North West Leicestershire District Council

CORPORATE RISK REGISTER

OCTOBER 2025

Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk Score			Likelihood	Impact	Risk Score
CR1	**Safeguarding** **Risk** Death/serious harm to a vulnerable person receiving a Council service and safeguarding compliance is not followed. **Consequence** A serious case review arising from death/serious harm to a customers and staff. Reputational damage to Council. Loss of confidence in ability of Council to deliver services. Ensuring compliance with Safeguarding legislation and practise.	4	3	12	**Treat**	Head of Community Services, Housing and Head of HR & Organisational Development.	3	2	6
Existing Controls	- An identified Corporate Leads: Head of Community Services and Head of HR and Org Development - An identified team responsible for Safeguarding (Community Safety) with responsibility embedded into Team Leader role and Community Safety Officer- Safeguarding Lead officer - An agreed Safeguarding Policy refreshed as required. Updated in 2024, refreshed in 2025 - An identified group of Designated Safeguarding Officers (DSO's) and Safeguarding Service advisors - A mandatory training programme for DSOs and service advisors every three years and quarterly team meetings, updates and training - A mandatory online training programme is in place for all staff with refresher training carried out every three years. - Safer Recruitment training is carried out for managers and safer recruitment is included within the Recruitment Guidelines. - The DBS and Barring Policy is in place and up to date. - A quarterly senior management review by the Head of Community Services of all cases to check progress/close cases. - Annual report to CLT and Corporate Scrutiny as required by exception. - A case management review meeting by Environmental Health & Community Safety Team Manager and Community Safety Team Leader to ensure all cases progressed with the Safeguarding lead officer. - Commitment to raise awareness of the scale and extent of modern slavery in the UK and ensure our contracts and supplies don't contribute to modern day slavery and exploitation. - A computerised system of reporting and managing reports introduced in 2019, ensures constant reminders of new cases, sending alerts at all points in the procedure.								

	• There is now a requirement for suppliers to provide details of their safeguarding policies or agreed to adopt the Council's safeguarding policies as part of the Council's tender process. • Health and Safety Policy • Managers within the relevant services have a legal requirement to conduct regular risk assessments. • Staff induction training. • Annual reminders to complete/update health and safety risk assessments • Review of the referral process for safeguarding referrals has been implemented in 2024/2025 • Review of the performance indicators for the safeguarding referral service has been implemented • Training provided for new DSO's and refresher training for existing DSO's in July and August 2025. Safeguarding lead officer continues with meeting all DSO's and provides relevant updates and information sharing, best practice etc.		
Planned mitigating actions		**Delivery timescales**	Ongoing
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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CR2	**Management of Council finances** **Risk** Reduced funding from Government. Increased demand for services, coupled with high inflation and pay awards has led to a funding gap over the medium term. Government plans reduction in business rates share to the Council. Changes to the local authority financial settlement. Economic downturn / recession. Commercial opportunities not progressed. Changing rent policies. The new Food Waste collections to be introduced in 2025/26 has a risk of insufficient revenue funding from Government being provided. The Council's consultations in respect of Business Rates Retention and the Fair Funding Review issued in 2025, suggest that the Council may face significant losses in terms of business rates growth. The Council's finance system, Unit4, requires enhancements following implementation in April 2023 to ensure that financial information is timely and accurate to support decision making. **Consequence** Possible cessation of services or reduction of services provided. Central government intervention and special measures if Council issues a S114 notice. Inability to deliver Council Delivery Plan as resources are restrained. Potential staff redundancies. Funding of external groups is withdrawn. Potential breach of statutory duties/ability to deliver objectives compromised.	4	3	12	**Treat**	Head of Finance	2	3	6

