



GREAT YARMOUTH
BOROUGH COUNCIL

Audit, Risk and Standards Committee

Date: Monday, 11 December 2023

Time: 10:00

Venue: Council Chamber

Address: Town Hall, Hall Plain, Great Yarmouth, NR30 2QF

AGENDA

Open to Public and Press

1 APOLOGIES FOR ABSENCE

To receive any apologies for absence.

2 DECLARATIONS OF INTEREST

You have a Disclosable Pecuniary Interest in a matter to be discussed if it relates to something on your Register of Interests form. You must declare the interest and leave the room while the matter is dealt with.

You have a Personal Interest in a matter to be discussed if it affects

- your well being or financial position
- that of your family or close friends
- that of a club or society in which you have a management role
- that of another public body of which you are a member to a greater extent than others in your ward.

You must declare a personal interest but can speak and vote on the matter.

Whenever you declare an interest you must say why the interest

arises, so that it can be included in the minutes.

3 MINUTES

4 - 7

To confirm the minutes of the meeting held on 2nd October 2023.

4 MATTERS ARISING

To consider any matters arising from the above minutes.

5 WORK PROGRAMME

8 - 8

Report attached.

6 PROGRESS REPORT ON INTERNAL AUDIT ACTIVITY 2023/24

9 - 34

Report attached.

7 CORPORATE RISK REGISTER

35 - 49

Report attached.

8 ANY OTHER BUSINESS

To consider any other business as may be determined by the Chairman of the meeting as being of sufficient urgency to warrant consideration.

9 EXCLUSION OF PUBLIC

In the event of the Committee wishing to exclude the public from the meeting, the following resolution will be moved:-

"That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the following item of business on the grounds that it involved the likely disclosure of exempt information as defined in paragraph 1 of Part I of Schedule 12(A) of the said Act."



Audit and Risk Committee

Minutes

Monday, 2 October 2023 at 10:00

PRESENT:-

Councillor Carpenter (in the Chair), Councillor Capewell, Councillor Galer, Councillor Lawn, Councillor Newcombe, Councillor Stenhouse, Councillor Wainwright

Karen Sly (Executive Director – Resources), Kaye E. Bate (Corporate Risk Officer), Lorna Snow (Financial Services Manager), Debbie Hanson (EY), Andrea Krout (Democratic Services Officer).

1 APOLOGIES FOR ABSENCE

There were no apologies for absence given at the meeting.

2 DECLARATIONS OF INTEREST

There were no declarations of interest given at the meeting.

3 MINUTES

The Minutes of the meeting held on 17th July were confirmed. Item 9 , Annual Governance Statement 2022/2023, from that meeting was deferred to today's meeting as Item 6 on the agenda.

4 MATTERS ARISING

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There were no matters arising from the above minutes.

5 ANNUAL REPORT ON RISK MANAGEMENT ARRANGEMENTS

The Committee received and considered the report from the Corporate Risk Officer.

The Corporate Risk Officer reported that the report provided details of the key risk management developments during 2022/2023 for the Committee's review. The report would provide a significant source of evidence to enable the Committee to approve the Annual Governance Statement.

The Corporate Risk Officer reported that over the last year, the Corporate Risk Officer and the Management Team had undertaken further steps towards establishing the Risk Management Framework which together with the Council's culture, ensured effective and consistent risk management as an integral part of the authority's activities. Fundamental to the successful implementation of risk management was an adherence to the principles as set out within the framework. At the time of writing the report, there were no significant non-compliance issues to report with regards to corporate risk management

The Corporate Risk Officer identified the progress that had been made over the last year and outlined the Risk Management Arrangements Action Plan for 2023/2024.

The Corporate Risk Officer gave a reasonable risk rating overall.

RESOLVED:-

That the Committee noted and approved the annual report on the Council's Risk Management arrangements.

6 ANNUAL GOVERNANCE STATEMENT

The Committee received and considered the report from the Corporate Risk Officer, which had been deferred from the previous meeting.

The Corporate Risk Officer reported that GYBC has approved and adopted a code of corporate governance, which is consistent with the principles of the CIPFA/SOLACE Framework Delivering Good Governance in Local Government. This statement explains how GYBC has complied with the code and also meets the requirement of regulation 4(2) of the Accounts and Audit Regulations 2011 in relation to conducting a review of the effectiveness of its system of internal control.

The Corporate Risk Officer outlined the arrangements that are in place for ensuring good governance and the management of risk. The Annual Governance Statement has been informed by the Code of Corporate Governance and the assurance statements that are completed by members of the Management Team. It also recognises any gaps that were identified during 2022/2023 and the actions that will be taken to address these areas of concern during 2023/2024.

The AGS is for 2022/2023 and refers to the Committee form of Governance that was in operation at that time. In future there will be a move to the Cabinet and Scrutiny on the AGS and the associated governance arrangements.

The Annual Governance Report makes reference to the action plan for the previous year 2021/2022. Outstanding actions have been carried over, along with new actions for 2023/2024 and these are detailed in the report.

Over the coming year steps will be taken to address the matter identified in the report to further enhance the governance arrangements. These steps will address the need for improvements that were identified during the review of effectiveness and will monitor their implementation and operation as part of the next annual review

RESOLVED:-

That the Committee considered and approved the 2022/2023 Annual Governance Statement.

7 STATEMENT OF ACCOUNTS

A verbal update was given by the Executive Director-Resources and Debbie Hanson, EY.

The Executive Director – Resources reported that last year when the draft statements were presented to the Committee, there were still a few areas to be finalised including the VFM work which is still outstanding with further work ongoing.

The audit of the 2020/2021 financial statements is now complete. A number of adjustments have been made and these have all been agreed.

Three areas of significant risk were identified: management of the GYN contract, management of the Market Place redevelopment and issues regarding housing stock. The Council has subsequently taken action to address these issues.

The report was unable to be completed until the independent report had been received.

Councillor Wainwright queried whether the delay in the 2021/2022 financial statement would have an implication for fees.

Debbie Hanson advised that it would have an impact but she had worked with the council and it would have no impact on valuations.

The Executive Director-Resources advised that there was a significant backlog of audits nationwide which was a problem that needed to be addressed and recent proposals have been announced to address the backlog, although these have not been finalized.

In response to a question from the committee.

The Executive Director-Resources advised that a funding announcement was expected later this month. Funding is a challenging issue and painful decisions would have to be made. This would be considered internally and be brought back to the Committee at a later date.

The Chairman queried when this was likely to be.

Debbie Hanson advised that it was hoped plans on how to move forward would be ready by the end of October.

8 WORK PROGRAMME

The Committee received and considered the work programme for 2023/24.

RESOLVED:-

That the Committee note the Work Programme for 2023/24.

9 ANY OTHER BUSINESS

The Chairman reported that there was no other business being of sufficient urgency to warrant consideration at the meeting.

AUDIT AND RISK COMMITTEE – WORK PROGRAMME CURRENT		
11 December 2023	11 March 2024	TBC
Work Programme (Standing Item)	Work Programme (Standing Item)	Work Programme (Standing Item)
INTERNAL AUDIT		
Progress Report on Internal Audit Activity 2023/24	Progress Report on Internal Audit Activity 2023/24	Progress Report on Internal Audit Activity 2023/24
	Strategic and Annual Internal Audit Plan 2024/25	Report on the Status of Audit Recommendations
		Head of Internal Audit Annual Report and Opinion 2023/24
EXTERNAL AUDIT		
	2021/22 Audit Results Report - Final (subject to timing of audit)	
	Audit Plan Year Ending 31 March 2023	
	2020/21 Audit Results Report - Final*	
FINANCE		
	Statement of Accounts 2020/21 - Final*	
	Statement of Accounts 2021/22 - Draft	
		Statement of Accounts 2022/23 - Draft
RISK		
Corporate Risk Register		Corporate Risk Register
		Annual Report on Risk Management Arrangements 2022/23
		Code of Corporate Governance
		Draft Annual Governance Statement 2022/23

* Report together

Progress Report on Internal Audit Activity 2023/24 (Moved due to no HIAA)

Subject: INTERNAL AUDIT ACTIVITY - Progress and Follow Up

Report to: Audit and Risk Committee, 11 December 2023

Report by: Teresa Sharman, Head of Internal Audit for Great Yarmouth Borough Council

SUBJECT MATTER

This report examines progress made between 1 July 2023 to 30 November 2023 in relation to the delivery of the Annual Internal Audit Plan for 2023/24. The report also provides an update on the implementation of internal audit recommendations.

1. INTRODUCTION/BACKGROUND

- 1.1 This report reflects the completion of the audit reviews which are part of the annual internal audit plan of work, and any outstanding internal audit recommendations.

2. CURRENT POSITION OF THE ANNUAL INTERNAL AUDIT PLAN 2023/24 AND FOLLOW UP

- 2.1 The report provides an update on the final position in relation to the delivery of the Internal Audit Plan for 2023/24. An update on the implementation of internal audit recommendations is also shown within the attached report.

3. FINANCIAL IMPLICATIONS

- 3.1 The Internal Audit Plan is currently within the budget for 2023/24.

4. RISK IMPLICATIONS

- 4.1 Internal Audit planning starts with the Council's key risks, which then directs the audit plan for the financial year. Internal Audit reports then identify risk and control weaknesses within the Council, which are highlighted in this report, with appropriate management action being agreed to mitigate these risks within agreed timeframes.

5. CONCLUSIONS

- 5.1 The report contains a final update on progress against the Internal Audit Plan for 2023/24. An update is also provided to the Audit and Risk Committee on the implementation of internal audit recommendations.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Committee receives the progress update relating to the Internal Audit Plan for 2023/24 and receives the update on the Council's implementation of internal audit recommendations.

7. BACKGROUND PAPERS

Appendix – Internal Audit Progress and Follow Up December 2023.

Area for consideration	Comment
Monitoring Officer Consultation:	No
Section 151 Officer Consultation:	Yes
Existing Council Policies:	No
Financial Implications:	Covered within the report
Legal Implications (including human rights):	No
Risk Implications:	Covered within the report
Equality Issues/EQIA assessment:	No
Crime & Disorder:	No
Every Child Matters:	No

Eastern Internal Audit Services



Great Yarmouth Borough Council

Internal Audit Update – Progress and Follow Up

Period Covered: 1 July to 30 November 2023

Responsible Officer: Teresa Sharman – Head of Internal Audit for Great Yarmouth Borough Council

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1. INTRODUCTION

- 1.1 This report is issued to assist the Authority in discharging its responsibilities in relation to the internal audit activity.
- 1.2 The Public Sector Internal Audit Standards requires the Chief Audit Executive to report to the Audit Committee on the performance of internal audit relative to its plan, including any significant risk exposures and control issues.
- 1.3 To comply with the above this report includes:
 - Any significant changes to the approved Audit Plan;
 - Progress made in delivering the agreed audits for the year;
 - Any significant outcomes arising from audits; and
 - Performance indicator outcomes to date.

