

Committee: AUDIT AND REVIEW

Date: 8 November 2022

Report: ANNUAL RISK MANAGEMENT REVIEW

Purpose of the report

1. To provide Members with the opportunity to review the effectiveness of the arrangements for risk management, in line with the Authority's Risk Management Policy.

RECOMMENDATION

2. That Members agree that the Strategic Risk Register contains all identifiable higher level risks which the Audit & Review Committee requires to be monitored.

Strategic Planning Framework

3. The information and recommendation contained in this report are consistent with the Authority's statutory purposes and its approved strategic planning framework:
 - **Corporate Plan objective 36:** *'Operate governance arrangements that are fit for purpose, as reported through the Annual Governance Statement and the Annual Governance Report'*.

Background

4. The Authority's Risk Management Policy sets our approach to risk management and (via the Risk Registers) provides a coherent picture of all the corporate processes which help to make sure risks are managed to acceptable levels. The Policy applies a tiered approach involving:
 - a **Strategic Risk Register**, to demonstrate to the members of this committee that there is an active process for identifying and managing truly strategic risks;
 - an **Operational Risk Register**, designed to hold the details about how each risk and its components are controlled. This also demonstrates to other audiences that we have a detailed but proportionate approach to risk. These 'other audiences' include the external and internal auditors, UNISON and our insurers.

Risk Management Register; Annual Review

5. The Risk Management Policy states that this Committee should receive an annual report on risk management, to enable it to establish that the arrangements for risk management within the organisation remain appropriate and that the main risks facing the organisation are properly controlled. The chief sources of evidence that would assist in reaching such a conclusion are noted below.
6. The **External Auditor's Opinion**, covering all aspects of the Authority's work on its annual report and accounts (for the auditing cycle examining the accounts for the year ended 31 March 2021) will, as last year, be received later than projected, because of delays to the audit work (beyond our control). It is likely to conclude with an unqualified opinion on the way in which the Authority conducts and controls its activities.
7. The summary of the **Internal Audits** completed in 2021/22 by our contracted-out internal auditors was reported to this Committee in April. None of the reports identified significant weaknesses, and the 'level of assurance' over the controls examined was concluded to be 'substantial' (unchanged from the previous year). Whilst these internal audit reports recommended some improvements to the systems operated (which have now been implemented), there were no findings that added to either the Strategic or Operational Risk Registers.
8. The **Strategic Risk Register** is attached at **Appendix 1**, and has been reviewed by SMT to ensure that it remains valid. No new strategic risks have been identified in the past year.
9. The **Operational Risk Register** is attached at **Appendix 2**. This has been updated following its review by the SMT in October 2022, and, whilst no new classes of risk have been identified since it was last reviewed by SMT in May 2022, a small number of changes have been made to update progress on risk management actions planned for 2022/23 that are now underway.

Conclusion

10. Risk management processes remain embedded within the Authority's work:
 - The Senior Management Team has undertaken its periodic reviews of the Operational and Strategic Risk Registers (in line with the Risk Management Policy);
 - Scheduled meetings with our insurance advisers have taken place, to make sure that we identify new risks as they emerge.

Richard Burnett
Director of Corporate Services

14 October 2022

Strategic Risk Register

This register records the 'higher level' or strategic risks facing the Authority and identifies who is responsible for managing them. Full details of how each risk is managed are set out in the Operational Risk Register.

Category of Risk	Description	Risk Assessment (see explanation, below table)	Owner	Entry on Operational Risk Register
Strategic & Commercial risks				
1. Reputation damage	Damage that undermines relationships with key partners, sponsors or the workforce, to the extent that the Authority's objectives become undeliverable.	Manageable	Members / CEO	1
2. Partnerships	Failure to achieve objectives in an efficient / effective / economic manner or to identify joint liabilities.	Material	Members / CEO	2
Economic & Financial risks				
3. Failure of Defra Grant	Further significant cut (>5%) in Defra core grant, necessitating additional operational cut-backs.	Severe	CEO/ SMT	4
4. Other Funding Risks	Failure (i.e. absence or shortfall) of External 'Grant' Funding; Ineffective partnership with YDMT and FLD; Bad Debts; Shortfalls in earned income.	Severe	CEO/ SMT	4
Organisational management & human factors				
5. Loss of Key Staff	Inability to deliver corporate objectives or to maintain services at agreed / accepted levels.	Material	CEO/ SMT	15
6. Health & Safety	Risk to staff, Members, volunteers and the public where proper procedures are not followed.	Material	CEO/ Directors/ Section Heads	17
Political and societal factors				
7. Public liability	Professional advice (e.g. planning, agricultural-related) given proves to be inadequate, leaving the Authority with significant exposure. Also, public liability in relation to works undertaken by the Authority that provides services or recreational opportunities.	Manageable	MO/ DoCS	11
Technical and operational risks				
8. Loss of IT system and records	Arising through either failure of communication network, or systematic failure of server environment, or of the maintenance capacity of either; leads to inability of Authority to operate. Data Protection failure.	Severe	HoFR/ Snr IT Officer	26

Explanation of Risk Assessment and Evaluation

All identified risks are scored against the likelihood of their materialising and for their impact if they did materialise. The following three tables describe this scoring system:

Table 1 identifies the 'likelihood' criteria, **Table 2** the 'impact' characteristics, and **Table 3** combines these two factors to give an overall classification ranging from 'Very Severe' to 'Manageable'.