Existing Controls	- Regular financial reporting to CLT and quarterly to Cabinet. Improved narrative on reports to Cabinet as well as additional reporting which tracks progress against savings targets. - Audit and Governance Committee have received regular reports regarding the Council's progress in respect of completing the Statement of Accounts for 2023/24 and 2024/25, the last report being considered by the Audit and Governance Committee on 4 June 2025. - Financial Regulations form part of the Council's Constitution. Contract Procedure Rules were updated and approved by full Council in February 2025 to reflect the Procurement Act 2023 which was introduced on 24 February 2025. - Financial planning processes are documented and reviewed regularly. - No risky investments. - Capital is funded from the Council's business rates growth. - Enhanced governance around capital strategy spending, monitored/scrutinised by Capital Strategy Group. - Monthly Statutory Officer meeting. - Robust level of general fund and earmarked reserves. - External support for technical finance/accounting i.e. Arlingclose (Treasury Management) and PSTax (VAT). - Medium Term Financial Plan in place and is updated as part of the budget setting process. - A clear financial strategy was established as part of the budget setting for 2023/24. - Head of Finance monitoring of Local Government funding reviews - business rates review not expected until 2026/27 and fair funding review delayed again. - Funding advisor engaged. - Participation in Business Rates Pooling. - Accessing external funding where appropriate. - Income collection procedures in Revenues and Benefits Service and Housing sound. Leicestershire Revenues and Benefits Partnership has two trained officers working solely on Council Tax Reduction Scheme Fraud and act as Single Point of Contact for Department of Work and Pensions (DWP) referrals. - Capital Strategy to use business rates reserve to fund the capital programme - Transformation Programme in train to support the closing of the funding gap. - Contingency budget was created in 2025/26 budget to manage the risk of insufficient ongoing revenue funding for food waste - The Statement of Accounts 2021/22 and 2022/23 were signed off by Audit Committee on 9 December 2024. - The Council has agreed provisional dates for completion of the Statement of Accounts 2023/24 and 2024/25 with the external auditors, Azets, of 31 August 2025 and 30 November 2025 respectively. - The Council is liaising actively with officials from Government in order to negate a 'cliff edge' funding loss over the medium term. - The Council responded to the Fair Funding Review 2.0 Consultation, details of which were reported to Cabinet in September 2025. - Work is ongoing with S151 Officers across the county to consider the financial implications of moving to Local Government Reorganisation. The group meets on a regular basis. - In response to recent delayed payment of invoices to some suppliers, the Council has implemented temporary resource. The implementation of an automated invoice payment system in September 2025 will speed up the payment of invoices. Where appropriate, the Council is working with suppliers to ensure prompt payment. - The Council has an internal Steering Group in place to oversee enhancements to the Unit4 system. - Priorities have been identified for Unit4 enhancements and work has been ongoing with the implementation partner to implement necessary changes.

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	- A dedicated temporary Project Manager has been employed to oversee system enhancements - The support contract for the Unit4 system is due for renewal in December. The Council is actively exploring its options to ensure robust support is provided.		
Planned mitigating actions	- Compliance with CIPFA and accounting codes in meeting the revised backstop dates to ensure that the closure of the 2024/25 Statement of Accounts aligns with the statutory deadline. - Address internal control weaknesses identified in a range of finance audits - Action Plan developed to address financial management weaknesses which is monitored by the Finance Leadership Team - Unit 4 to be developed to provide timely and accurate budget monitoring for all key stakeholders. Project manager with Unit 4 experience employed to address outstanding issues with priorities identified. - MTFP to be further developed to include sensitivity analysis and presented to Cabinet in November 2025 - Additional third party support has been sourced to assist with key reconciliations to support the closedown process.	**Delivery timescales**	April 2027
		Reason for delay in delivery	
Comments and progress on actions	**Stable** A project board oversees the financial systems work. The closure of the Statement of Accounts 2023/24 has been completed and 2024/25 is currently on track. Budget setting for 2026/27 has commenced with a focus on identifying savings over the medium term.		

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		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR3	**The employment market provides unsustainable employment base for the needs of the organisation.** **Risk** The Council is exposed to strategic and operational risks due to an unsustainable external employment market that fails to meet its workforce needs. Limited availability of skilled candidates, increased competition, and shifting labour market dynamics hinder recruitment and retention efforts. **Consequences** This may lead to prolonged vacancies, reduced service delivery capacity, increased reliance on agency staff, higher employment costs, and challenges in maintaining statutory and strategic commitments The Council is unable to perform its statutory duties and/or deliver the Council Delivery Plan. The Council's partners are unable to perform duties. Use of external resources at a significantly higher cost	2	4	8	**Treat**	Head of HR and OD	2	2	4
Existing Controls	• Advance planning to mitigate this risk; • Non pay benefits improved during the last year to attract and develop the right skills and promoting existing staff talent through secondments and tailored development programmes. IIP silver award maintained in 2025. New focus on apprenticeships development to allow the Council to 'grow our own' and to tackle ageing workforce distribution. • Ability to divert resources from other services, bringing in additional resources from other sources (e.g. Agencies, Consultants, Voluntary/ Community sector etc.) would be activated. • Market conditions are tested through recruitment processes, some challenges in some specialist areas. Market supplements and other measures are applied as needed where there are recruitment difficulties in some professional areas.								

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	- The Council can offer a package of additional benefits to enhance the recruitment offer. - Mitigations in place for variety of staffing related aspects - e.g. mental health awareness, overall wellbeing work etc. - The Council has developed innovative partnering relationships with other sectors including the private sector to make posts uniquely attractive. - The Council's recruitments processes have been reviewed to make the process easier. - Recruitment and retention discussed at CLT in February 2024 and a sub-group has been established to consider potential future improvements to inform and update a new People Plan. - Work is underway at a national and regional level working with East Midlands Councils and the Local Government Association to promote the local government sector. National campaign to launch in November 2024. - New agency request process to reduce reliance on agency workers and ensure permanent recruitment takes place. - Utilising specialist agencies for hard to fill roles