2. SIGNIFICANT CHANGES TO THE APPROVED INTERNAL AUDIT PLAN

- 2.1 Some investigative work has been agreed regarding the procurement processes of a contractor used within GY Norse which will start in January 2024.

3. PROGRESS MADE IN DELIVERING THE AGREED AUDIT WORK

- 3.1 The current position in completing audits to date within the financial year is shown in **Appendix 1**.
- 3.2 In summary, 126 days of programmed work have now been completed, equating to 45% of the revised Internal Audit Plan for 2023/24.

4. THE OUTCOMES ARISING FROM OUR WORK

- 4.1 On completion of each individual audit an assurance level is awarded using the following definitions:

Substantial Assurance: Based upon the issues identified there is a robust series of suitably designed internal controls in place upon which the organisation relies to manage the risks to the continuous and effective achievement of the objectives of the process, and which at the time of our review were being consistently applied.

Reasonable Assurance: Based upon the issues identified there is a series of internal controls in place, however these could be strengthened to facilitate the organisation's management of risks to the continuous and effective achievement of the objectives of the process. Improvements are required to enhance the controls to mitigate these risks.

Limited Assurance: Based upon the issues identified the controls in place are insufficient to ensure that the organisation can rely upon them to manage the risks to the continuous and effective achievement of the objectives of the process. Significant improvements are required to improve the adequacy and effectiveness of the controls to mitigate these risks.

No Assurance: Based upon the issues identified there is a fundamental breakdown or absence of core internal controls such that the organisation cannot rely upon them to manage

risk to the continuous and effective achievement of the objectives of the process. Immediate action is required to improve the controls required to mitigate these risks.

- 4.2 Recommendations made on completion of audit work are prioritised using the following definitions:

Urgent (priority one): Fundamental control issue on which action to implement should be taken within 1 month.

Important (priority two): Control issue on which action to implement should be taken within 3 months.

Needs attention (priority three): Control issue on which action to implement should be taken within 6 months.

- 4.3 In addition, on completion of audit work “Operational Effectiveness Matters” are proposed, these set out matters identified during the assignment where there may be opportunities for service enhancements to be made to increase both the operational efficiency and enhance the delivery of value for money services. These are for management to consider and are not part of the follow up process.

- 4.4 During the period covered by the report Internal Audit has issued three reports: -

Audit	Assurance	P1	P2	P3
GY2302 Procurement and Contract Management (Phase 2 of 2)	Limited	1	8	3
GY2417 Sports and Leisure	Limited	2	4	2
GY2415 Housing Needs, Allocations, Homelessness, Housing Register	Reasonable	0	4	2

The Executive Summaries of these reports are attached at **Appendix 2**, full copies of the reports can be requested by Members.

- 4.5 As can be seen in the table above and as a result of these audits 26 recommendations have been raised by Internal Audit. In addition, eight Operational Effectiveness Matters have been raised for management’s consideration.

5. FOLLOW UP OF AGREED AUDIT RECOMMENDATIONS

- 5.1 In addition to providing the Committee with the performance of internal audit relative to its plan, the Public Sector Internal Audit Standards also require the Chief Audit Executive to establish a process to monitor and follow up management actions to ensure that they have been effectively implemented or that senior management have accepted the risk of not taking action.
- 5.2 To comply with the above this report includes the status of agreed actions.
- 5.3 As a result of audit recommendations, management agree action to ensure implementation within a specific timeframe and by a responsible officer. The management action subsequently taken is monitored by the Internal Audit Contractor on a regular basis and reported through to

the Committee. Verification work is also undertaken for those recommendations that are reported as closed.

- 5.4 **Appendix 4** to this report shows the details of the progress made to date in relation to the implementation of the agreed recommendations. This appendix also reflects the year in which the audit was undertaken and identifies between outstanding recommendations that have previously been reported to this Committee and then those which have become outstanding this time round. A total of 46 recommendations are currently being monitored. Ten recommendations are not yet due for completion yet. Of the 36 which are outstanding, five are classified as a 'urgent priority', 22 as an 'important priority' and nine as 'needs attention'.
- 5.5 Recommendations relating to the audits listed below will be followed up by re-performing testing and confirming completion due to the significant risks raised. The recommendations from these audits are not included within the figures provided above.

Audit	Results	Re-testing scheduled
GY2222 – Housing Compliance	No Assurance 36 Urgent & 6 Important recommendations agreed.	Quarter 4 2023/24
GY2223 – Housing Voids	Limited Assurance 7 Urgent and 9 Important recommendations agreed.	2024/25

- 5.6 **Appendices 5, 6, 7 and 8** provide the Committee with details of urgent and important priority recommendations that are overdue by the year in which they were raised. Management responses and a new deadline have been indicated for each where available.

APPENDIX 1 – PROGRESS IN COMPLETING THE AGREED AUDIT WORK 2022/23 and 2023/34


Audit Area	Audit Ref	No. of	Revised Days	Days Delivered	Status	Assurance Level	Recommendations				Date to Committee
							Urgent	Important	Needs Attention	Op	
Quarter 3											
Key Controls and Assurance Framework	GY2305	16	16	16	Final report issued on 1 September 2023	Reasonable	0	5	4	0	Jul-23
Payroll and HR	GY2308	15	15	15	Final report issued on 17 April 2023.	Reasonable	0	1	1	0	Jul-23
TOTAL		31	31	31							
Quarter 4											
Corporate Governance	GY2301	10	0	0	Audit deferred to 2023/24.						
Procurement and Contract Management	GY2302	12	12	12	Final report issued 24 October 2023	Limited	1	8	3	4	Dec-23
Accounts Payable	GY2306	12	12	12	Final report issued on 21 June 2023.	Reasonable	0	3	3	1	⊕ Jul-23
Bereavement Services	GY2309	10	10	10	Final report issued on 12 June 2023.	Reasonable	0	3	6	2	Jul-23
Development Control	GY2311	10	0	0	Audit deferred to 2023/24.						
Housing Needs, Allocations, Homelessness & Housing Register	GY2315	10	0	0	Audit deferred to 2023/24.						
Housing Rents	GY2307	16	16	16	Final report issued on 2 May	Reasonable	0	2	1	2	Jul-23
TOTAL		80	50	50							
IT Audits											
Application Audit – HR and Payroll	GY2321	10	0	0	Audit deferred to 2023/24.						
Starters, Movers, Leavers	GY2320	10	0	0	Audit deferred to 2023/24.						
Change Control and Patch Management	GY2218	0	10	10	Final report issued on 21 February 2023.	Substantial	0	0	3	2	Jul-23
Software Licensing	GY2219	0	10	10	Final report issued on 26 September 2022.	Reasonable	0	2	1	1	Oct-22
Digital Strategy	GY2220	0	10	10	Final report issued on 7 December 2022.	Reasonable	0	4	3	0	Jan-23
Cyber Security	GY2319	10		0	Audit deferred to 2023/24.						
TOTAL		30	30	30							
Follow Up											
Follow Up	N/A	16	16	16							
TOTAL		16	16	16							
TOTAL		264	243	243			1	42	35	15	
Percentage of plan completed				100%							

Audit Area	Audit Ref	No. of days	Revised Days	Days Delivered	Status	Assurance Level	Recommendations				Date to Committee
							Urgent	Important	Needs Attention	Op	
Quarter 1											
Development Control	GY2311	10	10	8	Fieldwork completed, draft report in progress.						
Corporate Governance	GY2401	12	10	5	APM issued on 3 July 2023. Fieldwork in progress.						
Non-Housing Property and Asset Manage	GY2411	15	15	12	Draft report issued on 23 October 2023. Client responses are due and are being chased.						
Sports and Leisure	GY2417	12	12	12	Final report issued on 27 September 2023.	Limited	2	4	2	2	Dec-23
TOTAL		49	47	37							
Quarter 2											
Workforce Planning/Organisational Development	GY2407	12	12	6	APM issued on 21 September 2023. Fieldwork started on 14 November 2023.						
Building Control - - Planning Enforcement and Section 106 Arrangements	GY2408	15	15	15							
Housing Needs, Allocations, Homelessness, Housing Register	GY2415	15	15	15	Final report issued on 16 November 2023	Reasonable	0	4	2	2	Dec-23
Housing Asset Management	GY2412	12	12	9	APM issued on 9 August 2023. Fieldwork in progress.						
Private Sector Housing - inc HMO's Selective Licencing	GY2409	12	12	0							
TOTAL		66	66	45							

Quarter 3											
Housing Benefit and Council Tax Support	GY2404	15	15	7	APM issued on 27 September 2023. Fieldwork did not start as planned in November 2023 and will now commence in January 2024.						
Council Tax and NNDR	GY2403	15	15	12	APM issued on 26 September 2023. Fieldwork started on 16 October 2023 and is still in progress.						
Accounts Receivable and Income	GY2405	16	16	7	APM issued on 9 November 2023. Fieldwork started on 22 November 2023.						
GYN Stock and Stores Management	GY2413	10	10	0	Audit on hold whilst other specific audit work is being completed in this area.						
TOTAL		56	56	26							
Quarter 4											
Key Controls and Assurance	GY2402	15	15	0							
Accountancy Services	GY2406	16	16	0							
Parking Services	GY2410	15	15	0							
Housing Compliance	GY2414	12	12	0							
Control Centre	GY2416	12	12	0							
TOTAL		70	70	0							
IT Audits											
Cyber Security - Q2	GY2418	12	12	4	APM issued on 7 July 2023. Contractor illness has delayed progress but a new auditor is now picking up this work and chasing for the required information.						
Application Audit - HR and Payroll System - Q1	GY2419	10	10	2	APM issued on 30 June 2023. Postponed by client originally, contractors illness since has delayed a new start date. To be booked in shortly by a new auditor.						
TOTAL		22	22	6							
Follow Up											
Follow Up	N/A	16	16	12							
TOTAL		16	16	12							
TOTAL		279	277	126			2	8	4	4	
Percentage of plan completed											

APPENDIX 2 – AUDIT REPORT EXECUTIVE SUMMARIES 2022/23 and 2023/24

Executive Summary – GY2302 Procurement and Contract Management (Phase 2 of 2)

OVERALL ASSESSMENT	KEY STRATEGIC FINDINGS
	<p>The Public Contracts Regulations 2015 (PCR) set out the requirements to maintain procurement records. For the chosen sample, multiple documents could not be obtained, resulting in Internal Audit not being able to give assurance over some areas, including that the correct procurement rules were applied, and that the decision was made at the appropriate level.</p> <p>Training was provided to the Executive Leadership team (ELT) and Heads of Service in Q4 of 2022/23. Compliance testing identified knowledge gaps for which procurement training should be developed and delivered to relevant officers.</p> <p>Aggregated spend and off contract spend is currently not monitored. Internal Audit has completed high-level aggregated spend analysis. The initial outcome has identified 295 of 356 suppliers with spending over £5,000 in 2022/23 that do not appear on the contracts register and require further investigation to establish whether correct procurement methods were applied.</p> <p>Processes need to be developed to ensure historic and recent Procurement Policy Notices (PPNs) are considered and implemented in relevant policies and procedures.</p>
ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE	GOOD PRACTICE IDENTIFIED

The audit has sought to provide assurance over the following key risk: “Financial loss and reputational risks due to not achieving value for money and not complying with procurement legislations”.