Table 1

Risk Likelihood Ratings	
Probability	Criteria
Small	0-5% (extremely unlikely to occur)
Low	6-20% (unlikely but not impossible to occur)
Medium	21-50% (fairly likely to occur)
High	51-80% (more likely to occur than not)
Very High	>80% (almost certain to occur)

Table 2

Risk Impact Ratings	
Probability	Characteristics
Small	Minimal loss, delay, inconvenience or interruption. Easily and quickly resolved
Low	Minor loss, delay, inconvenience or interruption. Short to medium term effect
Medium	Significant waste of time and resources. Impact on operational efficiency, output and quality. Medium term effect which may be expensive to recover
High	Major impact on costs and objectives. Serious impact on output and/or quality and reputation. Medium to long-term effect and expensive to recover.
Very High	Critical impact on the achievement of objectives and overall performance. Huge impact on costs and/or reputation. Very difficult and possibly long-term to recover

Table 3

Impact	VH					
	H					Very Severe Risk
	M				Severe Risk	
	L			Material Risk		
	S		Manageable risk			
		S	L	M	H	VH
		Likelihood				

Table 3 identifies four classes of risk:

- **Very Severe Risks** are those which cause most concern: their materialisation would have a potentially disastrous impact on the Authority's reputation or business continuity; immediate and comprehensive action would be required.

- **Severe** Risks are also of significant concern, and should be covered by contingency plans: their materialisation would be severe but not disastrous, and some immediate action would be required, along with the development of an appropriate action plan.
- **Material** Risks have consequences that are not severe and which can be managed by contingency plans and more detailed action plans which can be developed later. But such risks still need regular monitoring.
- **Manageable** Risks are those that are inherent in most activities; the consequences of their materialising are generally not important enough to affect the whole business, and they can be managed during delivery. The status of such risks will be reviewed periodically.

The scoring of particular risks is the responsibility of SMT, subject to any advice from the Audit & Review Committee. In determining the likelihood of a risk occurring, all factors, including existing control mechanisms, will be taken into account.

Operational Risk Management Register (updated 12 October 2022)

The register lists all identified risks facing the Authority, whether strategic (key) risks and their components or the much larger population of lesser risks that we deal with on a day to day basis. It also describes the counter measures (taken or planned) for dealing with these risks.

[Proximity = time frame for risk, e.g. long term, on-going, specific milestone]

No	RISK		Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	COUNTER MEASURES		Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	Risk description	Risk owner		Taken (including current controls)	Planned		
	Political/ Strategic / Commercial						
1	<p>Reputation damage. Identified matters include:</p> <p>Members failing to take collective ownership for decisions the NPA makes, and public comments made by Members that run counter to Authority policy; failure to develop or implement appropriate policies.</p> <p>Lack of continuity / experience amongst Members, due to turnover (including local government reorganisation).</p> <p>Use of logo by businesses: 'association' problem if used</p>	Members (esp. Chair) CEO	Manageable (L/M)	<p>Declarations / registers of Personal Interests (including officers); employment clauses; statutory Officers; training and recruitment procedures; ; media training for the Chairman, Deputy Chairman and Member Champions, Jan 2021; Member Code of Conduct; Member Officer Protocol, Social Media Protocol for Members, Duties and Responsibilities of Members, job descriptions for Member Champions and Chairs (delivery of Member training programme for 2021/22), Complaints procedure and policy; reviewed /updated Feb 22; Standards Committee; Employee Code of Conduct; Communications Team; corporate Media Procedure & Protocol; Equality Awareness Training; Customer Service Excellence Award . Annual related-parties transactions questionnaire. Planning Code of Good Practice.</p> <p>Bi-monthly Monitoring of media activity, SMT; Social Media Strategy updated Dec 2021 Communications Strategy.</p>	<p>Provide the agreed programme of Member training for 2022/23</p> <p>Subject to Defra's agreement, reduce the size of the Authority (board), to make board processes easier to manage.</p> <p>Local Plan process supported by: Publish the Annual Monitoring Report (AP29.2; July); Carry out a public consultation on preferred housing site allocations and revised development boundaries (AP29.5; Oct); Prepare the full draft Local Plan for publication (AP 29.7; Mar)</p> <p>Ensuring that the NPA develops effective working partnership</p>	Manageable (L/L)	<p>Long term</p> <p>Specific</p>

