Ref	Risk Description	Inherent Risk			Mitigation required	Residual Risk			DoT	Risk
No.		IMP	LH	SCORE	witigation required	IMP	LH	SCORE		Owner
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	Agreement of further in year 2016/17 savings - a savings package is to be presented to policy Committee Budget monitoring and identification of mitigating actions for adverse variances. Implement agreed savings - monitoring report to committee includes RAG update Budget options identified for future years and revised policy approaches developed with administration - options b/f for decision in a timely manner in July, autumn and February. Develop a draft 5 year "efficiency plan" (to be known as a Financial Sustainability Plan) to be submitted (subject to agreement) to government by 14 th October 2016 in return for a multi-year funding settlement which is intended to give more certainty for financial planning purposes.	5	4	20	*	SW/AC

Ref	Risk Description	Inherent Risk			Mitigation required	Re	esidua	DoT	Risk	
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2	Data Protection: Risk of breach of data by inadequate data handling and not adequately 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.	5	4	20	Ongoing corporate training programme for data protection, raising awareness with staff groups of the need to handle personal data securely and properly during 2016/17 Roll out training corporately and refresh yearly 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 SK (legal) to assist with implementation of new policies and ongoing work advising officers. First attempt to recruit failed following preferred candidate withdrawing from process. New advert due out in May, agency worker (temp) being sought. Policy Revision to be agreed Information Asset Owners need to be identified and trained. Date for training set for 12 July	3	4	12	→	СВ

Ref	Risk Description	Inherent Risk			Mitigation required	Residual Risk			DoT	Risk
No.		IMP	LH	SCORE	witigation required	IMP	LH	SCORE	DOT	Owner
3	Property Risk - Failure to maintain the fabric and services of buildings resulting in injury to individuals and/or noncompliance with relevant legislation or unavailability of asset.	4	4	16	The comprehensive review of assets has included a rolling program of condition surveys that has informed a prioritised program of works. The initial program has been implemented and report is to be presented to July Policy Committee in relation to the work completed and revised programme for 16/17. Proactive planning monitored on a monthly basis by Land and Property Group. Review of Building Management responsibilities to ensure that responsibilities are clear and adequate. Action Plan developed and overseen by Corporate Risk Group. New Building Managers' guide published and rolled out to staff Training is in place in relation to FLASH responsibilities. Annual audit of FLASH items in high risk properties A number of Business Continuity plans have been updated. Timetable agreed for the review of plans. Review of staff accommodation and asset disposal proposals to be presented to July 2016 Policy Committee seeking to rationalise estate and reduce the number of properties. Review commenced to audit other 'structures' in the estate which may not be picked up under compliance and condition surveys such as floodlighting columns etc.	4	3	12	→	AB/GF

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4	Safeguarding (children). Risk of death or injury to children, through inappropriate care or attention.	5	4	20	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. New Notification process for top ten high profile cases Ensure that Assessments are recorded, timely and accurate External audit of case work, leading to practice improvements.	5	3	15	→	HM

Ref	Risk Description	Inherent Risk			Mitigation required	Residual Risk			DoT	Risk
No.		IMP	LH	SCORE	Mitigation required	IMP	LH	SCORE	וטט	Owner
5	Safeguarding (Adults) - Risk of death or injury to young people or adults through inappropriate care or attention. Risk 5 continued	5	4	20	Safeguarding team continues to deliver training at L1. Workshops for social care staff, learning lunches and attend team meetings. Levels 2 & 3 face to face safeguarding training has been re commissioned with training dates throughout the year. Risk Enablement Panel (REP) is a panel for staff to take high risk and complex cases for discussion. REP is currently being reviewed to make this a multi-agency approach for all high risk complex work, with input from TVP, Drug and Alcohol services, and other key agencies. 20% of Safeguarding cases are audited each month using an audit tool agreed by the Safeguarding Adults Board. Further ongoing work identified for Mental Health Services regarding reporting through the statutory safeguarding process as well as the trusts internal service. (DATEX). A further risk transpired related to fire related deaths. This has been both a local and national issue. We have worked with the fire service to provide awareness training for those who provide care both internally and through agencies. PAN Berkshire P&P were launched on 1st April 2016. Local Guidance and further procedures/pathways are being developed.	5	3	15	→	WF

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6	Failure to close the gap in school attainment for pupil premium groups	4	5	20	Deliver targets within the Raising Attainment Strategy Develop a partnership with schools which enables the delivery of school to school support during academic year 2015/16	3	4	12	→	НМ
7	Impact on staff resilience (stress and motivation) of organisational change & budget reductions.	4	5	20	Ensure that managers are carrying out 1:1's, appraisal and team meetings at a local level Staff survey completed, action plan to be developed Publicise HR assessment and guidance on stress management. Staff to be reminded about the Employee Assistance Programme.	3	4	12	→	СВ
8	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	The Better Care Fund has been submitted and we await full assurance due from NHSE on 1st July 2016. Section 75 agreements are in place and accepted by CCG Boards and Health and Wellbeing Board. Submission to NHSE due 30th June 2016. This give legal and governance process of Commissioning programmes. RBC and CCG partners have business cases and project plans with individual risk logs which are closely monitored through Reading Integration Boards and quarterly reports to HWB. This is in line with peer review recommendations. In line with the integration agenda further reviews are being conducted throughout the year to identify further possibilities of efficiencies. This is conducted through joint commissioning plans and internal Programme structures.	3	3	9	\	WF

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9	Increasing number of people becoming homeless and placing additional financial pressure on the Council to provide temporary accommodation (including B&B).	4	5	20	Develop council owned housing company to acquire homes to rent including a proportion at sub-market rent (target of 100 properties per annum, pro rata 30% sub market rent). Agreed March Council. Commence trading in the Autumn 2016. Subject to Planning agreement develop temporary modular homes at Lowfield Rd. Planning application submission - July 2016. Procurement, off-site construction, on-site installation and completion by Jan 2017. Develop training for staff cross sector and make 'every contact count'. Marketing of Rent Guarantee Scheme. Review offer / landlord research to respond to changing market.	3	4	12	→	SG
10	Health & Safety Training has not been completed by staff and managers leading to a risk of injury and litigation.	4	4	16	Audit of health and safety training to identify gaps. Discussions with Learning and Development Team to agree a system to monitor training and refreshers. Report to A&G Committee July 2016 Training action point on Corp H&S Action Plan. New Action Plan drafted and to be formally agreed at next Corporate H&S Cttee. Plan to also be sent to A&G	4	3	12	→	CMT

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11	Data Protection: New data protection regulation "GDPR") due to come into force in 2018 introduces sweeping changes to the regulation of data protection Europe-wide. Risk that we are not prepared for the changes could result in a breach of the new regulation as soon as it is in force, attracting a fine of up to €1m	5	5	25	Plan to assess requirements of the new law, against backdrop of Brexit Information audit needing to be carried out Wholescale review of Privacy Notices Individual consent and processing requirements to be reviewed New data breach reporting mechanisms to be established Data protection impact assessments to be carried out	3	4	12	NEW	СВ
12	Failure to achieve EU framework Directive of 50% recycling by 2020 -	4	4	16	Waste Minimisation Strategy has been agreed Implementation of year 2 of the strategy in progress. New Service Standard for Waste Operations proposed for adoption July 16. Implementation of service change Schools recycling initiative Doorstepping and recycling bin contamination reduction scheme to carry on from June 16. Twice yearly Strategy update report to HNL Committee in March and November for years 1-5 of the Strategy.	4	2	8	NEW	MS