Phase one of this procurement review identified multiple areas where improvements were necessary, for which the Council was addressing through the procurement consortium arrangement with Breckland District Council. GYBC has since given notice to withdraw from this arrangement, with effect from 31st December 2023. An alternative provider has been secured, although the service will be limited largely to operational matters rather than pro-active and strategic support until a formal agreement begins with effect from 1st April 2024.

SCOPE

Breckland Council has set up a procurement consortium that includes South Norfolk and Broadland District Councils as well as Great Yarmouth Borough Council, allowing participating members to draw on a pool of professional advice. While Phase one of the audit focused on the setting up of the procurement consortium, with outcomes reported to Breckland, Phase two evaluated the effectiveness of arrangements for Great Yarmouth Borough Council specifically, to provide assurance that the Council's Contract Standing Orders (CSOs) are being complied with. Consequently, aspects of contract management were excluded from this review.

ACTION POINTS

Urgent	Important	Needs attention	Operational
1	8	3	4

OVERALL ASSESSMENT



ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

This audit sought to provide assurance over the following key risk: "The provision of leisure services are not being managed effectively."

KEY STRATEGIC FINDINGS



There is no signed contract in place with the current service provider Freedom Leisure who have managed the two centres since January 2022. A draft contract is in the process of being engrossed.



Various contract management processes are in place including formal quarterly Leisure Operator Partnership Board (LOB) meetings. Additionally, there are monthly meetings at both sites, however they are currently informal with no formal agenda, minutes or action notes.



Although the contract with Freedom Leisure is of high value and brings high reputational risks, no relating risk has been raised as on the corporate risk register.



Performance data is reported via the quarterly LOB reports, however no formally agreed performance measures are currently in place.

GOOD PRACTICE IDENTIFIED



A variety of marketing activities are undertaken by Freedom Leisure, including targeted marketing for different user groups.



The current Council Sport, Play and Leisure Strategy 2015-2029 included an objective to improve facilities at the Marina Centre, which has been achieved with a full redevelopment and re-opening in August 2022.

SCOPE

The audit evaluated the robustness of contract management processes for the Marina Centre and Phoenix Leisure Centre, managed by Freedom Leisure. The audit has reviewed whether climate sustainability targets are featured within the Council's management of the contract.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
2	4	2	2

Free Housing Review Panel

Executive Summary - GY2415 Homelessness and Housing Options





OVERALL ASSESSMENT





ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Assurance was provided over the following key risk: "The Council failing to carry out their statutory obligations in respect of housing and homelessness".

KEY STRATEGIC FINDINGS

-  There are significant delays in the assessment and processing of some homeless applications.
-  Personal Housing Plans are not used to consistently good effect for homelessness cases.
-  The service does not have an up-to-date risk register, to capture all the risks that it faces and the actions that need to be taken to mitigate them.
-  There is a significant backlog of applications to join the housing register that are waiting to be assessed.

GOOD PRACTICE IDENTIFIED

-  A Senior Housing Options Advisor post has been created, to provide advice and support with complex cases to other officers.
-  Shortlisting for allocation of properties is fully automated, to ensure that properties are offered in accordance with the allocations scheme.

SCOPE

A very high scoring strategic risk has been raised relating to the impact of inflation on residents in the borough with the potential impact being identified as a potential increase in homelessness. A new Housing Allocation Scheme went live at the end of 2022/23. This review was therefore deferred from the 2022/23 plan to allow for the new scheme to be implemented. This audit was to provide assurance that the service is being delivered in line with statutory obligations such as action taken to prevent homelessness.

ACTION POINTS

Urgent	Important	Needs Attention	Operational
0	4	2	2

APPENDIX 3 – STATUS OF AGREED INTERNAL AUDIT RECOMMENDATIONS

Audit Year	Audit Name	1	2	3	Total Outstanding as at 30/11/23
2018/19	Corporate Governance		1		1
	Environmental Services		1	2	3
	Procurement			1	1
	Total		2	3	5
2019/20	Corporate Enforcement		1	2	3
	Total		1	2	3
2021/22	Accountancy Services		1		1
	Counter Fraud and Corruption Framework	2	5	2	9
	Environmental Services	1	2	2	5
	GYN - Invoicing	2	1		3
	ICT- Digital Strategy		2		2
	Risk Management		1		1
	Total	5	12	4	21
2022/23	Bereavement Services		2		2
	Corporate Health and Safety		1		1
	Event Management and Tourism		1		1
	Payroll and Human Resources (includes officer expenses)		1		1
	Tenancy Services		1		1
	Total		6		6
2023/24	Housing Needs, Allocations, Homelessness & Housing Register		1		1
	Total		1		1
Total		5	22	9	36

The following audits in the table above were assigned a 'limited' overall assurance opinion; the rest were 'reasonable': -

- 2018/19 – Corporate Governance
- 2018/19 – Procurement
- 2021/22 – Counter Fraud and Corruption Framework
- 2021/22 – Environmental Services

There are a further ten which are not yet due for completion as detailed in the table below: -

Audit Year	Audit Name	2	3
2022/23	Key Controls and Assurance		3
	Housing Rents	1	1
	Total	1	4
2023/24	Housing Needs, Allocations, Homelessness & Housing Register	3	2
	Total	3	2
Total		4	6

APPENDIX 4 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2018/19

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY1901 Corporate Governance	Recommendation 8: A review of off-site paper storage arrangements is undertaken to ensure they are GDPR compliant.	2	Head of Property and Asset Management	31/01/2019	30/11/2023	9	Outstanding	Corporate Services underwent a restructure during 2022 which resulted in only the Corporate Services Manager & Data Protection Officer being present for a large proportion of the year, while recruitment exercises took place. Due to the need to maintain day to day business and the effective running of the Council, work to review the offsite records had to be paused. Work has recommenced with the aim of completing by November 2023.
GY1909 Environmental Services	Recommendation 1: Contaminated land. The review of the prioritisation site list is concluded as follows: completion of the review of medium scored sites; - finalising the further work needed in respect of the high scored sites to assess the possibility of significant harm and an addition of the date when the review work for each site has been completed and officer/reviewer name.	2	Head of Environment and Sustainability	31/05/2019	31/12/2023	6	Outstanding	Due to staff shortages this work has been delayed and we have had to prioritise other work, this will be completed by the end of the year.

APPENDIX 5 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2019/20

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2016 Corporate Enforcement	Recommendation 1: Technological efficiencies with the new proposed system to be identified and maximised. A set format to be agreed for storing files. In addition a data cleansing exercise to be undertaken as planned to ensure that the council is compliant with GDPR.	2	Head of Environment and Sustainability	30/04/2021	30/9/2024	4	Outstanding	New IT system to be installed in September 2023, at which point this recommendation will be progressed. Delays to implementation of new system but delivery timetable confirmed. Likely to be live September 2024.

APPENDIX 6 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2021/22

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2207 Counter Fraud and Corruption	Recommendation 1: The Council undertake an assessment of the fraud and corruption risks that it faces including comparison with the FFCL and put in place actions to mitigate them. Once complete the assessment needs to be used to determine whether a strategic risk should be added to the corporate risk register. The Audit and Risk Committee and the relevant Portfolio Holder to be briefed on the risks identified.	Urgent	Finance Director and Finance Manager	30/04/2022	30/11/2023	2	Outstanding	Resources for this work are under review to be completed in the year.
GY2207 Counter Fraud and Corruption	Recommendation 2: An assessment of the resources required to deliver counter fraud work be undertaken.	Urgent	Finance Director and Finance Manager	30/04/2022	30/11/2023	2	Outstanding	Resources for this work are under review to be completed in the year.
GY2207 Counter Fraud and Corruption	Recommendation 4: A Counter Fraud and Corruption Strategy be devised, applying to all aspects of the Councils' business. This should be communicated throughout the Council and acknowledged by those charged with governance. A strategy provides a framework for preventing and tackling bribery, fraudulent and corrupt acts against the Councils.	Important	Corporate Risk Officer	30/04/2022	30/07/2023	2	Outstanding	Other work commitment and resources have prevented progress with this recommendation. Requirement to resolve accessibility issues which will then enable progress with raising awareness.
GY2207 Counter Fraud and Corruption	Recommendation 3: The Audit and Risk Committee be updated on an annual basis on the Council's counter fraud activity and its progress against the Fighting Fraud and Corruption Locally Strategy 2020.	Important	Corporate Risk Officer	30/06/2022	30/07/2023	2	Outstanding	The AGS 2021/22 included details of the work that has been undertaken of the fraud activity and prevention work that has been undertaken. This is to be developed further.

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2207 Counter Fraud and Corruption	Recommendation 5: Training sessions for counter fraud and corruption to be rolled out across the Council. Records for training sessions to be formally recorded and monitored.	Important	Corporate Risk Officer	30/06/2022	30/07/2023	2	Outstanding	Resource and other work commitments have prevented progression. The new e-learning package that is to be introduced in 2023 includes a fraud training module which officers can be invited to complete. Face to face training is preferred.
GY2207 Counter Fraud and Corruption	Recommendation 6: A programme of work be introduced to improve staff awareness and responsiveness to fraud across the Council.	Important	Corporate Risk Officer	30/06/2022	30/07/2023	2	Outstanding	Annual Action Plan includes details of work to be undertaken to raise staff awareness and fraud prevention. The Fraud Action Plan is to be incorporated into the Annual Risk Management Report.
GY2207 Counter Fraud and Corruption	Recommendation 7: An annual action plan to carry out all required counter fraud work be put in place and agreed by committee. The agreed plan should be linked to the annual audit plan and shared with Members and senior management.	Important	Finance Director and Finance Manager	30/06/2022	30/11/2023	2	Outstanding	Resources for this work are under review to be completed in the year.
GY2215 Environmental Services	Recommendation 1: To ensure that all private water supplies are subject to inspection in accordance with the private water supply regulations.	Urgent	Environmental Health Manager	31/12/2022	31/3/2024	3	Outstanding	New member of staff joining at the end of June 2023. Part of their role will be to complete the risk assessments. An action plan has been put in place to start the sampling and risk assessments from end Oct 2023 which has begun.

