity plans require updating. Timetable agreed for the delivery of these plans. Project commenced looking a RBC staff accommodation in order to best utilise assets. Health and Safety project team reviewing 19 Bennet Road and Darwin Close Structural reports completed for priority areas of work. Immediate Health and Safety measures addressed. 	JS GB/ DENS senior mangers Property Services / service manager s					
5	Property Risk - Housing stock Failure to maintain the fabric of the structure, communal areas and services related to council's housing stock resulting in injury to individuals and or non-compliance with legislation	5	5	25	<p>Further actions (in addition to existing mitigation)</p> <ul style="list-style-type: none"> Develop Housing asset management strategy (to inform asset management plans and programmes); complete viability modelling to inform the strategy by Sept. Revised CDM (Construction, Design and management) H&S regulations - implementing processes to ensure clarity of client responsibilities; new project documentation and sign-off procedures by Sept. Legionella training for gas fitters and plumbers to enable them to test and dose our general needs housing stock in line with new guidance and regulations (annual test aligned with gas service). New procedures, risk assessment and policy by Sept Developing competency/role related training and induction plans for tradespersons/technical staff in Housing Building Maintenance by Sept. 	SG MF MF MF/ Corp H&S	5	2	10	NEW	SG

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
6	Safeguarding (children) Risk of death or injury to children, through inappropriate care or attention.	5	3	15	<ul style="list-style-type: none"> Routine audit process underway, reviewed monthly by HoS Deliver Children's Social Care Improvement plan with focus on improved record keeping, compliance with procedures and acting on poor performance indicators. Monitored monthly until complete by end of March 16 New Notification process for top ten high profile cases started on 15th June 2015 embed by March 16 External audit of case work, completes 22/6/2015, leading to practice improvements. 	RB SC RB RB	5	2	10	→	HM

7	Safeguarding (Adults) Risk of death or injury to young people or adults through inappropriate care or attention.	5	4	20	<ul style="list-style-type: none"> Suite of prevention/ awareness raising projects :- Re launch safe places JS Oct15, Safeguarding team to deliver a knowledge management package/ e learning and brief/present as required. SMCg+ EMcl Principal Social Worker role in place Safeguarding Adults Board to agree programme to embed Care Act duties SMCg -workshop June 15, action plan Nov 15 Ensuring robust procedures are reviewed, implemented, and staff trained, to facilitate a swift and effective response. WF by Sept 15 This to include Reviewed and published manuals and procedure guidance- SMCg- Sept 15 Case file audit to test rigour of recording practice and accessibility of records . MOR to report to DMT August 15 Workload management process and analysis kept up to date to ensure staff capacity to respond. MOR Sept15 RBC Action plan agreed and delivered with respect to infrastructure, practice and partnership working WF June 15 Complete Making Safeguarding Personal fully implemented MOR Jan 16 Dols procedure reviewed,(complete) staff trained, and performance recorded and reported with respect to timely, appropriate, proportionate response. MOR July 15 	WF	5	3	15	↑	WF
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Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
8	Failure to manage unexpected growth which leads to increased demand upon services- In particular Adults who fund their own care for whom Government has not yet announced regulations and guidance. looked after children.	4	4	16	<ul style="list-style-type: none"> Contingency plans developed by Oct 15 RP DACHS Risk register to be agreed by DMT July 15 Transformation Board to agree plans Sept 15 This to be reviewed once guidance is published (Oct 15) Analysing and refreshing forecasts to maintain level of understanding Develop capacity/demand modelling in children's services Regular financial and service monitoring 	HM	3	3	9	↑	HM

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9	Failure to manage demand for school places via availability & funding for additional requirements	5	4	20	<ul style="list-style-type: none"> • Programme underway to deliver 2500 more permanent school places with £61m budget. Monitored monthly to expected completion in Summer 2016. • External consultants checking forecasts with update due in Autumn 2015 	KM KM	3	3	9	→	HM
10	Poor performance on reducing the numbers of young people not in Education, Employment or Training (NEET)	4	5	20	<ul style="list-style-type: none"> ▪ Action plan developed and monitored monthly with target to reduce level of NEET to below 5% this year ▪ Redefine contract with Adviza to ensure 100% of NEET young people are engaged with appropriate services, complete by end of June 2015. ▪ Re-establish NEET operational group, led by new 14-19 Advisor to ensure every young person has an appropriate plan to become EET. Monitored monthly by HOS. 	ZH KM KM	3	3	9	NEW	HM
11	Failure to close the gap in school attainment	4	5	20	<ul style="list-style-type: none"> ▪ Consulting with schools about a new Raising Attainment Strategy to become operational in September 2015. ▪ Develop a partnership with schools which enables the delivery of school to school support during academic year 2015/16 ▪ Develop an action plan to raise the attainment of Black heritage young people following the system review by external consultants. Plan due by end of June 2015 	KM KM KM	3	4	12	→	HM