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	<p>inappropriately Involvement in national initiatives (e.g. National Parks Partnership).</p> <p>Reputational risk associated with illegal release (including by hackers etc.) of personal information.</p> <p>'Lost opportunity' from poorly communicating the Authority's performance and / or position.</p> <p>FiPL: unable to honour commitments entered into with farmers and other landowners, or – more broadly – inability to use all funding made available (see Section 4, 'Funding Risks', for more details).</p> <p>Hawes Garsdale multi-user route. Expectation raised following consultation that the YDNPA will be implementing this, but sums involved large and beyond YDNPA timescale for legal works (pre-requisite to implementation) is a minimum of 4 years</p>			<p>Reviewed and updated the 'Guidance to staff on declaring personal interests / managing personal conflicts, offers of gifts and hospitality, and carrying out work outside your contract of employment' (AP36.6)</p> <p>Successfully completed the annual assessment against the CSE standard (AP 35.1; Sep)</p> <p>Public consultation on the preferred options for the new Local Plan completed (AP29.1; July).</p> <p>Green Lanes Management Framework reviewed (AP 14.7, Mar)</p> <p>Managed process for Logo: terms and conditions state that user rights can be withdrawn. Visual Identity Guidelines.</p> <p>Data protection measures in place (with active review process). CPI Compliance and Data Protection Policy. (reviewed May 2021). 'Politically restricted posts', reviewed 2021</p> <p>Annual reporting of Complaints and Compliments. Planning Training for Members, May and Oct. 2021; Risk Management Training, July 2021.</p> <p>Full reassessment against the Customer Service Excellence standard, June 2021.</p> <p>Access to Information Statement, revised April 2022</p> <p>Landscape Sensitivity and Strategic Flood Risk Assessments completed (to inform the final policies</p>	<p>arrangements with the new Unitary bodies operating across Local Government. Particularly necessary in relation to the Hawes Garsdale multi-user route and legal work required</p> <p>Review the main website to improve the user experience (AP 32.2, Dec)</p>		

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				in the Local Plan; AP 29.4).			
2	<p>Partnerships: failure to achieve objectives or to identify joint liabilities (includes poor costing, lack of focus and accountability, and failure of key partners).</p> <p>Other bodies may withdraw from partnerships because of their own financial pressures / budget cuts.</p> <p>National Trails Partnership: failure to agree continuation of funding levels and how funding distributed, and/or match funding required (25%) isn't secured.</p> <p>Impact of reorganisation of local government in Cumbria and North Yorkshire, on partnerships involving predecessor bodies</p>	Members (esp. Chair) CEO	Material (M/M)	<p>Management processes; insurance cover; Authority scrutiny. Re-evaluation of involvement with partnerships every two years. Member Champion participation and feedback on partnership activity. NPMP produced by steering group that includes all key 'delivery bodies that operate in the Park, thus ensuring buy-in. Steering Group also monitors progress on objectives, and produces annual report to the NPA; Light touch review of NPMP objectives (Nov 2021).</p> <p>Memorandum of Understanding with YDMT; effectiveness of partnership reviewed each year.</p> <p>National Trails Partnership (Pennine Way, Pennine Bridleway).</p> <p>Westmorland Dales project partnership management includes YDNPA officers. NLHF are flexible with schemes, if there is a problem with partner match funding, outputs will be adjusted accordingly.</p> <p>Monitoring of partnerships. Review of Governance arrangements for partnerships to ensure that proportionate arrangements are in place (Feb 22)</p> <p>Completed the annual progress reports on 2019-24 NPMP.</p>	<p>Act as lead Authority for the Pennine Way and Pennine Bridleway National Trails Partnership and administer the grant system (AP15.4, Mar)</p> <p>Working with Natural England to establish the Coast to Coast as a National Trail</p> <p>Developing a partnership with Forest of Bowland AONB and YDMT for an area scheme (Three Counties – Lune Valley) and application for NHLF funding</p> <p>Direct and regular engagement with lead project management partner (Friends of the Lake District) for Westmorland Dales scheme. YDNPA will continue act as Accountable Body for the partnership throughout 2022/23 (AP 3.4, Mar)</p> <p>Ongoing project-specific risk management plan in place.</p> <p>Partnerships involving re-organised local authority services will be kept under review (action arising from review of partnerships completed in Feb 2022).</p> <p>Create/develop relationships with the new Unitary Authorities, to ensure the</p>	Manageable (L/L)	Long Term

	RISK			COUNTER MEASURES			
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
					NPA is best placed to deliver its objectives, and contribute to partner objectives where appropriate (AP 36.10, Mar). However, this action is likely to be limited, due to capacity issues.		
3	Landscapes Review: residual uncertainty regarding the Government's response to the Landscapes Review..	Members/CEO	Material (M/M)	<p>The substance of the recommendations of the Review, in so far as Defra intends to implement them, is considerably less fundamental than could have been the case.</p> <p>The Government's response to the Landscapes Review published on 15 January includes a consultation on its response to the review and which closed on 9 April 2022. This contained proposals which impact on the Governance of the Authority; including revision of the statutory purposes, amendments to the 1995 Environment Act and changes to Membership.</p> <p>Members noted the Government's proposals at the meeting of the Authority on 29 March 2022 and agreed their response.</p>	Engage with Defra, through NPE, on the new governance arrangements as they affect YDNPA and agree the timetable for full implementation (AP 36.11, Mar)	Manageable (L/L)	Ongoing
	Economic / Financial						
4	<p>Funding and Budgeting Risks:</p> <p>Cuts to Defra grant and other external funding; YDMT; bad debts; Inflation and other cost increases; Earned income shortfalls; failure to realise full value from asset disposals. (Note: although we currently have some apparent certainty over our Defra core grant - a</p>	CEO / SMT S/Heads	Severe (H/M)	<p>External funding spending plans (including staffing) are matched against grants as they become available (limited reliance on other grants for core operations).</p> <p>Pipeline of external funding projects in continuous development; reviewed quarterly and reported to Finance and Resources Committee.</p> <p>YDMT: joint working monitored through liaison meetings (MoU now in place with YDMT for</p>	<p>External Audit opinion, covering controls: annual objective is for unqualified report (F&R Comm, May 2022) (delayed by late start to external audit).</p> <p>We will raise the issue of the format of the Core Grant and lack of inflationary increase with Defra, as opportunities arise (the matter has been re-communicated in 2022 via NPE).</p>	Severe (M/M)	<p>Ongoing</p> <p>Annual</p>