Planned mitigating actions	- Constantly reviewing its advertising strategies. - Specialist journals and their associated websites are also used depending on the role. - Social media is also used for advertising roles. - Retention project underway with LGA to support and encourage retention - Recruitment Refresh which includes: - Reviewing and updating our application form and interview process - Setting up HR clinics - Improving the content on our website and social media channels regarding recruitment and promoting NWLDC as an employer Updating our recruitment policy and creating guidelines for managers	**Delivery timescales**	April 2026
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR4	**Personal data breach** **Risk** Loss or unlawful use of personal data constituting a breach of data protection legislation. Systems not in place to protect sensitive data. Staff are not properly trained in managing information and do not follow internal procedures. **Consequences** Monetary penalties from Information Commissioners Office (ICO), adverse publicity, private litigation and personal criminal liability of officers.	4	3	12	Treat	Head of Legal and Support Services	2	2	4

Existing Controls	• Policies and procedures are in place and rolled out • The Information Governance polices have been reviewed and brought together under an Information Governance Framework which was approved by Cabinet in September 2024 Corporate Governance training is undertaken annually and includes information governance as appropriate to reflect changes in legislation. eLearning module updated and rolled out as mandatory annual training for all staff. Information Governance training delivered to leaders in November 2023. • The Council has a dedicated Senior Information Risk Officer (SIRO) and Data Protection Officer (DPO). • Quarterly meetings with Information Governance team and SIRO • Annual SIRO report considered by Audit and Governance Committee in April 2025 – provided overview of the Council's compliance in relation to regulatory requirements, management of information risk across the Council and work done over the year. • Training on information governance and data protection was delivered to the Corporate Leadership Team and Extended Leadership Team in November 2024 as part of the Corporate Governance training programme.		
	• Information Governance Team to cooperate with the supervisory authority and monitor compliance with Data Protection laws.	**Delivery timescales**	Ongoing

Planned mitigating actions	- Quarterly meetings with Information Governance team and SIRO to continue - Annual SIRO report 2025/26 to be taken to Audit and Governance Committee in April 2026 - Information Governance Framework will be reviewed in 2025/26 alongside other corporate governance policies. - Corporate Governance training programme in November 2025 to include an update on information governance and data protection	Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR5	**Procurement and management of contracts** **Risk** Contracts have not been adequately secured and administered. This can lead to a range of issues, including suboptimal terms, potential legal disputes, and financial losses. Legal and procurement teams are not consulted when contractors are engaged. Procurement procedures are not followed. The Council contributes to modern slavery via its contracts and supplies. Insufficient resources to monitor and implement contractual arrangements . The Council fails to the meet the requirements of the Procurement Act 2023. **Consequences** Council liable to incur additional costs, contract overrun, litigation and potential health & safety issues as well as service disruptions. Failure to meet the requirements of the Procurement Act 2023 may lead to fines, sanctions or other legal actions, as well as reputational damage to the Council.	3	3	9	Treat	Strategic Director of Resources	2	3	6
Existing Controls	- Oversight board structure in place to oversee major project work and compliance group now in place to oversee these elements of contracted work. - Corporate procurement support and legal team to support where necessary on contract management. - Review of procurement compliance undertaken leading to enhanced contract register and updated strategy - Processes have been reviewed and procurement templates revised. - V4 have been employed as the Council's Procurement partner to provide day-to-day advice and support. - A refreshed Procurement Strategy was approved by Cabinet on 25 March 2025. - Contract Procedure Rules updated and approved by Council in February 2025 to reflect the Procurement Act 2023. - Procurement Officer and V4 meet quarterly with Directors to discuss pipeline projects								

Planned mitigating actions	- Procurement toolkit to be produced to cover majority of lower value procurements with high value and complex procurements to be supported by specialised function. - V4 are continuing to work with services to ensure an accurate contracts register is published and maintained. - Implement wider procurement response outside of financial to determine the competency of a contractor to undertake work – Health and Safety (H&S) competency, training, quality, environmental etc - Review of the Contract Procedure Rules as part of the constitution review to address any changes required since they have been operating in practice - Contract management training for relevant officers to be delivered - A suite of procurement training is scheduled throughout 2025 to ensure officers are aware of the changes to processes as a result of the introduction of the Procurement Act 2023. Further communications are required across the Council to ensure that officers are complying with the Procurement Act - HRA Procurement Officer to be recruited to support the service in the development of housing contracts	Delivery timescales	December 2025
		Reason for delay in delivery	
Comments and progress on actions	Stable		