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2215 Environmental Services	Recommendation 7: A review of the Anti-Social Behaviour Strategy 2018 – 2023 be undertaken, reported to the Policy and Resources Committee and annual action plans re-instated.	Important	Head of Environment and Sustainability	31/03/2023	31/12/2023	2	Outstanding	Strategy is being finalised and is on forward plan to be presented to ELT and members for agreement in December
GY2215 Environmental Services	Recommendation 8: All Anti-Social Behaviour (ASB) activity, including number of cases and action taken, to be effectively and accurately recorded with supporting evidence retained.	Important	Head of Environment and Sustainability	31/12/2022	01/10/2023	2	Outstanding	New IT system due to be installed in September 2023.
GY2202 Risk Management	Recommendation 1: The Partnership Register (PR) is reviewed and updated, taking into account the Outside Bodies report, and whether this can be reduced to key partnerships whilst keeping a track of all key risks. The PR should then be presented to ELT / Management Team' and Corporate Risk Group for agreement. The Partnership Governance Framework is also reviewed and update as necessary following the review of the PR.	Important	Finance Director and Finance Manager	31/08/2022	30/11/2023	1	Outstanding	To be reviewed and reported to ELT and Management Team in the year.
GY2201 GYN - Invoicing	The Council to reconcile all jobs still open on the OMS system to the works completed by GYN from records held on the Norse TOTAL system. Any jobs still open on the TOTAL system to be assessed, reported on and actioned.	Urgent	Housing Asset Manager	31/12/2022	31/3/24	11	Outstanding	Timescale for completion of this action be extended to 31 March 2024
GY2201 GYN - Invoicing	On completion of the stock check in GYN stores, the Council should trace the addresses of the properties named on each kitchen back to the records of completed works and works outstanding, ascertain whether a kitchen has been fitted or works no longer required. To also contact the tenant to verify whether a kitchen has been fitted/still required. To identify the cause of surplus ordering or delay and	Urgent	Director of Assets	30/11/2022	31/12/2023	1	Outstanding	It is requested that completion date for this action is extended to 31 December 2023 to allow final reconciliations to be completed.

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
	adjust processes to prevent future recurrences							
GY2201 GYN - Invoicing	The process for managing stores items for the Council to be reviewed, to ascertain whether GYN stores is the appropriate store, and introduce stores management controls to manage the items into, held and out of stores, including review of long standing items, whether still required and how they are accounted for, with the stock check being completed and valued.	Important	Housing Asset Manager	31/1/2023	31/12/2023	1	Outstanding	GYN Board has agreed to the closure of the in-house stores function and for this service to be outsourced to a 3rd Party service provider. On closure of the stores, a full stock take will be completed. This action will be completed by 31st December 2023.
GY2220 Digital Strategy	Recommendation 3: IMT management to ensure that the requirement that documented project benefits are Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART) is documented as part of a Project Management Policy along with requirements for how these are to be developed, agreed and monitored for compliance on an ongoing basis.	Important	IT Investment Group	31/03/2023	31/12/2023	0	Outstanding	This recommendation has been actioned, however, as there have been no completed projects since this recommendation, this is yet to be evidenced.
GY2220 Digital Strategy	Recommendation 4: Management to ensure that the need for a formal project benefits realisation stage as part of a post-implementation review is documented as part of Project Management Policy.	Important	IT Investment Group	31/03/2023	31/12/23	0	Outstanding	This recommendation has been actioned, however, as there have been no completed projects since this recommendation, this is yet to be evidenced.
GY2208 Accountancy Services	Concerto records be brought up to date and shared with the Finance Team, including accompanying UPRNs. Property Team to provide UPRN's as part of annual asset valuations. Reconciliation of the asset register to Concerto to be undertaken annually.	Important	Property Asset Manager (SD) (Property & Asset Management) / Senior Accountant (HC)	31/7/2023	31/12/23	1	Outstanding	The Concerto data cleanse is a pre-requisite of completing any reconciliation between Concerto and the Fixed Asset Register. The main data cleanse is in the process of being

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
								undertaken with the aim of completing this by October 2023

APPENDIX 7 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2022/23

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2310 Event Management and Tourism	Review the process for event notification and planning. This should include the notification form, the distribution of information between departments of the Council, and communications with event organisers.	Important	Civic and Events Manager	30/03/2023	31/12/2023	2	Outstanding	Still in progress, team changes and resource pressures have made this slower than hoped but a review of competitors has been carried out and we are now liaising with IT to further automate the process. This task has now been opened across other depts to ensure consistency in licensing and car park charging which is currently lacking.
GY2303 Corporate Health and Safety	Training on health and safety be tailored to ensure that all staff have been appropriately trained to carry out their responsibilities.	Important	Environmental Health Manager	28/02/2023	31/12/2023	1	Outstanding	At ELT on 1 Nov, the Interim Corporate H & S Manager – presented a report which set out the service priorities for the next 12 months. In the report were actions to implement effective Corporate H & S Management across all functions. This was approved at ELT and the interim H&S Manager will take this forward as a service priority. Now that ELT has approved the priorities, they will need to be developed into a service plan and the proposed timeline was shared with us. As a

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
								result the due date was revised.
GY2309 Bereavement Services	Ensure that inspections are resumed and appropriately prioritised dependent on the outcome of the last inspection. Inspections to be completed thereafter in accordance with agreed timescales	Important	Bereavement Services Manager	30/09/2023	30/11/2023	1	Outstanding	Advised that the checks are generally made during the winter when less time is spent on the maintenance of the grounds. AS a result the due date has been amended.
GY2309 Bereavement Services	Ensure that the monitoring spreadsheet is filled out with all appropriate actions and issues described in each case, with management sign off to indicate actions required / undertaken are reviewed	Important	Bereavement Services Manager	30/09/2023	30/11/2023	1	Outstanding	Advised that the checks are generally made during the winter when less time is spent on the maintenance of the grounds. AS a result the due date has been amended.
GY2316 Tenancy Services	Develop and publish a policy or framework on a strategic level which includes a justified definition of vulnerable residents, what the Council's responsibilities are to care for them and how the Council addresses these responsibilities	Important	Director of Housing Assets	30/06/2023	31/12/2023	1	Outstanding	The vulnerability policy will be finalised by December 2023. In the interim period, staff are encouraged to ensure that services are tailored to the needs of vulnerable customers. The Policy will be a formal platform for this approach.
GY2308 Payroll and Human Resources (includes officer expenses)	Alongside the training for using the new system for expenses claims, provide guidance relating to documentation required for VAT purposes, and reinforce the responsibility for managers to check for VAT compliance before authorising claims	Important	Head of Organisational Development	30/06/2023	31/12/2023	1	Outstanding	We are currently building the mileage and expenses module and as part of that we are building in specific rules around VAT compliance which includes specific coding for VAT and non

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
								VAT claims. Much more of the process will be automated with the rules built into the background. The system build will negate the need to separate guidance on VAT as the system has information “buttons” which you press that will give further guidance on what to pick as required. The system should be fully completed by December 2023 at the latest, if not before.

APPENDIX 8 – OUTSTANDING INTERNAL AUDIT RECOMMENDATIONS – 2023/24

Report	Recommendation	Priority	Responsible Officer	Due Date	Revised Due Date	Number of times revised	Status	Latest Response
GY2415 Housing Needs, Allocations, Homelessness & Housing Register	Ensure that homeless applications are assessed promptly and continue to be worked on during each duty stage. Management to routinely monitor progress. Risk: Homeless applicants are not provided with the support that they need to prevent or relieve their homelessness in an efficient manner.	Important	Housing Options Service Manager	30/11/2023	N/A	N/A	Outstanding	No response provided as yet as only just past due date.

AUDIT, RISK AND STANDARDS COMMITTEE



URN:

Report Title: Corporate Risk Register

Report to: Audit, Risk and Standards Committee

Date of meeting: 11 December 2023

Responsible Director / Officer: Corporate Risk Officer

EXECUTIVE SUMMARY / INTRODUCTION

This report asks the Audit, Risk and Standards Committee to review the Corporate Risk Register to determine whether the register correctly reflect the risks affecting the Authority.

RECOMMENDATIONS:

It is recommended that Audit, Risk and Standards Committee review the latest Corporate Risk Register.

1. Introduction

- 1.1 The Audit, Risk and Standards Committee is responsible for monitoring the arrangements in place for the identification, monitoring, and management of strategic and operational risk.
- 1.2 The Audit, Risk and Cabinet Committee last reviewed the register in July 2023.
- 1.3 This report informs the Audit, Risk and Cabinet Committee of the current corporate risk position.

2. Work to Date / Proposal

- 2.1 The Corporate Risk Register was last reviewed by Management Team in November 2023.
- 2.2 The risk matrix below shows how the risks identified in the Corporate Risk Register are distributed. There are currently 29 risks included on the Corporate Risk Register. The risks considered to be outside the Councils risk appetite have action plans in place to mitigate or reduce the risk. The risks that fall within the risk appetite or acceptable have action plans in place to reduce the risk further.
- 2.3 Since presenting the Corporate Risk Register to the Audit, Risk and Cabinet Committee in July 2023 there has been:

Two risks have been added to the register:

27b – Confidential Risk

29 – Failure of RAAC elements within properties

The risk rating for two risks has increased:

12b – Capacity and Resilience of the Control Centre
17 - BT upgrade network from analogue to digital by 31st December 2025

The risk rating for two risks have decreased:

25a –Equinox Enterprises Limited and Equinox Property Holdings Limited
25b – Great Yarmouth Services Limited

RISK MATRIX

Likelihood	5			4b – Coastal Erosion 5b – Impact of inflation rise 7b – Cyber Security 17 – BT upgrade network & Caister exchange upgrade	
	4		3 – Incident Management - Flood Risk 18b – Sufficient resources and resilience to ensure effective contract management 20 – Tree, open and play spaces Management	5a - Local/National Economy 12a – Workforce Capacity 22 – IT systems capability and interaction	1 – Financial sustainability 12b – Capacity and Resilience of the Control Centre
	3	19 – Change Management	6 – Compliance with General Data Protection Regulations (UK GDPR) 7a - Information Security 8 - Data quality 11 – Management of Major Projects 13 – Changes in government policies 16 - Infrastructure not being able to meet demand 21 – Loss of Reputation 23 – Change to Cabinet System 29 – Failure of RAAC elements within properties	18a – Sufficient resources and resilience to ensure effective procurement 26 – Failure to reduce Carbon footprint / failure to embrace sustainability and mitigate the impact of climate change 27a – Confidential Risk	2 – Cost of Living Crisis 4a– Flood and Coastal Management
	2	25a – Equinox Enterprises Limited and Equinox Property Holdings Limited	9 - Event Management – for large scale events held in the Borough 24 - Gaps in Insurance cover - insurers reducing cover in place with the result that Council assets may not be adequately covered 25b – Great Yarmouth Services Limited	10a - Business Continuity 14 - Delivery of long-term strategic objectives 15 - Lack of community cohesion / community tensions 27b – Confidential Risk 28 – Confidential Risk	10b Business Continuity – National Power Outages 10c – Business Continuity – Rolling Power Outages
	1				
	1	2	3	4	5
Impact					

Likelihood – 5 Very Likely, 4 Likely, 3 Fairly Likely, 2 Unlikely, 1 Very unlikely
 Impact – 5 Severe, 4 Significant, 3 Moderate, 2 Minor, 1 Negligible

Risk Rating Actions:	
Very High 20 - 25	Risk outside risk appetite. Action required to reduce rating to an acceptable level
High 10 - 16	Risk outside risk appetite. Action required to maintain or reduce rating.
Medium 5 - 9	Acceptable with some mitigating and contingency planning. Routine reviews should be carried out to ensure there is no change which makes them more severe
Very Low 1 - 4	Within risk appetite but kept under review. No further action required unless risk become more severe

3. Impact / Next Steps

- 3.1 The Corporate Risk Officer will present the Corporate Risk Register after its next review by Management Team in six months.