No	RISK		COUNTER MEASURES				
	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	<p>'flat' settlement over the 3 years to March 2025 – there is now an increased risk to this, given central government's announcement in September 2022 that it is seeking 'efficiency savings' across its departments).</p> <p>Defra is now seeking to direct the spending of its grant (and may 'stagnate' the core grant, taking a view that other funding, including FiPL, as an adequate alternative), creating challenges for those services which rely on it for funding.</p> <p>Defra's contracting process (for both the core grant and FiPL) is late' each year, which means that we are paying for work before any grant payment can be made.</p> <p>The core Grant Funding Agreement is for designed as a project grant, rather than a revenue support grant, and isn't fit for purpose</p> <p>With the increasing volumes of grant work, there is risk of failing to evidence sums</p>			<p>fundraising); NPP.</p> <p>Few commercial debtors, so minimal exposure.</p> <p><u>General controls:</u> Partnership liaison; budgetary control and reporting (incl. to Senior Management and F&R Committee). Budget setting (especially long-term) and monitoring process. Staff and other costs management and review process in place, integrated with annual budget process.</p> <p>Financial policy note gives a comprehensive picture of the Authority's processes for managing balance sheet risk, supporting a Financial Resilience Assessment of the Authority's prospects (prepared Dec 2021).</p> <p>We maintain sufficient cash holdings to cover the timing shortfall between the start of the financial year and the point at which Defra pays the first tranche of the core and FiPL grants (which should be 'funding in advance'). This cash is temporarily 'borrowed from a mix of ear-marked reserves and unpaid creditors, i.e. not otherwise available to support this temporary shortfall, but as long as that collective cash position (essentially, cash in bank) is sufficient to cover the delay in the first quarter's payments, this risk can be managed. A watching brief needs to be maintained in the cash position, to predict any problem that might emerge.</p> <p>Ongoing review of Reserves and the Medium Term Funding Strategy; ensures that Reserves are</p>	<p>Ongoing monitoring of LRT financial position.</p> <p>Review the effectiveness of the Authority's Income Generation Strategy and produce an updated strategy (AP34.3; Dec)</p> <p>Develop and implement the action necessary to deal with projected budget shortfalls from 2023/24 onwards (AP 34.4; Feb)</p> <p>Organise and monitor loan arrangements that support programme delivery, including the Lune Rivers Trust and Broadband for the Rural North (AP 34.6; Mar)</p> <p>Identify alternative employment opportunities at the end of short term and other contracts where pension strain is a possibility.</p>		

No	RISK		COUNTER MEASURES				
	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	<p>claimed (risk of repayment / funding loss) or to claim all monies available/due. This is a complex area, given the variety and number of grants, especially for 'new' grant streams where claims processes are new.</p> <p>Reliance on external funding has increased with decision to accept increased staff costs of up to ~55% of gross expenditure.</p> <p>Losing staff through budget cuts, which reduces the remaining staff's capacity to develop projects and find new income</p> <p>B4RN Broadband loans /share tranches and Lune Rivers Trust loans fail to be repaid.</p> <p>The FiPL programme places significant time pressure on delivery in order to access the available budget.</p> <p>Inadvertently taking on material pension strain</p>			<p>appropriate to meet contingencies and support planned work which extends beyond any one financial year.</p> <p>B4RN / LRT Loans have been funded from Revenue (so no impact on operational objectives if loans fail). Active monitoring, and schedule of loans agreed that minimises the maximum exposure over the years of the project.</p> <p>Income Generation Strategy: income will have increased from ~£8m in 2020/21 to ~£10m in 2022/23.</p> <p>Working with Defra, we have arrived at a solution for FiPL whereby any residue of budget allocated but not spent can be made available for future years' spending.</p> <p>Risk is more significant with projects like FiPL .</p> <p>Project plan in place and timescales agreed with Park Services managers for delivery of Defra accessibility fund.</p>			