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Ref		Risk description		Inherent Risk			Risk Response	Risk Owner	Residual Risk		
				Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR6		**Emergency response** **Risk** Failure to respond to an emergency event in an appropriate manner. Lack of planning, training and exercising of Emergency plans. **Consequences** General public at risk of harm or unable to access relevant services (e.g. emergency accommodation or rest centre).		3	3	9	Treat	Head of Human Resources and Organisation Development	2	2	4
Existing Controls		• Business continuity plans have been reviewed and updated at Head of Service level as part of the 2025/26 business plans process. LRF and Council emergency plans and arrangements are being constantly updated and have been used during recent storm flooding events that have affected the district in late 2023 and early 2024. Exercises also take place at regional and national level for a variety of emergency planning scenarios. • The LRF partnership arrangement with all Leicestershire and Rutland authorities provides resilience during civil emergency situations. • Business Continuity exercises show the readiness of the Council to deal with emergencies. System of ICO / FLM duty rotas is in place and continued reassessment for ongoing incidents. COVID experience shows capability and ability to perform. • LRF delivered training to the Corporate Leadership Team in 2024 • Senior managers attend LRF situational based training. • ICO's and FLM's issued with guidance documentation to support their roles. • Continual development training and updates provided by Local Resilience Forum									
							Delivery timescales	Ongoing			

Planned mitigating actions		Reason for delay in delivery	
Comments and progress on actions	Stable		

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Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR7	**Cyber-attack** **Risk** Systems not in place or kept current to deflect any foreseeable cyber-attack, including those attackers using generative AI, which is increasing in the industry. Limited staff awareness of possible threats. Lapse in security awareness and basic processes from a technical AI and human perspective **Consequences** Business as usual" would not be possible. Cost of repelling cyber threat and enhancing security features.	4	4	16	Treat	Head of ICT	2	2	4
Existing Controls	• The Council receives security and cyber-attack feeds daily from various sources including Local Governemnt Association(LGA), National Cyber Secuirty Centre(NCSC), East Midlands Warning, Advise and Reporting Group (EWARPG), Active Cyber Defense (ACD) Early warning system, this helps us remain on the front foot when it comes to being alerted to potential vulnerabilities and cyber-attacks. • Fully resilient network environment in place with no single points of failure for core systems. Systems which are running on premise have a daily off-site backup regime. In the case of on-premises systems which become unavailable for any reason, services would need to revert to their service BCP's to resume service. • Yearly IT security health check and PEN (penetration) testing is carried out, by an Identity Attack Surface Management (IASME) security accredited supplier, with remediation action plan in place to mitigate any risks found. In 2024 the Council had 0 critical, 5 high, 15 medium and 31 Low issues. These have been remediated with only 3 medium risks remaining. The Council has also passed our Public Services Network (PSN) accreditation for 24/25 and working on 25/26 renewal. • Phishing campaigns run four times a year to test staff security awareness and feedback results to CLT, with improvement plans in place for those who have not passed the test. Campaigns will now include members as they were excluded previously. The quarterly results from these phishing campaigns shows that we are moving in the direction when it comes to user security awareness and education. • Quarterly Cyber security awareness training held for staff and new starters, to protect staff at home and in the office. • Yearly mandatory information security training conducted for all staff on the Skills gate training system. • New business systems are run in remote fully resilient data centres and existing systems are being progressively migrated to cloud computing centres • Diversity of environments used to avoid single point of failure risk, with backups now in the cloud, for Office 365 and storage data. • Improved business recovery arrangements have been implemented to minimise recovery time.								

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	• Accreditation to Cyber Essentials and the Public Services Network. • Latest audit / assessments all confirm secure environment with reasonable assurance. Some formalisations of processes required and review of backups restoration window. • Purchase of external vulnerability scanner now in place. This allows the Council to scan and monitor its external perimeter daily and proactively mitigate issues. Cloud Centre of Excellence (CCOE) latest scan showed 23 medium and 102 Low Vulnerabilities, which the Council is working to mitigate using the tool which it has been purchased. • An annual external IT audit assessed the organisation's IT arrangements in a range of areas against best practice. The outcome of the audit in 2024 was, limited assurance, with two critical recommendations and twelve mediums, The two high recommendations have been resolved, as well as the nine mediums. Three remediations due for completion in December have been completed. • The Council has signed up to the Cyber Assessment framework (CAF), which is another cyber assessment carried by Cabinet Office. This has now been completed successfully, and we are starting the 2nd phase of the CAF framework assurance. • Backups are now stored in the cloud as "offline backups", this is for all Council data and Office 365 tenancy • Active Directory (AD) password complexity has increased from eight characters to 12 characters. This makes it harder for password to be cracked • Replacement of firewalls now in place providing NEXGEN protection • Password protection now implemented so that when staff change AD passwords, they are checked against a Microsoft database of known weak passwords. This will prevent the use of insecure and weak password in the Council. • Internal audit recommendations two remaining to be completed by Dec • IT risk register has been updated to capture specific cyber risks and mitigations.