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
12	Ensuring that staff comply with corporate policies and procedures and that they are appropriate to support people in their day-to-day work	4	4	16	<ul style="list-style-type: none"> ▪ Review of all policies and procedures completed ▪ New Policy and procedures approach to be introduced ▪ Phased programme of updates to be agreed ▪ Audit review implementation 	IW - Jul Nov	3	4	12	→	IW
13	Safeguarding Closure, poor performance of private or third sector providers	4	5	20	<ul style="list-style-type: none"> ▪ Market Failure strategy developed and published by Dec 15 BD ▪ Monitoring reports to 1/4ly performance review-BD ▪ Review contingency plans at local and sub-regional level ▪ Ensure sufficient capacity available to develop and monitor 'improvement plans' by provider ▪ Liaison with CQC and MONITOR on understanding/knowledge of quality issues at local level 	WF	4	3	12	→	WF / HM

					<ul style="list-style-type: none"> Develop market position statement 						
14	Changes in the way children with special needs (SEN) are identified and catered for, including personal budgets, and fewer children labelled as having SEN in the biggest change to the system for 30 years.	5	3	15	<ul style="list-style-type: none"> Develop further the Special Educational Needs (SEN) Strategy to enable special schools to meet the needs of children and young people with higher levels of need. Schools Forum task and finish group to make recommendations in July for consideration and action to reshape the current budget for 2015/16 Develop accurate benchmark information with 'good' authorities via ADCS group, first meeting in September. 	KM KM KM	3	3	9	→	HM
15	Impact of the Care Act on adult social care services including increased numbers of assessments, additional duties to carers, deferred payment system and risk of the new system being underfunded by Government	5	3	15	<ul style="list-style-type: none"> Establish governance through programme Board WF July 15 Establish clear work-streams and programme leads July 15 Regular reporting to CMT on progress Complete financial modelling work Sept15 RP Ensure health partners are aware of the challenges that the Care Act poses and the impact on their services WF report to Integration Board monthly Coms plan to be developed Sept 15 Regular reporting of Care Actwork stream to CMT & ACE 	MO	4	2	8	→	WF

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
16	Impact on staff resilience (stress and motivation) of Reshaping and change generally.	4	5	20	<ul style="list-style-type: none"> 'Take the Temperature' through staff surveys and focus groups (Sep) Ensure that managers are carrying out 1:1's, appraisal and team meetings at a local level (Nov); Ensure that managers know how to measure stress and carry out surveys of staff (Nov) 	CB/WK	3	4	12	→	CB

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17	Impact of the Better Care Fund on health and social care economy, including the Council's savings plans and overall integration agenda	4	4	16	<ul style="list-style-type: none"> Agree work programme and targets complete Agree and review milestones Clarify resource required-Nov15 Evaluation and workshop -MOR ready to present Sept 15 Work with health partners to deliver targets established in the plan Risk sharing agreement with the Berkshire West LAs and the CCG to ensure the BCF funding is released to support the delivery of the projects and to ensure Adult Social Care is supported by the BCF funding Encourage neighbouring local authorities to develop shared principles around the integration agenda Maintain sufficient capacity within the Council to deliver system change (All during 1516 complete by March 16) 	WF	3	3	9	→	WF
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Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
18	Homelessness: Increasing number of people becoming homeless and placing additional financial pressure on the Council to provide temporary accommodation (including B&B).	4	5	20	<ul style="list-style-type: none"> Temporary accommodation: complete refurbishment of Wensley Rd block and let units by July. Develop a more commercial offer to landlords - extending the Council's Deposit Guarantee Scheme to include rent guarantee following extensive landlord consultation and an independent review - to increase the numbers of quality-assured private rented sector homes available to households who are homeless and at risk of homelessness. Launch September Appraise further options to source additional cost effective solutions to meet the demand for safe and adequate emergency accommodation and mitigate the growing pressure on the B&B budget and improve outcomes for families. (by September) 	ZW BH SG/ Finance	3	4	12	↓	SGee