No	RISK		COUNTER MEASURES				Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned			
	liabilities when recruiting long-term public sector workers to short term contracts. New accessibility 'capital' funding from Defra: delivery requirements							
5	Failure in financial management (controls, recording, reporting); errors in budgeting; investment loss; working capital inadequacy. Risk of change in Finance Team personnel; operational failure of Payroll.	Members / DoCS	Manageable (L/L)	(i) Working capital / cash flow can be adjusted by flexibility in the draw-down of Defra grant. (ii) Treasury Management policy is risk averse re: investments. (iii) For new staff, there is a documented hand-over and induction, plus probationary review. (iv) Internal audit monitoring. <u>General controls:</u> budgeting and monitoring process; professionally qualified staff and experienced Members; Financial Regulations; External Audit; Defra reporting; Three-year budget (subject to annual re-setting). Annual Governance Statement (April); Unqualified [external] Audit Opinion (September, in 'normal' year). Payment Card Industry Data Security Standard: compliance in place. Internal Audit Annual Opinion of overall controls, conclusion: substantial level of assurance, (March 2022). Revised and restructured the internal financial reporting process (July 2021).	Maintain current controls. Prepare the three-year budget strategy to 2025/26; projections to 2027/28. (AP34.5; Feb) Produce the Statutory Accounts for 2021/22, and achieve an unqualified external audit opinion (AP36.5; Nov) (accounts finalised, awaiting completion of audit) Act as accountable body for the Westmorland Dales Landscape Partnership;). Complete the Annual Governance Report (AP36.4; Nov) and publish the Annual Governance Statement (AP36.9; Mar)	Manageable (L/S)	Ongoing	
6	Failure to comply with financial standards	DoCS	Manageable (L/L)	Professional officers, including Accountant and MO / Solicitor, to identify / interpret new legislation; Annual Governance Statement; input from in-house Treasurer, Members, Internal and External Audit. Oversight by Members, including those with directly		Manageable (L/S)	Ongoing	

	RISK			COUNTER MEASURES			
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				relevant experience. Revision completed of the full suite of Treasury Management reports, including the Treasury Management Strategy, in line with CIPFA's new Prudential Code and Treasury Management regulations (AP36.2)			
7	<p>Pension Scheme: risk of mismanagement or runaway contribution costs.</p> <p>Failure to adhere to auto-enrolment rules, and subsequent fine (re: auto-enrolment on appointment and on the 3-year anniversary).</p> <p>Triennial valuation due Autumn 2022, to set future rates from April 2023; risk of increased contributions.</p> <p>Changes to LGPS rules (Nov 2021): contribution rates may be directed to be increased outside the triennial revaluation process, where an organisation undergoes a material downsizing or reorganisation of its workforce, in order to ensure the long-term viability of that organisation's net Pension position.</p>	Members/DoCS	Manageable (L/L)	<p><u>Controls:</u> Contracted-in to North Yorkshire LGPS, with contribution rates set by third party actuarial valuation. Risk assessment, and identification of counter measures, is integral to the scheme's funding strategy.</p> <p>Auto-enrolment procedures in place, controlled by HR Manager and Payroll Clerk.</p> <p>Maintain Pension Discretions Policy and related policies.</p> <p>Early discussions with Pension Fund Manager indicate next triennial valuation is unlikely to set an employer contribution rate in excess of that already allowed for within the Budget /MTFS</p>	Participate in the triennial review of the Pension Scheme (Nov)	Manageable (L/S)	Current / Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
8	Fraud, Corruption and Theft (including expenses and collusive supplier fraud).	MO/ DoCS	Manageable (L/L)	<p><u>Controls:</u> Internal Audit (including annual audit of expenses); Treasurer role; Financial Regulations and accounting processes, including budget monitoring and managerial control; Guidance to staff on declaring personal interests / managing personal conflicts, offers of gifts and hospitality, and carrying out work outside the contract of employment (updated April 2022); Gifts & Hospitality register; Employee and Member Codes of Conduct; Anti-Fraud & Corruption Policy; prescription and separation of duties, including Scheme of Delegation; Confidential Reporting (Whistle-blowing) Policy. Identity checks to constrain recruitment fraud. Asset register reviewed annually; car park cash collection contract; alarm facilities and contracts; Insurance. Reference checking for new employees, and in relation to procurement activity (where appropriate).</p> <p>Completed review of Anti Fraud and Corruption Policy (AP36.1).</p>	Review and update the Confidential Reporting Policy (AP36.8; Mar).	Manageable (L/S)	Ongoing
Legal and regulatory							
9	Members, or officers under delegation, make an illegal or inappropriate decision.	Members / MO/DM O	Manageable (L/L)	<p><u>Controls:</u> Member training and induction; Senior Officer guidance; External Audit; officer professional training / competence; Member experience; quality of officer reporting; Corporate Governance framework; Guidance to officers about the information Members need to support decision making.</p> <p>Requirements of the Data Transparency Code, Openness of Local Government Bodies Regulations.</p> <p>New Members receive appropriate training and</p>	Corporate governance work initiated through preparation of Annual Governance Statement (published as part of Annual Accounts in July) and AG report. <p>Produce an Annual Governance Report to include a review of the Local Code of Corporate Governance.</p>	Manageable (L/S)	Ongoing