4. Financial Implications

- 4.1 See attached Corporate Risk Register.

5. Risk Implications

- 5.1 See attached Corporate Risk Register.

6. Legal Implications

- 6.1 See attached Corporate Risk Register.

7. Conclusions

- 7.1 The Corporate Risk Register currently reflects the risks affecting the Authority and where applicable action plans have been put in place to reduce the current scores and risk affecting the Authority.

8. Background Papers

Areas of consideration: e.g. does this report raise any of the following issues and if so how have these been considered/mitigated against?

Consultations	Comment
Monitoring Officer Consultation:	
Section 151 Officer Consultation:	
Existing Council Policies:	
Equality Issues/EQIA assessment:	



CORPORATE RISK REGISTER

Last Review:	ELT / MT 29 November 2023 / CRG 9 November 2023	A & R 17 July 2023
Review Date:	11 December 2023	
Review By:	Audit, Risk & Standards Committee	

Impact and Likelihood Matrix Explanation	
Risks are rated by two factors:	
IMPACT - the impact to the business of the identified risk should it be realised	
LIKELIHOOD - the likelihood that a risk will become a business issue	

Risk Rating Actions:

Very High 20 - 25	Risk outside risk appetite. Action required to reduce rating to an acceptable level
High 10 - 16	Risk outside risk appetite. Action required to maintain or reduce rating.
Medium 5 - 9	Acceptable with some mitigating and contingency planning. Routine reviews should be carried out to ensure there is no change which makes them more severe
Very Low 1 - 4	Within risk appetite but kept under review. No further action required unless risk become more severe

		IMPACT OF RISK				
		1	2	3	4	5
		Negligible	Minor	Moderate	Significant	Severe
LIKELIHOOD OF RISK	5	Very Likely	Medium 5	High 10	High 15	Very High 20
	4	Likely	Very Low 4	Medium 8	High 12	High 16
	3	Fairly Likely	Very Low 3	Medium 6	Medium 9	High 12
	2	Unlikely	Very Low 2	Very Low 4	Medium 6	Medium 8
	1	Very Unlikely	Very Low 1	Very Low 2	Very Low 3	Very Low 4

DIRECTION OF TRAVEL	
↔	No change to current risk rating
←	Current risk rating has reduced
→	Current risk rating has increased

Risk ID No	Risk	Risk Owner	Description of Risk	Impacts	Action Plan	Current Rating			
						Likelihood	Impact	Risk Rating	Direction of Travel
1	Financial sustainability	ELT	Unknowns about the future funding for Local Government including the operation of the business rates retention scheme	Inability to effectively plan for the medium to long term	Review of the Medium Term Financial Strategy when the outcomes of the Fair Funding Review and review of the Business Rates Retention Scheme are announced.	4	5	20	Very High
			Longer term reliance on reserves not sustainable	Unplanned reductions to services and quality of delivery	Continued review of reserves and balances to manage cashflow, unexpected events and use of reserves to deliver longer term benefits				↔
			Increased volatility from external funding including business rates and council tax	Annual budgets exceeded and greater reliance on the use of reserves	Continued maintenance of the Medium Term Financial Strategy and delivery of the themes of the business strategy				
				Resources diverted from services	Member workshops and engagement as part of the budget and MTFS preparations				
			Reduced income from Joint Ventures	Annual savings and new income streams not achievable	Monitoring and scrutiny of all JV operations and Subsidiary Companies				

			<p>Significant reduction in Central Government funding</p> <p>Reduced income from recycling credits</p> <p>Statutory Interim duty to accommodate</p>	<p>Changes to existing income streams</p> <p>Recyclable tonnage income / fail to get good rates for product Lack of market for recyclates</p> <p>Removal or changes to recycling credits</p> <p>Increased funding to support NEWS and MRF Inability to deliver strategic objective</p> <p>Over reliance on bed and breakfast accommodation leading to prohibited costs</p>	<p>Continue to pro-actively respond to central government funding consultations</p> <p>Active member of the Norfolk Waste Partnership (NWP)</p> <p>Levelling up funding and possible constraints due to current economic climate</p> <p>Strategic approach to provision of temporary accommodation</p>				
2	Cost Of Living Crisis	ELT	<p>Reduction in spending / budget decisions of partner organisations</p> <p>Consultation around spending reduction</p> <p>Housing related support cuts Devolution</p>	<p>Unfunded activity / funding opportunities</p> <p>Resources diverted from services</p> <p>Services have to be reduced / withdrawn</p> <p>Inability to deliver strategic objectives Increased demand placed on borough council services</p> <p>Continued pressure on the Housing Register</p> <p>Unmet demand</p>	<p>Working with partners to redesign and streamline service delivery / share resources</p> <p>Working together to build capacity of communities</p> <p>Understanding and responding to proposals</p> <p>Understanding funding requirements and protecting spend</p> <p>Launch of homelessness and rough sleeping strategy</p>	3	5	15	High
3	Incident Management - Flood Risk	Head of Environment and Sustainability, Head of Property & Asset Management, Executive Director - Major Projects, Head of Growth & Capital Projects & ELT	<p>Potential of flooding and tidal surge event in the short term and long term</p> <p>More frequent flooding and tidal surges due to climate change</p> <p>Failure of flood barriers</p> <p>Surface water flooding</p>	<p>Disruption of commercial activity</p> <p>Health and safety issues</p> <p>Inability to deliver services</p> <p>Additional demands on resources to undertake post event inspections and repairs to coastal assets</p> <p>Potential of additional support from the Council adding to the demands of the team</p>	<p>Emergency Response Plan / Recovery Plan</p> <p>Emergency Response Plan. Numbers of rest centre managers have declined and proving difficult to recruit replacements. Will impact capability to support rest centres if multiple sites are opened. Proposal being prepared on how best to recruit rest centre managers.</p> <p>Norfolk Strategic Flood Alliance established with Strategy endorsed by GYBC and Action Plan in place.</p> <p>Monitor weather regularly / EA flood warning system. Communities at risk of flood given risk warnings and updates ahead of flood issues occurring</p> <p>Liaising and working with partners and other organisations / agencies</p> <p>Surface Water Management Plan - work underway with County to refresh</p>	4	3	12	High
4a	Flood and Coastal Management	Head of Environment and Sustainability, Head of Property & Asset Management, Executive Director - Major Projects & Head of Growth & Capital Projects	<p>Failure of flood and coastal defences</p> <p>Major flooding and Tidal Surge event</p> <p>Sea Level Rise / Climate Change</p> <p>Deterioration of assets and changes in beach processes</p>	<p>Impact on economy and increased business development for the Borough</p> <p>Reducing economic potential for the area</p> <p>Impact on infrastructure across the borough</p> <p>Health and Safety</p>	<p>Mott Macdonald Economic Business case is well established and agreed for river Yare flood defences to attract funding</p> <p>Long term plan to review, repair and renew flood defences through the Environment Agency</p> <p>Facilitation of community groups to work with coastal areas in relation to adaptations</p>	3	5	15	High

			<p>Risk to life or loss of public or private property, infrastructure and assets</p> <p>Extending the length of river frontage for which the Council have responsibility – current proposal of de-manning by the Environment Agency</p> <p>Limited availability for resources and finance for maintenance and repairs</p> <p>Increased costs in construction and recruitment</p> <p>Single point of failure</p>	<p>Lack of resources to fund maintenance on watercourses transferred from EA control</p> <p>Loss of environmental asset</p> <p>Resources and financial implications to council for clear up</p> <p>Reputational risk dependent in event drivers and also Council's reaction and actions to the event</p> <p>Resilience of teams significantly reduced due to response work</p> <p>Changes expectations of community and members</p>	<p>Local Plan Part 2 - addresses relocation schemes & future development. emerging policy re: new development and flood risk adopted in December 2021</p> <p>Long term plan to review, repair and renew flood defences – engaging with Coastal Partnership East and the Environment Agency. EA and Suffolk and Norfolk Resilience Forum</p> <p>EA funding - covers tidal and coastal</p> <p>Emerging Environmental Net Zero Strategy</p> <p>Managing reputation and media and comms across council</p> <p>Monitoring weather / surge reports and engagement with partners / agencies. Emergency response plans</p> <p>Defra funding</p>				
4b	Coastal Erosion	Head of Property and Asset Management & Head of Environment and Sustainability	<p>Erosion of cliffs and dunes</p> <p>Sea Level Rise / Climate Change</p> <p>Deterioration of assets and changes in beach processes</p> <p>Limited availability for resources and finance for maintenance and repairs</p> <p>Increased costs in construction and recruitment</p> <p>Members of the public are injured whilst on or near coastal asset or land</p> <p>Single point of failure</p>	<p>Impact on economy and increased business development for the Borough</p> <p>Reducing economic potential for the area</p> <p>Impact on infrastructure across the borough. Number of properties at immediate risk with further properties being lost in the short medium and long term</p> <p>Health and Safety - possible health implications</p> <p>Unsafe coastline resulting in danger of life and Loss of property, infrastructure and assets.</p> <p>People displaced and having to seek alternative accommodation, impacting on housing services</p> <p>Impact on visitors/tourism in area, with coastal paths/beach closed for safety purposes and unattractive coastline.</p> <p>Loss of environmental asset</p> <p>Resources and financial implications to council for clear up and service provisions / resilience of teams significantly reduced due to response work</p> <p>Reputational damage</p> <p>Changes expectations of community and members</p>	<p>There is currently very limited national assistance to facilitate adaptation and no duty for local authorities to fulfil this roll. However, Government Policy and the EA strategy now identify the need to adapt and transition</p> <p>Working with businesses to improve awareness</p> <p>Analysis of monitoring data to assist with identification of change and locations at risk with reporting of data with homeowners on current situation and ongoing liaison with property owners at imminent risk</p> <p>Facilitation of community groups to work with coastal areas in relation to adaptations</p> <p>Short term options for coastal erosion</p> <p>Emerging Environmental Net Zero Strategy</p> <p>Emergency planning framework in place to deal with major incidents</p> <p>Ongoing discussion with national government for assistance with adaptation and regular updating of erosion mapping.</p> <p>Development of approaches and investigation of funding approaches to enable resourcing for adaptation.</p> <p>Managing reputation and media and comms across council</p> <p>Agreed approach to address issues of coastal erosion</p>	5	4	20	<p>Very High</p> <p>↔</p>
5a	Local/National Economy	CEO	<p>Downturn in national / local economy</p> <p>Issue of Welfare Reform National Policy - changes to benefit - universal credit rolled out</p> <p>Supply chain shortages due to conflict</p> <p>Increased cost of living, fuel shortages, construction costs, materials, plant and resource availability and hyper inflation</p>	<p>Increased workload for Council staff (Benefits/ Economic development/ homelessness)</p> <p>Increase in bad debts</p> <p>Major projects put on hold and Inability to meet requirements of capital programme</p> <p>Downturn in housing market</p> <p>Uncertainty lead to a downturn in economy</p>	<p>Strong local economy (Town Deal, Future High Street & Levelling Up funding)</p> <p>Corporate planning</p> <p>Monitoring basket of key indicators</p> <p>Communications Strategy</p> <p>Great Yarmouth Economic Growth Strategy review</p> <p>Monitoring current inflationary pressures</p>	4	4	16	<p>High</p> <p>↔</p>