Planned mitigating actions	• Need a list of business-critical systems in order of restoration priority, in conjunction with CLT • Introduction of Microsoft Co-Pilot AI, AI governance controls, and guard rails required before implementation of AI • Review AI threat landscape and attack vector • Development of Cyber Security Strategy document as per external audit recommendation	Delivery timescales	Ongoing
		Reason for delay in delivery	

Comments and progress on actions	**Stable** Good progress on keeping staff and the business secure.

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CR8	**Project Management Processes** **Risk** Projects are poorly managed. Failure of proposed projects could result in failure to achieve overall objectives. Inefficient use / waste of resources. **Consequences** Failure to implement project management techniques. Poor corporate oversight of projects. Inadequate controls on expenditure and poor budget monitoring. Inadequate monitoring of external contracts. Failure to engage project management expertise when required	2	3	6	Treat	Director of Resources	2	2	4
Existing Controls	- Greater use of professional project managers for key projects. - Work ongoing to address project methodologies deployed across the Council. - Greater use of external / non-subject board members. - Board structure covering all major projects in place. - Properly convened project teams with PID and project plan in place, including project risk registers. Progress on corporate projects scrutinised by CLT. Implementation of contract management framework for outsourced services. - Scrutiny of quarterly monitoring reports on capital expenditure. - Deploying Internal Audit to audit individual projects and assess project management effectiveness. - Scrutiny of risk registers or project management framework of individual projects by Corporate Risk Group. - Project management guidance has been developed and published, as well as a suite of templates - Guidance has been developed to ensure that projects report to the appropriate boards or steering groups. - Project Management Training was delivered to key officers in September 2024.								

Planned mitigating actions	• A schedule of all projects across the Council has been developed and will be monitored by the Transformation Steering Group • E-learning module is being developed • Key communication to all staff on the decision-making process across the organisation • A range of internal steering groups are in place for major projects/initiatives	Delivery timescales	April 2026
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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CR9	**Ultra vires decisions/Local authority failure** **Risk** Council makes ultra vires (beyond the Council's powers and functions) decisions or those which it does not have the correct permissions to undertake. Staff / Members proceeding without established governance arrangements. Failure to consult with Legal / Monitoring Officer. There is greater focus from Government and regulators on the local government sector. There is a risk of an impact of an adverse external assessment on the Council. If this risk materialised it could impact on service delivery, performance levels, governance, reputation and decision-making arrangements. Greater focus on the local government sector from Government and regulators following high profile council 'failures'. **Consequences** Potential challenge to decision/litigation against the Council, resulting in increased costs / compensation. Financial, reputational, legal and political damage to the Council.	4	3	12	Treat	Head of Legal and Support Services	1	4	4
Existing Controls	- Constitution reviewed annually – 24/25 review completed, and Constitution approved at Council in Feb 25. - Legal advice provided to officers and legal implications considered in reports to members as appropriate. - Statutory Officer checks take place on reports to Council, Cabinet, Scrutiny, Licensing, Planning and Audit and Governance Committees - Advice provided to members by the MO/Dep MO as needed on matters being considered by Council/Committees. - Policies and procedures in place, governance processes are documented and in operation, ongoing assessments and reviews are performed. - Completion of the Annual Governance Statement. - Corporate governance training on decision making provided in 2023 to CLT/ELT and on report writing process in 2024 - The Council has in place a range of controls including financial procedures, governance framework, performance management framework, project management methodology, strategies, controls underpinning its operations, clear communication with staff, Statutory officer meetings and internal audit plan.								

	• "Golden triangle" of Statutory Officers is in place with monthly meetings of Statutory Officers taking place • Recognised in case study by the LGA for having good governance in place • LGA Peer Review completed June 2024 • Internal audits of finance functions completed. Finance Leadership Team meet regularly to track recommendations. • Where specific regulatory regimens are in place additional oversight and control implemented – e.g. Housing Improvement Board • The Council has completed the Office for Local Government Best Value Self-Assessment and is performing well against the measures. • Corporate Governance Training delivered to Managers in November 2024 • "in session" video in respect of Governance/decision-making recorded and shared with staff in January 2025. • Governance toolkit for officers updated with guidance on decision-making and internal governance processes

| **Planned mitigating actions** | • Annual review of Constitution 2025/26 has commenced
• Legal advice provided to officers and legal implications considered in reports to members as appropriate.
• Statutory Officer checks to take place on reports to Council, Cabinet, Scrutiny, Licensing, Planning and A and G Committees
• Guidance and training to be provided to report authors
• Corporate Governance Training to be provided to Managers in November 2025
• Report authors guide to be refreshed and rolled out for officers
• Programme of governance training, including detailed training on decision-making to be delivered to relevant staff in 2025/26
• Member training programme being developed and delivered to members, including in relation to specific roles e.g. Audit and Governance Committee members | **Delivery timescales** | Ongoing |
| | | **Reason for delay in delivery** | |