No	RISK		COUNTER MEASURES				Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned			
				induction. Annual review of Local Governance arrangements (Local Code of Corporate Governance). Scheme of Delegation.				
10	Contracting failure (failure to complete contract, either because contractor not competent, or failure of their business)	S/Heads / MO	Material (M/M)	<u>Controls:</u> Financial Regulations. Procurement advice from Solicitor and Finance Team (Procurement training for budget managers completed 2021). Project management framework. Procurement Strategy and Procurement Manual; Internal Audit of Procurement. Active contract management. For construction contracts, maintain final retention payment until end of defects liability period. Procurement Strategy reviewed March 2022, including production of Procurement Manual.	Undertake the procurement of the Authority's next external audit contract (AP36.7; Dec)	Manageable (L/L)	Specific and Ongoing	
11	Public liability. Risks to public whilst on our property or property we maintain (including PRow under delegation agreements); or taking part in NPA-run activities; negligence / breach of statutory duty; corporate manslaughter.	Director s / MO/S/Heads	Material (M/M)	Facilities management and other maintenance work; third party liability insurance (and requirement that our contractors have this too); risk assessments for planned work, National Park Centres and Dales Countryside Museum and Car Parks. 'Safeguarding' policy (on protection of people from vulnerable groups). Accident monitoring. H&S Procedures (including CDM). Annual review of Public Liability insurance cover requirements in light of legal caseload. Insurance re-procurement, 3+ years contract across all insurance requirements; process completed Feb 2022	Risk assessments kept under review and inspection processes updated in the light of claims. Insurance requirements are being kept under review, and will continue to be adjusted for increases in personnel / premises/ vehicles/ turnover, as required.	Manageable (L/L)	Ongoing	

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				Training on occupiers' liability for key staff by our insurers			
12	Risk of judicial review following failure to operate adequate processes (e.g. public consultations).	MO	Material (M/M)	Senior officer guidance, legal advice; Standing Orders; Financial Regulations; guidance on the roles of Members; advice to Members of the Planning Committee; written reports covering relevant issues. Complaints procedure (including process of referrals to Ombudsman)	Maintain current processes. Review and update the Enforcement Policy (AP28.4; Dec) and the Development Management Charter (AP28.5, Dec)	Manageable (L/L)	Ongoing
	Organisational management and human factors						
13	Ineffective management: Failure to complete projects / meet targets; failure to follow agreed Policies and Strategies (procedural, operational and legal risk). The move to Blended Working presents a risk to the quality of the Authority's services.	CEO/ SMT/S/ Heads	Material (M/M)	Project management system, reviews of routine processes and for key projects, including performance improvement reviews; monitoring by Committee and SMT (including achievement of objectives and monitoring Performance Indicators, use of the Authority's project management framework). Managed policy / strategy library. Internal Audit and other review processes (including performance Improvement and major project reviews). Annual Review of achievement of Authority objectives (progress review, October; annual review after year-end, in July). Annual appraisal system for all officers (with 360-degree feedback on performance, for senior officers); Confidential Reporting Policy. Lessons learnt from Projects: formal reviews each	Specific risk assessments maintained for major 'standalone' projects: includes Westmorland Dales Landscape Partnership (risk management for this project is reviewed regularly). Provide all Senior Managers with bespoke training on Project Management Project and programme reviews planned for 2022 were agreed by A&R Comm in April (Blended working; Income Generation) Review and update HR policies, including Sickness Absence and Core Hours; Homeworking; Recruitment (AP37.3; Mar)	Manageable (L/L)	Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				<p>year.</p> <p>Employee Code of Conduct.</p> <p>Retained the Customer Service Excellence standard following the annual re-accreditation process (2022). A full reassessment against the <i>Investors in People</i> standard was undertaken in November, and re-accreditation achieved</p> <p>Carried out a staff survey on internal communications; action plan based on findings is underway.</p> <p>An internal audit reviewing the implementation of Agile, the Planning IT system, was completed in Jan 2022.</p> <p>Blended working was rolled out across the Authority, from a start date of April 2022. Corporate training delivered during 2021/22 included 'Strategic Leadership, 'Managing Remotely' and 'Effective use of videoconferencing'</p> <p>Published a detailed assessment of the Authority's performance in 2021/22 (AP 34.2)</p>	<p>Develop and implement an action plan following recommendations from liP assessment (AP 37.4; Mar)</p> <p>Review the effectiveness of blended working arrangements (AP37.2; Nov)</p> <p>Organise a programme of corporate training for staff (AP37.1; May)</p> <p>Create a users' handbook for the Agile planning software system (AP28.1; Jul)</p>		
14	<p>Staffing (incl. Volunteer) Resources Recruitment risk/difficulties.</p> <p>Staffing insufficient for planned activity levels (especially in the light of</p>	CEO/ SMT/S/ Heads	Manageable (L/M)	<p>Recruitment processes, including pre-employment health screening; psychometric testing; 'Preventing Illegal Working'. Disclosure and Barring Service checks where critical / permissible; employment references. Training updates on recruitment to all staff involved in the recruitment process. Monitoring of recruitment (including equality). Benchmarking</p>	<p>Revise the volunteers' competencies matrix to inform a training plan which ensures volunteers and volunteer supervisors are properly trained, skilled and supported to undertake their roles effectively (AP12.1; Dec)</p>	Manageable (L/L)	Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	surge in demand for land management expertise associated with national climate change mitigation programmes, FiPL and woodland creation). Links to Funding Risk, issue includes lack of staffing capacity to manage the workload that comes with the new funding.			<p>policy for salaries.</p> <p>Managed through budgeting process</p> <p>Now hosting four 'internal' apprenticeships.</p> <p>Annual Repot of volunteering activity (F&R Committee, May). Volunteering Strategy reviewed December 2021</p> <p>5-year People Strategy reviewed May 2021, to ensure that we have the skills, experience and knowledge to deliver high quality and efficient services, including through blended working.</p>	<p>Produce an evaluation framework for measuring the impact of volunteering activities (AP 10.1, April)</p> <p>Ensure that funding bids make proper allowance for required resources (rather than assumption that current staff have the capacity to deliver new programmes); this would contribute towards avoiding staff loss caused by workload or associated morale issues.</p>		
15	Loss of key staff. Includes contingency planning for 'emergency' scenarios.	CEO/ SMT/S/ Heads	Material (L/M)	<p>Appropriate notice clause in employment contracts; developmental training, including management development, offered to staff to provide a degree of succession planning. Use of secondments / 'acting up'; external contracting. Project management notes and recording, to assist hand-over. liP standard.</p> <p>Documentation which describes how to undertake key processes, e.g. Finance Manual, Legal Practice Manual. Part-time staff with some capacity for short-term cover. Recruitment of a pool of casual workers to cover occasional Reception shortfalls also available to provide some admin cover.</p> <p>Impact of Covid-19 absenteeism has – so far – been relatively minimal, with the majority of those contracting the disease continuing to work from home, where symptoms were mild enough to allow that to happen.</p>	Continue to monitor staff turnover, with quarterly reporting to F&R Committee meetings.	Manageable (L/L)	Specific and ongoing