5b	Impact of inflation rise	Management Team & Head of Environment and Sustainability	<p>Increased demand for Council services</p> <p>Increased food costs</p> <p>Increased costs for goods and services</p> <p>Financial hardship cases due to energy cap and rising in energy and food costs / loss of household income</p>	<p>Increased costs, increased demand for services, scarcity of labour, scarcity of goods and supplies or other operational impacts which impair the Councils ability to deliver services for people within the borough</p> <p>Community unrest</p> <p>Increased Joblessness and Homelessness and demand for social housing</p>	<p>Budget monitoring and project forecasting - review all budgets and project contingency</p> <p>Review of Housing Strategy</p> <p>Homelessness funding</p> <p>Government support and funding / Household Support fund ends in March 2024</p>	5	4	20	Very High
									↔
6	Compliance with UK General Data Protection Regulations (UK GDPR)	<p>Management Team</p> <p>Head of Legal & Governance</p> <p>Executive Director - Resources</p> <p>Management Team</p> <p>Management Team</p>	<p>Data breaches of personal information</p> <p>Staff not completing their Data Protection training</p> <p>Some computer systems are not compliant with the new regulations regarding data deletion</p> <p>Records outside of their retention are retained at various offsite locations</p> <p>Capacity to undertake data cleansing and deletion.</p>	<p>All staff must comply with the new regulations from 25th May 2018. Data Protection Policy, Data Protection Impact Assessment Policy & Record Management Policy must be reviewed annually and updated where necessary. All requests for information must contain a Privacy Notice or a link to a Privacy Notice on our website</p> <p>Fines and costs</p> <p>Reputational damage / bad publicity resulting from Data Breaches</p> <p>Insurance claims</p>	<p>Publication Data Protection Policy and creation of Records Management Policy, Data Impact Assessment Policy and Breach Notification Procedure. Quarterly reports to ELT on data breaches and highlighting any serious breaches.</p> <p>GDPR training provided to all staff and members and repeated annually. GDPR training also forms part of new starter induction. HR required to be informed of any recruitment to add to eLearning system and all temporary staff and consultants required to complete training.</p> <p>Procurement process has begun to replace or upgrade the non compliant computer systems. As part of this data records will be reviewed and those outside of their retention securely deleted</p> <p>A methodical review of offsite records has commenced, this is being carried out in a controlled manner with the support and oversight of the Data Protection Officer. Work in this area has had to be paused due to the Covid pandemic, redeployment of staff and lack of resources. Due to winter period approaching work to commence again in April / May 2024 with the aim of completing by end of October 2024.</p> <p>Agile working policy covers / considers working from home and data protection.</p>	3	3	9	Medium
									↔
7a	Information Security	Management Team, IMT Manager & Head of Legal & Governance	<p>Good management, protection of information</p> <p>Number of cases of lost information by public and private bodies</p> <p>Need to attain criteria set by government to retain information flow with DWP (Department Works Pensions)</p>	<p>DWP refuse to correspond with GYBC electronically Loss of capability to handle Housing Benefits and other issues</p> <p>Information lost/mislaidd therefore loss of reputation and potential legal claim</p>	<p>Security Policy and Digital Strategy. Information Security manager in post</p> <p>PSN Compliant / Accepted by DWP computer security (PSN) – Annual renewal</p> <p>Realisation that information includes paper, people and computer</p> <p>Monthly Governance Board meetings - data sharing policy with NHS to share NHS and GP data. Further works to comply with NHS data security tool kit</p>	3	3	9	Medium
									↔
7b	Cyber Security	<p>Management Team, Head of IT, Marketing and Comms, IMT Manager</p> <p>& Head of Legal & Governance</p>	<p>Cyber threats upon the Council's systems - data / systems hacked</p> <p>Increase cyber attach treat due to current conflict in Ukraine</p> <p>Services not recovered within reasonable timescale due to inadequate business continuity plans or loss of resilient capacity</p> <p>Third Party supplier security meets required standards</p>	<p>Data could be shared for criminal use etc. Breaches of GDPR and non-compliance with policies and procedures</p> <p>Loss of IT Systems and Loss of Information</p> <p>Unable to deliver basic business services. Inability to recover to agreed service levels within agreed timescales</p> <p>Financial implications</p>	<p>IT security procedures and IT security policy. Ensuring third parties security measures meets required standards. Investigation / follow up process into Cyber breaches internally and externally</p> <p>LGA Grant for Cyber Security and Cyber training</p> <p>Information Technology Investment Group / Risk is a standing item on the agenda</p> <p>Annual Cyber Security Health check undertaken by NCC</p>	5	4	20	Very High
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8	Data quality	Management Team, Head of IT, Marketing and Comms, IMT Manager	Records not maintained accurately or securely	Inaccurate data used for decision making	IT security procedures and IT Security Policy	3	3	9	Medium

		& Head of Legal & Governance			Data Management & Data quality action plan and Data Cleansing				↔
9	Event Management - for large scale events held in the borough by a third party on Council Land	Head Marketing & Communications Head of Environment and Sustainability Head of Property and Assets	Failure of event / duty of care	Cancellation / suspension of event Major incident Reputational damage / bad publicity	ESAG Group (Police, Highways, Ambulance Service, Fire Service, Coastguard and key GYBC staff), ESAG website and ESAG email address - ensure that we work together effectively through the ESAG structure to support the planning of large scale events and ensure we respond effectively if anything goes wrong Event Management Plan, Event Guidance and Guide to Councillors Member & Officer Groups Involvement / consultation of key officers. External support to assist with the delivery of major events Engagement of stakeholders Online Event Notification form and centralised mailbox	2	3	6	Medium ↔
10a	Business Continuity	Management Team	Loss of facilities (flooding, fire etc) Loss of IT systems Loss of reputation Loss of staff time and system functionality Loss of staff (fuel strike, industrial action, single point of failure etc) Loss of temporary accommodation provider International unrest and global volatility Energy outages / Fuel Strike	Service delivery impaired Inability to pay creditors/benefits Relocation of services Resilience of teams significantly reduced due to response work Range of providers	Business Impact Assessments / 3rd Party Service Agreement Information Technology Investment Group The Loop - web-based programme and external provider Insurance Capability exists for staff to work from home and support key services Additional resource from NCC and monthly meetings with NCC to discuss SLA Business Continuity plans updated to included Agile Working The UK have a range of reliable sources for oil imports. The UK is a significant producer of both crude oil and petroleum products, and holds oil stocks in the unlikely event of a major oil supply disruption. The Government has contingency plans in place to mitigate residual risks.	2	4	8	Medium ↔
10b	Business Continuity - National Power Outages	Management Team	Severe weather disrupting power transmission	7 days to recover -disruption to communications, vulnerable residents, community care, loss of key services and impact on NHS	The government undertook a programme of exercises at LRFs and a national exercise in March 2023 The NRF managed a local workstream to understand how to address the key risks (communication, vulnerable residents, community care, how to manage a response without communications, loss of key services, NHS) alongside the national exercise. GYBC resilient office identified at Wherry Way, recommendations made to implement emergency comms, refuelling process for generator and updated access for response staff. Paper prepared for Management Team with recommendations. Once approved recommendations will be implemented including response plan and training. NRF resilience group created comms process	2	5	10	High ↔
10c	Business Continuity - Rolling Power Outages	Management Team	Rolling Power outages due to cold winter and disrupted supply	Disruption to community care, communications, emergency response and key services	Multi agency response to support the community Business Continuity template reviewed to include section on power loss	2	5	10	High ↔
11	Management of Major Projects	ELT	Failure to deliver project or project overspend / over running Resourcing and capacity - failure to deliver project and obtain funding The impact of increases to inflation, current issues with the supply chain and material prices e.g. steel, could have an impact on the delivery of key projects and contingency budget	Cancellation / suspension of project Reputational damage / bad publicity Financial impact on Council to ensure delivery of programmes and projects including affordability in medium/long term.	Involvement / consultation of key officers Strengthen project management internally and external project support for the management of significant project Business Case and Risk Register / risk logs completed, monitored and updated. Review of contingency budgets and plans	3	3	9	Medium ↔