Comments and progress on actions	**Stable**

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CR10	**Fraud** **Risk** Council is subject to serious fraud, corruption or theft. Lack of checks and balances within financial regulations. Poor budget / contract management. Poor monitoring of / adherence to financial systems. Changes in working practises causing unintended risk/exposure. **Consequences** Financial, reputational and political damage to Council.	4	3	12	Treat	Strategic Director of Resources, Heads of Service and all Team Managers.	2	3	6

Existing Controls	• A policy framework that includes Anti-Fraud and Corruption Policy, Confidential Reporting (Whistleblowing) Policy and Anti-Money Laundering Policy. Policies refreshed annually. Approved by Cabinet in September 2024. • The Internal Audit annual planning process takes into account high risk areas, which considers fraud risks. Fraud risks are considered as part of specific audits with testing designed to detect fraud where possible. The Council is also subject to External Audit. Internal control and governance arrangements such as segregation of duties, schemes of delegation, bank reconciliations of fund movements, and verification processes. • Participation and strengthening of involvement in National Fraud Initiative (mandatory) • Information on how to report fraud is on the website including relevant links. • A Fraud module is available on Skillgate and will be a requirement to refresh the training every two years.		
Planned mitigating actions	• Fraud discussions and promotion of Fraud policies to be included by internal audit when attending team meetings.	**Delivery timescales**	Ongoing
		Reason for delay in delivery	

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CR13	**Political Administration** **Risk** No overall control of the Council following the May 2023 elections could lead to instability in the decision-making process which could impact adversely on service delivery. The election in May 2023 changed the political make-up of the Council. **Consequences** Financial, reputational and political damage to the Council. Slower decision making.	3	3	9	Treat	Chief Executive	2	3	6
Existing Controls	• There has been extensive work by officers to work with all Groups to minimise the impact. This work has been supplemented by external engagement with the Local Government Association. The work undertaken to date includes regular briefings with all Groups, a member induction programme, a continuing training programme for councillors, clarity on the roles of councillors on each committee and engaging with staff to raise their awareness in dealing with/responding to/working with councillors. • The Strategy Group meets fortnightly to review and steer strategic initiatives. Core membership includes the Leader, Deputy Leader, and Chief Executive, with other alliance members invited as needed. The Chief Executive also holds regular meetings with opposition members to ensure broader engagement. • The Council has in place a range of controls including financial procedures, governance framework, performance management framework, project management methodology, strategies, controls underpinning its operations, clear communication with staff, Statutory officer meetings and internal audit plan. Monthly Statutory Officer meetings • Scrutiny protocol developed and being trialled to improve relationship between Cabinet and Scrutiny now that the Scrutiny Committees are chaired by opposition members								
	• Continued engagement with all groups/members. • Advice provided to members on Constitution to enable members to undertake their roles.				**Delivery timescales**	ongoing			

Planned mitigating actions	•		Reason for delay in delivery	
Comments and progress on actions	Stable			

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Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR15	**Climate Change/Zero Carbon Delivery** **Risk** Inability to deliver programme due to resource / financial / operational / procedural process. Inability to gain action by partners **Consequences** The failure of the Council to achieve carbon neutrality for its operations by 2030 and carbon neutrality for the District by 2050. This may have long term impacts on both the financial picture of the council and the ability of key service provision in the long term.	3	4	12	Treat	Head of Community Services	2	2	4

Existing Controls	• Achievement of the carbon reduction ambitions are mainly vested in our Zero Carbon Policy and Roadmap. The Action Plan contains planned and programmed actions and will be reviewed annually. It will quantify the estimated net financial costs and net carbon savings associated with the contents of the Plan. Attaining the targets in the Plan is one of the Council Delivery Plan Key Performance Indicators. Whilst the action plan has been agreed it does contain several actions where funding has not been committed. The Strategy and Plan have identified the main carbon emissions sources. The Council will be alive to the many and various windfall opportunities for interventions in between the annual Plan revisions where these are considered likely to make significant impacts on reducing emissions. Emerging statute and government policy will exert significant influence over the Council's operations and indirect influence in relation to climate change.		
Planned mitigating actions	• Work is ongoing to understand the costs of zero carbon delivery which in turn will help to understand the risks.	**Delivery timescales**	April 2026
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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Ref	Risk description		Inherent Risk			Risk Response	Risk Owner	Residual Risk		
			Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR16	**Changes in national priorities and legislative/regulatory change** **Risk** Changes in national priorities given the new Government elected in July 2024. This could include changes in delivery of statutory services. Changes in Legislation (e.g., Employment Rights Bill 2024) **Consequences** Council may not have the necessary resources to deliver on key projects. Projects may adversely affect local residents. Introduction of new statutory duties may change the strategic direction of the Council, entail additional workload for officers, change the way existing services are delivered and increase financial pressures.		3	3	9	Treat	Chief Executive	2	2	4
Existing Controls	• Briefings to officers on relevant changes • Working alongside other stakeholders and partner organisations to keep informed of developments such as the Local Government Association, District Councils Network and Leicestershire Chief Executives Group • A range of officers are actively involved in the business case development for Local Government Reorganisation (LGR) in Leicestershire. Significant communication and engagement has taken place with key stakeholders • Members are briefed and debate has taken place at the full Council meeting in respect of LGR • Staff have been provided with regular updates and a staff hub has been established to share information as LGR proposals are developed. • The Council is promoting public consultation the North, City, South website, where residents can review the proposals and provide feedback. The consultation period runs form 9 June to 20 July 2025.									