No	RISK		COUNTER MEASURES				Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned			
16	Failure to comply with employment and related legislation. Liabilities arising from: harassment, bullying, sexual assault, other violence, discrimination; unfair dismissal.	CEO/MO/ Personnel Manager	Manageable (L/L)	<p>Professionally-qualified HR staff; Monitoring Officer; External Audit; guidance from central and local government; interaction with, and advice from, UNISON; Equality Act Annual Statement of Compliance; Equality, Diversity & Inclusion Working Group-led Equality Impact Assessments of key projects and proposals. Availability of in-house and external legal expertise. Anti-harassment and anti-bullying policy.</p> <p>HR policies reviewed in line with the cycle set out in the People Strategy.</p> <p>Equality, diversity and inclusion training for officers and Members, as required.</p> <p>ToR of EDI Working Group updated April 2021.</p>	<p>Maintain current processes.</p> <p>Annual Equality Report, December 2022.</p>	Manageable (S/S)	Ongoing Specific	
17	Health & Safety; includes hazardous working (and personal security / lone working).	CEO/ Directors/Heads	Material (M/L)	<p>Health & Safety procedures and policies, including appropriate training; compulsory risk assessment process; Safety Risk Register (actively maintained) to guard against physical / verbal abuse of staff; H&S working Group; Corporate Manslaughter Risk Matrix; Annual COSHH (Control of Substances Hazardous to Health) assessment carried out and register maintained; likewise, property-related H&S assessments maintained; insurance; annual reporting (including accidents) to F&R Committee. External review of Fire Safety, conducted periodically, with action plan for improvements. Buddy procedure for staff and volunteers.</p> <p>H&S handbook kept under active review (along with associated risk assessments and the related H&S</p>	Maintain current processes.	Manageable (L/L)	Ongoing	

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				Strategic Action Plan, updated quarterly); Annual H&S report (May). The Authority returned to primarily office-based blended working in April 2022, and is managing its premises and work practices so as to minimise the risk of Covid-19, in line with HSE guidance.			
18	'Health' of buildings.	DoCS / Project & Estates Officer	Manageable (L/L)	Regular inspection of properties. Asbestos assessment completed. Premises Management Plan developed to cover all building risks (including methane, DDA, structural and electrical safety; methane, Radon, Fire risk, asbestos, vermin infestation, Legionnaires Disease). 'Review' process to ensure all management plans are active. Buildings being operated in line with latest HSE guidance, concerning the management of Covid-19 risk; risk assessments updated whenever this guidance changes.	Maintain current processes. Ongoing planned maintenance and refurbishment of public toilets, to an annual cycle set in Property Strategy (under review: Strategy for next 5 years was set in Dec 2021). Actions include: Investigate and implement a solution to weatherproof the roof at Yoredale (AP38.1; Sep; work now underway); Repair the roof at Malham (AP38.6; Mar); Refurbish public toilets at Hawes, Horton and Malham (AP 38.2; Feb); Install 'Changing Places' public toilet facilities at Hawes and Grassington (AP 9.3; Mar).	Manageable (L/S)	Ongoing Specific
19	Officer stress and mental well-being.	CEO	Manageable (L/L)	Performance appraisal and management processes; Risk assessments; confidential Occupational Health advice; Employee Assistance Programme (EAP) including counselling service (confidential support service); organisational culture; HR policies including Capability / Improving Performance and Flexible Working; management process for sickness absence. Managing Stress guidelines and HSE Stress Risk Assessment.	Maintain current processes. Piloting changes to flexi-system 'core hours' to help offices with managing work/life-balance.	Manageable (L/S)	Specific