			<p>Reduced opportunities to effectively manage and achieve financial requirements of assets.</p> <p>Funding withdrawn due to programme delays</p> <p>Project governance not in place</p> <p>Failure to comply with funding agreement / conditions</p>	<p>Failure to met regeneration</p> <p>Failure to met government and other external funders guidelines for spending / reduced or cancellation of funding</p>	<p>Suite of documents created for setting up &, delivering and monitoring projects. Agreed governance structure for management of project</p> <p>Guidance on how to access assistance from Project Team and relevant service areas consulted at the outset</p> <p>Dedicated officer to manage the risk / issue and governance of all projects going forward, which can be followed / implemented by other team members.</p> <p>Understanding funding requirements and protecting spend</p> <p>Strong local economy</p>				
12a	Workforce Capacity	Management Team	<p>Departure of key individual</p> <p>Insufficient staff to undertake work / single point of failure</p> <p>Difficulty of recruitment / failure to recruit staff of suitable expertise and calibre</p> <p>Skills shortage / gaps in knowledge</p> <p>Staff workload levels increased due to impact of responding to major incident and maintaining business as usual.</p> <p>Lack of resource to deliver Health & Safety</p> <p>Failure to comply with Health & Safety legislation and corporate approach not consistently applied</p>	<p>Skills lost</p> <p>Negative impact on capacity of other staff</p> <p>Lack of delivery of service objectives</p> <p>Buying in of consultancy/temporary staff</p> <p>Fines and costs</p> <p>Increased demand for services and scarcity of labour / Delays in delivery of services</p> <p>Increased sickness absence</p> <p>Reduced productivity</p>	<p>Recruitment drive to fully staff and up resource new programmes of work</p> <p>BC Plan for single points of failure</p> <p>Workforce Planning - Organisational Development Plan, personal reviews and succession planning</p> <p>Business Strategy</p> <p>Agile working Policy. Emerging Health and Wellbeing Flexible Working Policy</p> <p>Monitoring of workload of staff at service, team and individual level. Additional short term staff resource (where possible) / Prioritisation of tasks / Risk Based approach</p> <p>Creation of Health & Safety Co-Ordinators. Partnership arrangements for Resilience Officer to improve resilience in these key areas. .</p> <p>Employee Support Scheme and other wellbeing support</p> <p>Maximisation of external funding to support service delivery</p>	4	4	16	High
12b	Capacity and Resilience of the Control Centre	Executive Director - People & Head Of Health Integration and Communities	<p>Loss of staff due to sickness and resignation to deliver Control Centre Service and Out of Hours Service</p> <p>Digital switch over rendering analogue equipment and IT unsuitable</p> <p>Lack of capital for digital equipment investment and increased running costs</p> <p>Call drop out rates increasing due to digital switch increasing the stress on staff</p> <p>IT failures impacting external control centre cover where staff are not in place</p>	<p>Insufficient staff to deliver the service safely. Shifts left uncovered</p> <p>Contract for external Control Centre cover not in place due to IT/VPN issues</p> <p>Emergency alarm calls go unanswered, risk to health and life of residents reliant on the service.</p> <p>Out of hours call not answered, emergency repairs not being delivered, statutory emergency response to emergencies such as homelessness, unsafe building, environmental issues not being provided.</p> <p>Shifts covered by staff who are not fully trained, leading to mistakes and risk to health and life of residents reliant on the service and out of hours services not being provided correctly.</p> <p>Reputational damage to the council including impact on collaborative working relationships with partners and stakeholders.</p> <p>Increased sickness absence</p>	<p>Cover from within existing team, however not sustainable owing to high staff absence.</p> <p>Recruitment to fully staff. Training will be required to be provided to those recruited however all recent recruitment has been unsuccessful in securing candidates</p> <p>Temporary short-term cover from wider housing team with previous knowledge of the service in the event of emergencies</p> <p>As and When Register Review and investigate recruitment agencies (not an immediate solution)</p> <p>Contract in place with Careline to externally divert calls when shifts cannot be covered and an in person option in place if IT fails to have a Careline employee on site at Wherry Way.</p> <p>Review of long term future of Control Centre and Out of Hours approved by ELT and options being explored with TSA consultant to put in place a long term solution including digital switch.</p> <p>Sickness absence management</p>	4	5	20	Very High
13	Changes in Government policies	CEO	<p>Insufficient focus of organisation on “bigger” picture</p>	<p>Loss of funding / funding opportunities</p> <p>Insufficient preparation for policy changes/ new responsibilities</p>	<p>Business Strategy</p> <p>Resource and waste strategy is currently out to consultation- Consultation are responded to and go through decision process</p>	3	3	9	Medium

14	Delivery of long term strategic objectives	ELT	<p>Council focuses on the issues of the day rather than a vision for the future</p> <p>Lack of political direction for strategic objectives</p> <p>Financial resources unavailable for to deliver the aims and ambitions identified</p>	<p>Non delivery of strategic objectives</p> <p>Negative impact on residents of the Borough</p> <p>Loss of reputation</p> <p>Implications on future funding / grants</p> <p>Timescale of projects not met due to unavailability of resources</p> <p>Impact of unexpected increased of project costs (e.g. resources, increasing costs)</p> <p>Pressure on finances</p>	<p>Medium Term Financial Strategy</p> <p>Service Planning</p> <p>Corporate plan & Annual Action Plan</p> <p>Great Yarmouth Economic Growth Strategy</p> <p>Local Plan Core Strategy adopted and Local Plan Part 2 adoption November 2021 (to 2030)</p> <p>Investment (Town Deal / Future High street Fund Etc)</p> <p>Business Strategy</p> <p>Levelling Up Agenda</p>	<p>2</p> <p>4</p> <p>8</p> <p>Medium</p> <p>↔</p>
15	Lack of community cohesion / community tensions	Executive Director – People	<p>Social changes / immigration / increase in unemployment</p> <p>Financial hardship cases due to energy cap and rising in energy and food costs</p> <p>Clinically Extremely Vulnerable (CEV) residents and Potentially Vulnerable People (PVP) requiring additional support</p>	<p>Increased reliance on benefits</p> <p>Increase neighbourly tensions/disputes owing to Lockdown measures</p> <p>Dispersal area for asylum seekers</p> <p>Increased joblessness</p> <p>Increased homelessness</p> <p>Pressure on health, social care & welfare services</p> <p>Issues with equality of access to services</p> <p>Increased crime rates and an increase in hate crime</p>	<p>Continue to work on the close alignment of front-line services to ensure residents get the help and support they need through Multi-agency working across Public Health, Norfolk CC, Police, Integrated Case System (ICS), the two Primary Care Networks (PCNs) in the borough and the JPUH.</p> <p>Support the commissioning of Information, Advice and Advocacy (IAA) services by partners and support local VCFSes which are delivering IAA contracts and support.</p> <p>Close working with the ICS in its Health Equality framework.</p> <p>Two Community Hub multi-agency operating models are in place: one covering the Great Yarmouth & Northern Villages PCN area (located in GFH) and one for the Gorleston and Southern Parishes PCN area (located at Shrublands).</p> <p>Community Managers supporting the two Community Hubs whereby residents and statutory/VCSE partner agencies collaborate to find solutions, support community capacity-building and thereby diffuse tensions and support social cohesion.</p> <p>Targeted work with the police and other partners to address new and emerging issues relating to housing enforcement, domestic abuse, community tensions and ASB</p> <p>Deliver the Household Support Fund to support residents in hardship while the fund is available.</p> <p>Community Marshal Team - to support GYBC and other Partners within the Health and Wellbeing Partnership with outreach work for health and equalities</p> <p>Continue to run and develop the Community Champion Programme and take part in Community Voices alongside facilitating the Multi cultural and faith network as a monthly meeting to share and understand issue in the community</p>	<p>2</p> <p>4</p> <p>8</p> <p>Medium</p> <p>↔</p>
16	Infrastructure not being able to meet demand	Head of Growth & Capital Projects & CEO	<p>New development (commercial and housing)</p> <p>Lack of services (education/health/social)</p> <p>Stalling of further investment</p> <p>Compliance with Natural England requirements that development in some catchments cannot proceed if it increases levels of nutrients. Development can only proceed if 'nutrient neutral'.</p>	<p>Increased traffic congestion</p> <p>Lack of services (education/health/social)</p> <p>Stalling of further investment</p> <p>Compliance with Natural England requirements that development in some catchments cannot proceed if it increases levels of nutrients. Development can only proceed if 'nutrient neutral'.</p>	<p>Local Plan, Infrastructure Plan and Great Yarmouth Transport Strategy. Opening of the Great Yarmouth Third River Crossing in early 2024 is a key piece of strategic infrastructure being delivered. Continued engagement with A47 Alliance to deliver improved trunk road connectivity.</p> <p>Ongoing engagement with partner organisations for funding e.g. New Anglia LEP, National Highways, Clinical Commissioning Group, Anglian Water, Environment Agency, Norfolk CC etc</p> <p>Local Plan Core Strategy adopted and Local plan Part 2 adopted</p> <p>GY Transport & Infrastructure Steering Group established and meet regularly</p> <p>Part of Norfolk Growth Group to deal with strategic planning framework</p>	<p>3</p> <p>3</p> <p>9</p> <p>Medium</p> <p>↔</p>

17	<p>BT upgrade network from analogue to digital by 31st December 2025</p> <p>Caister exchange upgraded 2nd August 2022</p> <p>https://www.openreach.com/upgrading-the-UK-to-digital-phone-lines</p>	<p>Executive Director - People, Head Of Strategic Housing & Head of Health Integration & Communities</p> <p>Head of Housing Assets</p> <p>Interim Health and Safety Compliance Manager</p>	<p>Community Alarms</p> <p>There are c900 community alarms and 80+ Be at Home alarms in the Borough linked to the GYBC Alarm Receiving Centre. The effectiveness of these alarms will be compromised as areas are upgraded to digital and there is no roadmap for that rollout</p> <p>Demand for digital alarms outstripping current supply for some providers. Plus, issues with suppliers obtaining some components required to manufacture the alarms make obtaining alarms difficult.</p> <p>Use of analogue equipment in a digital area increases the risk of line drop out</p> <p>No identified council funding to upgrade all the alarm units to digital or to cover the increased costs of these units and digital software to receive the calls</p> <p>Sheltered Housing</p> <p>33 sheltered sites totalling 945 properties that rely on analogue phone lines for the hard-wired warden call system.</p> <p>Two sheltered sites in Caister totalling 70 properties.</p> <p>The central dialler (Rack) on each of the 33 sites will need upgrading including installing battery back-up to ensure the service can be maintained.</p> <p>GYBC Housing Stock and Council Buildings</p> <p>Emergency phonelines in lifts rely on an analogue phone line</p>	<p>Risk of emergency alarm call failing when the client presses the alarm in an emergency to request help. Assistive technology connected the alarm would also not work.</p> <p>Risk to client's health and wellbeing.</p> <p>Reputational risk, leading to a decline in cut in the service will impact revenue as number of clients could decline.</p> <p>Increased costs to the council outside the allocated budgets.</p> <p>Sheltered housing tenants may not be able to use their alarm to call for assistance in an emergency. Assistive technology connected the alarm would also not work.</p> <p>Risk to tenants' health and wellbeing</p> <p>If power goes out there is a risk that any one trapped in a lift may be unable to use the dedicated alarm call to raise a call to allow them to be rescued and communicate with the Control Centre pending their rescue</p>	<p>Use available funds to upgrade alarm units where known rollouts take place including the Be at Home temporary alarms for hospital discharge</p> <p>Working with TSA consultants to determine a suitable path to an end to end digital alarm provision for a long term solution</p> <p>The council deploys only digital GSM alarms now, which work off the mobile network and have built in battery back-up of 36 hours.</p> <p>Prioritising Caister to replace wired analogue alarms with GSM digital alarms as more become available.</p> <p>Temporary staff resource to support with distribution of the new digital GSM alarms</p> <p>Access to the BT Stop Sell list which lists the areas that are digital and where BT will Stop providing analogue lines and instead Sell fibre.</p> <p>Capital bid to upgrade sheltered housing racks.</p> <p>Trialling digital alarms from an alternative provider, with a view to placing an order. This provider has more stock availability than the current provider</p> <p>City Fibre are investing £15m to deliver fibre to the premises from 2023-2025</p>	4	5	20	<div>Very High</div> <div>→</div>
18a	Sufficient resources and resilience to ensure effective procurement.	Head of Legal & Governance (Monitoring Officer)	<p>Corporate procurement approach not consistently adopted</p> <p>Services delivered on behalf of the Council not provided as expected by large/significant contracts / partnerships</p>	<p>Benefits of procurement strategy not realised</p> <p>Efficiency savings not made or contract fail</p> <p>Procured service not value for money / poor</p> <p>Ensure compliance with legislation / regulations and Councils processes and procedures</p> <p>Adverse impact on service delivery and consequential publicity and reputational damage</p>	<p>Engagement of Procurement Specialist consultant</p> <p>Adherence to new Contract Standing Orders</p> <p>Procurement Strategy has been updated and partially implemented - training and awareness how we can build additional objectives and values and development of guidance on The Loop</p> <p>Procurement Strategy has been updated and partially implemented - training and awareness how we can build additional objectives and values etc</p> <p>Management Team training to be delivered on new procurement bill and appropriate use of frameworks</p>	3	4	12	<div>High</div> <div>↔</div>