	• Performance Team to provide regular updates on progress in respect of the Local Government Outcome Framework (LGOF) as these progress and are finalised and to facilitate benchmarking/self-assessment against the agreed metrics. • HR team undertake regular CPD to identify the impact of changes to legislation on policy and Practice •

Planned mitigating actions	• Circulation of relevant briefings to key officers on proposed/new legislation • Effective business continuity planning • Regular updates to Members on developments and potential changes in legislation • Coordination and sharing of information with other local authorities through various networks and forums • Continued staff, member and stakeholder engagement on LGR as proposals develop.	**Delivery timescales**	Ongoing
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

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North West
Leicestershire
District Council

CORPORATE RISK REGISTER

OCTOBER 2025

Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR17	**Housing Landlord Function** **Risk** That the Council fails to deliver services in compliance with the new regulatory standards and the longer-term arrangements for the service. **Consequences** Loss of control of service provision , loss of function, unlimited fines, reputational and political risk.	3	4	12	Treat	Head of Housing	2	3	6

Existing Controls	• Control over the major areas of compliance exist in general sense – achieved through system control, process and evidenced through auditing processes and self-assessment • Greater burdens to provide assurance that performance management is robust, and intervention taken when performance drops. Assurance the data is correct, timely and is being seen and understood by the appropriate governing body • High level of external oversight and reporting to regulatory bodies – including engagement with the same on regular basis • Adherence to policy and improvement of policy in line with new guidance and process from regulator • Comprehensive Audit Plan for service in place • Increased member oversight via Housing Improvement Board • Self Assessment against new housing standards completed and outcome fed into revised Improvement Plan		
Planned mitigating actions	• Housing Improvement Plan in place and regularly reviewed with oversight from Cabinet, Scrutiny and Housing Improvement Board – this sets out a phased improvement plan to address regulatory change and service change as a whole • Engagement of external bodies to assist with third party view and development of detailed plans in areas of focus featured in the Improvement Plan.	**Delivery timescales**	April 2026
		Reason for delay in delivery	

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Comments and progress on actions	Stable

CORPORATE RISK REGISTER

OCTOBER 2025

Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR18	**Health and Safety** **Risk:** The Council fails to comply with health and safety legislation and does not adequately manage associated risks in the delivery of its services, including risks to employees, service users, contractors, and the public. This includes failure to identify, assess, and mitigate hazards such as unsafe working environments, inadequate training, poor incident reporting, lack of emergency preparedness, and insufficient monitoring of compliance across departments." **Consequences** Legal Action: Risk of fines, prosecution, and imprisonment for serious breaches. Financial Loss: Increased insurance costs, compensation claims, and service disruption. Reputational Damage: Loss of public trust and negative media attention. Human Impact: Potential injury, illness, or death affecting staff, contractors, and the public. Operational Risk: Enforcement notices, reduced productivity, and possible service shutdowns. Leadership Accountability: Senior staff may face disqualification or personal liability.	3	4	12	Treat	Head of HR and Organisational Development	2	3	6

Existing Controls	- Corporate Health and safety policy in place and reviewed annually. - Supporting policies, Fire, Legionella, Asbestos, Lone Working, Managing Violent persons (PVP) in place. - Teams undertake risk assessments and record on the SHE Assure system to identify and implement controls to reduce risk. - Health and safety training programme implemented with further development progressing. - Health and safety discussion forms part of regular meetings with CLT, Management Teams, JTUCC and Union safety reps. - Increased security at the Customer Centre - Panic alarms upgraded at the Customer Centre - Posters on display stating that the Council will not tolerate threatening behaviour - Issues raised with the Police Inspector in Coalville - CLT memebers have receieved Health and safety Leadership training - Health Surveillance (Noice and hand arm vibration)		
Planned mitigating actions	- Further development of a H&S management system in line with ISO 45001 - Introduction of H&S guidance notes and introduction of H&S page as a single point to access H&S information. - Social media campaign planned to highlight that the Council will not tolerate threatening behaviour - Consideration of body cams for front line staff where appropriate - Consideration of call recording on all telephony platforms - Structural alteration to the Customer Centre where areas of risk have been identified - Overarching corporate review of policies relating to these areas.	**Delivery timescales**	- April 2026
		Reason for delay in delivery	
Comments and progress on actions	**Stable**		