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					<ul style="list-style-type: none"> Develop an action plan which draws on best practice in other authorities in prevention and early intervention to prevent homelessness, working across partner agencies and staff disciplines. (by June) Implementation of action plan by October Develop training for staff cross sector and make 'every contact count'. 	BH					
19	Failure to provide suitable accommodation for young people leaving care	4	5	20	<p>Developing protocol between CSC and Housing to improve outcomes for 16-17 year old deemed homeless. By 31st July</p> <p>In negotiation to commission six places dedicated beds by end of July 2015.</p>	AF/SG BD/AF	4	2	8	NEW	HM/SC

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
20	Health & Safety Training has not been completed by staff and managers leading to a risk of injury and litigation.	4	4	16	<ul style="list-style-type: none"> Audit of health and safety training to identify gaps. Review of numbers who have completed Level 1 to ensure accuracy and programme of training to be agreed. System to be agreed to monitor training and refreshers. Training action point on Corp H&S Action Plan Audit template updated to gather training data from services - will require on going monitoring throughout the year 	RP Corporate H&S Team	4	3	12	NEW	GF/RP
21	That the Council gets an "inadequate" judgement in an Ofsted Inspection of Children's Services	5	4	20	<ul style="list-style-type: none"> Significant Reviews of services completed. Service Improvement Plan with focus on improved record keeping, compliance with procedures and acting on poor performance indicators. Monitored monthly until complete by end of 2015/16 LAC Sufficiency Strategy in implementation Robust case supervision process with monthly auditing in place. Diagnostic Review of Adoption currently being planned. 	RB RB RB	5	3	15	NEW	SC

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22	That the Council gets an "inadequate" judgement in an Ofsted Inspection of School Improvement	5	4	20	<ul style="list-style-type: none"> Consultation on Raising Attainment strategy underway to develop a new way of working Self-evaluation against latest inspection framework is underway to develop service action plan. To complete by 22nd July. 	KM KM	5	3	15	NEW	SC
23	That the Council has insufficient focus on identifying, preventing, disrupting and hence protecting children at risk of sexual exploitation	5	3	15	<ul style="list-style-type: none"> CSE Strategy across the Council and with partners developed and shared. Done. Monthly partnership meetings (SEMRAC) established to progress case issues and develop practice. Done. MASH to monitor all incoming referrals for CSE indicators, in place by end of July Improve follow up response to SEMRAC cases through improved coordination across teams. In place by end of August 2015 Screening all children who go missing July 2015 Visits to hotels, accommodation and taxi/private hire checks underway Improve rate of return interviews for children who go missing to at least 50% by the end of July 	RB RB KJ DENS AF	5	2	10	NEW	SC

Risk ref no	STRATEGIC RISKS	Inherent risk			Mitigation	Action owner and due date	Residual risk				
		IMP	LH	Score			IMP	LH	Score	DoT	Risk Owner
24	Failure to recruit permanent social work staff within the next 6 months and adequately develop the mix of experience and balance in the workforce over the next 3 years, limits the ability to deliver outcomes	5	3	15	<ul style="list-style-type: none"> New recruitment strategy for agency social workers underway from April 2015 Talent Acquisition strategy being implemented for permanent recruitment Reading offer is widely publicised Create links with local universities to promote Reading Borough Council as an employer Convert good interim staff to permanent 	AP/ SC	3	2	6	NEW	HM/SC
25	Failure to manage the growth in landfill waste tonnage, and the resultant increased pressure on the Councils budget	4	2	8	<ul style="list-style-type: none"> Waste Minimisation Strategy adopted and being implemented. Neighbourhood working launched to help implement the Waste Minimisation Strategy. Strategic Waste Manager and a communications officer appointed to refocus Re3 partnership outcomes. 	MS	2	2	4	→	MS

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26	Failure to have sufficient available resources to fund the capital programme	4	3	12	<ul style="list-style-type: none"> ▪ Only approving new schemes for which resources are available ▪ Robust programme management to mitigate the risk of unforeseen overspends (Monthly Monitoring) ▪ Developing a programme of asset disposals to release capital receipts (by Autumn) ▪ Prudential Code limits to constrain uncontrolled borrowing (in place) 	AC In Annual Treasury Strategy AB/GF	3	2	6	NEW	AC
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APPENDIX B