				Statutory requirements not met	Publication of transparency requirements for procurement of contracts and internal publication. Review of contract management and procedures.					
18b	Sufficient resources and resilience to ensure effective contract management	Management team	Failure to managed contract performance and corporate approach not consistently adopted Contracts not managed / used to full potential and financial benefits not received by the Council Contracts not able to be terminated / reviewed before contract end date Contractor / business failure unable to deliver contract	Increase budgets Contract disputes / Partners not engaged and bad relations Penalties and costs Reputational damage if not managed effectively Services not delivered efficiently	Staff training and guidance on The Loop Consistent management and publication of Contract Register. Review of Contracts Register to ensure accurate and up to date Contract standing orders contains a section on Contract Management Performance monitoring and reporting to ensure good service quality and better value for money Appropriate governance principals and risk management in place - Risk Register Consideration of dedicated contract management roles within services to improve accountability & capacity for managing major contracts. Role of contract manager defined. Increased ownership and accountability on officer leading on particular contract. Ensure lead officers on contract are supported and given mechanisms to manage contracts effectively	4	3	12	High	↔
19	Change Management	Head of Organisational Development	Key changes managed ineffectively	Service delivery is affected during implementation Staff resource needed to undertake review Council fails to capitalise on opportunity Targets not achieved Funding is missed Resources wasted Significant increase in construction costs, materials, plant and resource availability and hyper inflation Loss of key staff & staff morale	Business Strategy and Change Management Policy Application of a formal programme management framework Monitoring of project plan Ongoing assessment of the project risks Organisation Development Plan Departmental Managers Meetings Equalities and Diversity Inclusion Strategy and delivery Plan Staff Engagement Group and programme	3	2	6	Medium	↔
20	Tree, open and play spaces management	Director of Operational Services, Head of Environment and Sustainability & Head of Property & Asset Management	Failure to managed tree inspection and land management	Insurance claims and increased insurance premiums Clarity on ownership of land across the Borough Budget / maintenance requirements	A review of current inspection policy to ensure compliance with best practice To include all amenity land within the Concerto Asset Database to provide a comprehensive database of ownership. Tree Strategy currently being reviewed - trees are being inspected but policy needs to be reviewed and formally adopted by GYBC Trees for city funding - maintenance funding for three years and Market Place public realm funding	4	3	12	High	↔
21	Loss of Reputation	ELT / Head of IT, Marketing & Comms	Lack of transparency in decision-making process Factually incorrect or negative media reporting Inability to attract investment	Lack of trust from residents Loss of confidence from investors and key partners - project delivery Lack of sense of pride in the Place - don't managing flooding or finances	Clear and accurate Cabinet and Committee reports with recorded decisions available in the public domain Maintenance of a timely and effective relationship with representatives of the media/press. Clear communications plans in place to promote the council's Corporate Priorities & also for projects. Transparent stakeholder engagement incl. planning and evidence-gathering.	3	3	9	Medium	↔

					Risk associated with joint ventures and other council funded partners. Understanding funding requirements and monitoring spend and delivery				
22	IT systems capability and interaction	Management Team, Head of IT, Marketing & Comms & IMT Manager	Some system will no longer be supported / maintained by the IT provider. Therefore has become unfit for purpose and causing service interruptions and issues	System costs are disproportionately costly based on functionality of system Upgrades costly Week in arrears - loss of possession cases due to the way information is held Service interruptions and issues - resource implications No document management - required to use two systems - increased risk of error Increase functionality Systems don't talk together Reduced productivity, increased timescales for completing tasks.	Aware of limitations of systems Procurement of new systems Internal processes to manage Using as effectively as can and aware of weaknesses Sub marketing testing Road map / action plan of systems to be addressed and detailed business cases presented for approval to the IT Investment Group Digital transformation and strategy Flexibility within home/office arrangements to minimise impact on productivity	4	4	16	High ↔
23	Gaps in Insurance cover - insurers reducing cover in place with the result that Council assets may not be adequately covered	Executive Director - Resources	Reduced level or removal of cover provided by insurers Inadequate or no insurance cover could have significant financial implications, dependent on the value of the asset and the extent of the damage / loss. Impact on increased financial risk to the Council due to the removal or reduced level of cover	Increased self insurance and insurance reserve Increased project costs	Updated MTF5 to earmark funds for self insurance including re-allocations to the insurance reserve. Annual review of insurance cover Consultation with insurers for all major projects / development and business activities Revaluation of assets in light of inflation	2	3	6	Medium ↔
24	Failure to reduce the Carbon footprint of the Council as an organisation and Housing Stock Failure to embrace sustainability and mitigate the impact of climate change	Executive Director - People & Head of Environment and Sustainability	Unable to effectively meet commitments identified with Carbon Reduction Plan including key milestones resulting in the Council not meeting its own carbon emissions target as being Net Zero by 2035. Not effectively encouraging communities, businesses and individuals to mitigate their own contribution to and adapt to climate change Not able to meet the council's commitment to reduce its carbon footprint and be at Net Zero by 2035. Unable to out in place internal initiatives & support external partners, local groups & community-led projects to positively impact on the Climate, Biodiversity and Waste Challenges set-out in the Great Yarmouth Sustainability Strategy	Negative impact on the Council's reputation Long term impact on the environment, economy, communities, biodiversity, health & wellbeing. Communities not supported effectively or encouraged to reduce carbon emissions Future benefits and opportunities to embed carbon reduction in supply chains not fully achieved.	Partnership working with other authorities and organisations via the Norfolk Climate Change Partnership (NCCP). Embed carbon reduction/Net Zero in all council policies, plans and procurements/supply chain Ensure adequate staff resources to co-ordinate and lead on direction of travel corporately. Climate Change Officer recruited - role to include monitoring of carbon footprint Increased flexibility of working procedures and review of policies including home working and remote meetings. Collaboration with staff and key stakeholders including working with New Anglia LEP and Norfolk CC. Joint member and officer groups to influence County decisions Increased understanding and working with communities and businesses via the facilitation of a Great Yarmouth Sustainability Forum.	3	4	12	High ↔

				Negative impact on staff and member morale Negative impact on confidence of partners	Strategic plans in development setting out actions and what is to be delivered Increased understanding and working with communities and businesses via the facilitation of a Great Yarmouth Sustainability Forum. GY Transport infrastructure group - drive to more sustainable transport - e-scooter, walking, cycling buses - drive to improve the network Great South East Net Zero - funded by central government - Working with public sector organisations and their stakeholders to support the development and financing of local energy projects Review of assets - feasibility study		
25	Management and monitoring of Subsidiary Companies	ELT					
25a	Equinox Enterprises Limited and Equinox Property Holdings Limited	Executive Director - People & Head of Housing Assets	Failure to comply with obligations to Council and meeting own statutory obligations Failure to communicate and consult with key stakeholders Failure to deliver outcomes of Business Plan	Fines and costs Adverse impact on service delivery with consequential publicity and reputational damage. Increased budgets Reputational damage if not managed effectively Significant financial implications and statutory requirements not met. Companies unable to meet outgoings	Reports to Cabinet Board meetings Monitoring of accounts and performance Service level agreements Regular reviews of financial position, clear financial parameters for investment and new schemes. Ability to sell assets to support cashflow and repay debts	236	Medium ←
25b	Great Yarmouth Services Limited	Executive Director - People, Executive Director - Resources & Director of Operational Services	Failure to comply with obligations to Council and meeting own statutory obligations Breach of Teckal regulations Failure to comply with legislation Failure to communicate and consult with key stakeholders Failure to deliver service	Fines and costs Adverse impact on service delivery with consequential publicity and reputational damage. Increased budgets Reputational damage if not managed effectively Significant financial implications and statutory requirements not met.	Governance structure - separation of duties Board meetings Reports to Cabinet Monitoring of accounts and performance Service level agreements	224	Very Low ←
26	Change to Cabinet System	Head of Legal & Governance (Monitoring Officer) / ELT & HoS	Decisions could be challenged Unlawful decision or key decisions not considered Underestimating a key decision Deadline and time table difficult to or not meet Misunderstanding of new system Policies and strategies which should be signed off by Cabinet will be signed off by internal arrangements	Longer lead in time for reports Delay in decisions if deadline not met	Training provided to key staff and management Key decision procedure - explains what and how to do it. Report deadline included on forward plan published on SharePoint Scrutiny provided a check and balance element Re-design of website and new report templates - Lessons learnt exercise to be undertaken to understand what has worked well and where improvements can be made.	339	Medium ↔
29	Failure of RAAC elements within properties	Executive Director - Property & Housing Assets	Impact on service delivery due to closure of buildings Loss of revenue due to closure of building Insurance claims and increased insurance premiums / special terms imposed	Insufficient budgets to undertake necessary repairs Reputational damage to GYBC Increased self insurance and insurance reserve	Identification and assessing the condition of RACC elements to ensure building safety and longevity Desk top exercise undertaken and review of stock condition survey - no RAAC found in corporate portfolio (investment/operational) or Housing stock Review of Government expectations	133	Very Low
CONFIDENTIAL RISKS							
27a	Confidential Risk					3412	High ↔
27b	Confidential Risk					248	Medium

28	Confidential Risk					248	<div>Medium</div> <div>↔</div>
CORPORATE RISKS RECOMMENDED TO BE ADDED							
CORPORATE RISKS RECOMMENDED FOR REMOVAL							