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				<p>Overview reporting of Authority-wide sickness levels (quarterly); Mental Health awareness training available for all staff, Managing Mental Health sessions for line managers. Promotion of free and confidential mental health support available through Able Futures. Introduction and promotion of support available from trained internal Mental Health First Aiders.</p> <p>Training on Building Resilience / Awareness, delivered by the Samaritans, June 2022</p>			
20	Physical risk from attack by a member of the public, in the field and at offices.	CEO/ SMT/S/ Heads	Manageable (L/S)	Policies in place for off-site working. De-escalation training provided at NPCs and for Rangers and Planners. Process for notifying officers about potential risks of personal harm when visiting certain sites (Safety Risk Register). Buddy system in place; Lone working risk assessment. Process reviewed and updated, May 2021.	Maintain current processes.	Manageable (S/S)	Specific
21	Industrial Action	CEO	Manageable (L/S)	Relationship with Unison managed through regular Joint Consultative Forum meetings. In early 2022, Unison was supported by the Authority during its drive to recruit employees to join the union. Given that the Unison is the body with which the Authority consults on employment matters, a healthy membership is considered to be key for ensuring that Unison is representative of the staff body.	Maintain current processes.	Manageable (S/S)	Ongoing
	Environmental factors / acts of God						
22	Physical damage or deterioration to NPA assets.	DoCS + Directors	Manageable (L/L)	<u>Controls</u> : insurance; maintenance work (including dedicated staff and budgets); fire safety reviewed regularly; Emergency maintenance arrangements; IT back up and contingency plans.	Maintain current processes.	Manageable (L/S)	Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				5-year Property Strategy revised December 2021; flood protection measures at the Dales Countryside Museum completed 2021/22			
23	Adverse weather and other events (significant snowfall; inland flooding, moorland fires); impact is also on 'outside' project work, such as Rights of Way; damage to under-maintained bridges, leading to RoW degradation.	DoCS + Directors	Manageable (L/S)	Controls: home working capacity (now significantly enhanced, following introduction of blended working); gritting policy for car parks and annual risk assessments; member of North Yorkshire Wildfire Group. Re; bridges: via discussions with NYCC/CCC (which retains financial responsibility for large bridges). Introduction of MS Teams has reduced need to travel for meetings.	Staff respond appropriately to events; severe weather issues dealt with as they occur.	Manageable (S/S)	Ongoing
24	Carbon emissions	Directors	Manageable (L/L)	Corporate emissions reduction targets and active monitoring; Review of working practices to support reductions in greenhouse gas emissions from office energy use and business travel, completed November 2021.	Produce a carbon reduction plan for Volunteering (AP 39.1, November) Prepare and research the potential move to an electric fleet in 2022/23 and EV facilities required (AP39.2, March) Monitor and manage fleet mileage, in relation to larger CO2 vehicles with a view to creating reductions (AP39.3, March) Examine the Ranger Service's use of materials in seeking to reduce use of those with high environmental cost; to source products and supply chains that are more sustainable; continue to improve approaches to re-using and recycling. (AP 39.4, March)	Manageable (S/S)	Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
					Carry out a light touch carbon audit of Authority landholdings to increase sequestration (AP 39.5, March)		
	Technical / operational / infrastructure risks						
25	Loss of integrity of IT systems and records. Far greater reliance now placed on access to videoconferencing (risk of that not functioning effectively).	Head of F&R/Snr IT Officer	Severe (H/M)	Systems capable of independent operation (network resilience); disaster recovery plan. WAN contract designed to provide additional capacity and resilience. Latest Website redevelopment completed 2021	Annual Reviews of IT functionality by Internal Audit. Review and revise the 5-year IT Strategy (AP38.4; Mar) Implement further MS365 functions to facilitate more 'agile' working (AP38.3; Mar) Carry out a review of the implementation of MS365 (AP38.5; Mar)	Manageable (M/L)	Ongoing
26	Unauthorised access and data security. Risk of cybercrime includes Viruses / hacking / sabotage.	Head of F&R/ Snr IT Officer	Material (M/L)	Firewall and virus control software; password control; back-ups at main server sites. Access control procedures. Encryption processes. Data Protection awareness; Staff declaration of compliance with IT security policies. The move to MS365 (with added mobile security) now complete, providing enhanced protection against unauthorised access. Should we become the victim of a ransomware attack, the ICT disaster recovery procedure (see Business Continuity & Disaster Recovery Plan) would see us rebuilding the system using tape records (a very similar operation to that needed if the building hosting our servers was to burn down). Security software (implemented 2021) for Authority equipment, focusing on support		Manageable (L/L)	Ongoing

RISK		COUNTER MEASURES					
No	Risk description	Risk owner	Risk pre-counter measures (see explanation, below table) [Impact/ Likelihood]	Taken (including current controls)	Planned	Target risk, post counter measures (see explanation, below table) [Impact/ Likelihood]	Proximity
				for the move to blended working			