Likelihood	Almost Certain (Above 95%)	5	10	15	20	25
	Highly Likely (Above 75%)	4	8	12	16	20
	Likely (Above 40%)	3	6	9	12	15
	Possible (above 10%)	2	4	6	8	10
	Rare (Less than 10%)	1	2	3	4	5
		Negligible	Slight	Moderate	Critical	Catastrophic
Impact						

- Political
- E-risks
- Regulatory
- Financial/Fraud
- Opportunities
- Reputation
- Management
- Assets
- New Projects/Partnerships
- Customers/Citizens/Clients
- Environment

TYPES OF RISKS

Likelihood

Description	Example Detail
Almost certain (above 95%)	Has happened in the past 6 months; or Is expected to happen in the next 6months More than 95% probability
Highly Likely (above 75%)	Has happened in the past 6months to 2.5 years Is expected to happen in the next 6months to 2.5 years Between 75% to 95% probability
Likely (above 40%)	Has happened in the past 2.5 to 6 years Is expected to happen in the next 2.5 to 6 years Between 40% to 75% probability
Possible (above 10%)	Has happened in the past 6 to 10 years Is expected to happen in the next 6 to 10 years Between 10% to 40% probability
Rare (less than 10%)	Has happened in the past 10 years or more; or Is expected to happen after 10 years or more Between 1% to 10% probability

Impact

Description	Impact Type	Example Detail
Catastrophic	H&S	Death or life threatening
	Service Delivery	Loss of service for more than 5 days Impacts on vulnerable groups Affect the whole council
	Reputation	Negative sustained <u>national</u> publicity, resignation or removal of CE, Director or elected member.
	Environmental	Major damage, long term contamination to local area
	Legal	Legal action almost certain and difficult to defend, Catastrophic breach of duty resulting in imprisonment
Financial	Financial impact not manageable within existing funds and requiring Member approval for virement or additional funds i.e. in excess of £1,000,000 Or >15% of monthly budget	
Critical	H&S	Extensive, permanent/long term injury or long term sick
	Service Delivery	Loss of service 3 to 5 days Possible impact to small numbers of vulnerable people, definite impacts on property or non-vulnerable groups Affects most directorates
	Reputation	Negative <u>national</u> publicity
	Environmental	Serious damage, medium term contamination to local area
	Legal	Legal action expected, Significant breach of duty resulting in fines/disciplinary action
	Financial	Financial impact manageable within existing Directorate budget but requiring Director and Head of Finance approval for virement or additional funds i.e. between £500,000 and £1,000,000 Or >10% of monthly budget
Moderate	H&S	Injury, lost time, Short term sick absence
	Service Delivery	Loss of service 2 to 3 days Impacts to non vulnerable groups, Affects a single directorate
	Reputation	Negative sustained <u>local</u> publicity, High proportion of negative customer complaints
	Environmental	Moderate impact, to short term contamination to local area
	Legal	Legal action possible Moderate breach of duty resulting in disciplinary action
	Financial	Financial impact manageable within existing Directorate budget but requiring Director and Head of Finance approval for virement or additional funds i.e. between £250,000 and £500,000 Or >5% of monthly budget
Slight	H&S	Injury - no lost time
	Service Delivery	Loss of Service 1 to 2 days Impacts to non vulnerable groups Affects 1 or a few services of the council
	Reputation	Negative <u>local</u> publicity
	Environmental	Minor impact, short term contamination
	Legal	Legal action unlikely Minor breach of duty resulting in disciplinary action
	Financial	Financial impact manageable within existing service budget but requiring service manager approval for virement or additional funds i.e. between £50,000 and £250,000 Or >2% of monthly budget
Negligible	H&S	Incident - no lost time
	Service Delivery	Brief disruption, less than 1 day Impacts to non vulnerable groups Affects a project
	Reputation	Minor adverse local publicity
	Environmental	Local incident would be dealt with immediately with minimal impact
	Legal	Legal action unlikely Localised service level deviation from duties
	Financial	Possible financial impact manageable within service budget i.e. less than £50,000 Or > 1% of monthly budget