CORPORATE RISK REGISTER

OCTOBER 2025

Ref	Risk description	Inherent Risk			Risk Response	Risk Owner	Residual Risk		
		Likelihood	Impact	Risk score			Likelihood	Impact	Risk score
CR20	**Local Plan** **Risk** The preparation and implementation of the Local Plan may face significant delays and challenges due to a combination of factors including loss of staff, insufficient capacity, insufficient budget, lack of political ownership, non-compliance with legal requirements, potential legal challenges, environmental issues, changes in housing requirements, administrative shifts, delays in critical studies, slow responses from statutory consultees, infrastructure policy constraints, lack of support for specific provisions, changes in national approaches, and incomplete transport modelling. **Consequences** These issues collectively threaten the deliverability, viability, and timely completion of the Local Plan, potentially leading to unmet needs, increased costs, and compromised development strategies.	3	4	12		Head of Planning and Regeneration	2	3	6

CORPORATE RISK REGISTER

OCTOBER 2025

Existing Controls	• Local Plan Project Board oversees preparation of Local Plan and meets quarterly. • Risk register reviewed at Project Board meetings. • Portfolio Holder and Shadow Portfolio Holder briefed on a monthly basis. • Key pieces of evidence commissioned or in process of being commissioned.		
Planned mitigating actions	• Additional capacity to be sought using grant provided by government	Delivery timescales	April 2026
		Reason for delay in delivery	
Comments and progress on actions	New		

		Inherent Risk					Residual Risk		
Ref	Risk description	Likelihood	Impact	Risk score	Risk Response	Risk Owner	Likelihood	Impact	Risk score
CR6	**Driver and fleet compliance** **Risk** Non-compliance with DVSA, Health and Safety at Work Act, and corporate manslaughter legislation. Failure to meet conditions of the O-Licence including vehicle safety, driver hours, and record-keeping. Risk **Consequences**	4	4	16	Treat	Chief Executive/Director of Communities	4	4	16

	Fines, licence revocations, criminal charges, and director liability.								
Existing Controls	• New starter checks to include DVLA check from Oct 2025 • Maintenance and servicing of vehicles • Health and wellbeing (including eyesight) is monitored in waste • Transport manager in post								
Planned mitigating actions	• Monitoring of driver behaviour • Organisation wide monitoring of health and wellbeing • Driver training		**Delivery timescales**	Ongoing					
			Reason for delay in delivery						
Comments and progress on actions	**Stable**								

Assessing the likelihood of exposure

1. Low	Likely to occur once in every ten years or more

2. Medium	Likely to occur once in every two to three years
3. High	Likely to occur once a year
4. Very High	Likely to occur at least twice in a year

Assessing the impact of exposure

1. Minor	Loss of a service for up to one day. Objectives of individuals are not met. No injuries.
	Financial loss over £1,000 and up to £10,000. No media attention.
	No breaches in Council working practices. No complaints / litigation.
2. Medium	Loss of a service for up to one week with limited impact on the general public.
	Service objectives of a service unit are not met.
	Injury to an employee or member of the public requiring medical treatment.
	Financial loss over £10,000 and up to £100,000.
	Adverse regional or local media attention - televised or newspaper report.
	Potential for a complaint litigation possible. Breaches of regulations / standards.

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3. *Serious*	Loss of a critical service for one week or more with significant impact on the general public and partner organisations.
	Service objectives of the directorate of a critical nature are not met.
	Non-statutory duties are not achieved.
	Permanent injury to an employee or member of the public Financial loss over £100,000.
	Adverse national or regional media attention - national newspaper report.
	Litigation to be expected.
	Breaches of law punishable by fine.
4. *Major*	An incident so severe in its effects that a service or project will be unavailable permanently with a major impact on the general public and partner organisations.
	Strategic priorities of a critical nature are not met. Statutory duties are not achieved.
	Death of an employee or member of the public. Financial loss over £1m.
	Adverse national media attention - national televised news report.
	Litigation almost certain and difficult to defend. Breaches of law punishable by imprisonment.

Risk matrix

		Likelihood			
		1	2	3	4
Impact	4	4	8	12	16
	3	3	6	9	12
	2	2	4	6	8
	1	1	2	3	4

Traditionally in risk management there are four ways to mitigate the risks to the organisation, these being typically referred to as **Treat, Tolerate, Transfer and Terminate** and are known collectively as the "Four Ts".

- **Tolerate** means the risk is known and accepted by the organisation. In such instances the senior management team should formally sign off that this course of action has been taken.

- **Transfer** means the risk mitigation is transferred i.e. it is passed to a third party such as an insurer or an outsourced provider, although it should be noted that responsibility for the risk cannot be transferred or eliminated.

- **Terminate** means we stop the process, activity, etc or stop using the premises, IT system, etc which is at risk and hence the risk is no longer relevant.

- **Treat** means we aim to reduce the likelihood of the threat materialising or else reduce the resultant impact through introducing relevant controls and continuity strategies.