



OVERVIEW AND SCRUTINY COMMITTEE

Thursday 24 March 2022 at 6.30 pm

Council Chamber, Ryedale House, Malton

IMPORTANT: The Council fully recognises and respects the role and importance of democratic meetings and is committed to protecting the health and safety of Elected Members and Officers who participate. Risk assessments are undertaken in advance of each meeting, and are reviewed on an ongoing basis.

Social distancing measures will be in place throughout the meeting, however it is important that you do not attend the meeting if you or anyone in your household are required to self-isolate due to receiving a positive COVID-19 test result, having symptoms of COVID-19, or having been told that you have been in contact with someone who has tested positive for COVID-19.

For the purpose of public transparency and accountability, the meeting will be live streamed online. The livestream can be accessed here:

<https://www.youtube.com/channel/UCZCvPUsJOLwMJ9ukDsGf0Hw>

For health and safety reasons and in accordance with our risk assessment, members of the public are asked to follow the meeting via this method rather than attending in person. If you are unable to access the meeting this way, please contact us so that we can explore whether any safe alternative option is possible. The media will be able to report on proceedings from the live stream.

Agenda

- 1 **Emergency Evacuation Procedure**
The Chairman to inform Members of the Public of the emergency evacuation procedure.
- 2 **Apologies for absence**
- 3 **Minutes of the meeting held on 10 February 2022** (Pages 3 - 4)
- 4 **Urgent Business**

To receive notice of any urgent business which the Chairman considers should be dealt with at the meeting as a matter of urgency by virtue of Section 100B(4)(b) of the Local Government Act 1972.

5 Declarations of Interest

Members to indicate whether they will be declaring any interests under the Code of Conduct.

Members making a declaration of interest at a meeting of a Committee or Council are required to disclose the existence and nature of that interest. This requirement is not discharged by merely declaring a personal interest without further explanation.

6 CIPFA Financial Management Code (Pages 5 - 18)

7 Risk Management Update (Pages 19 - 56)

8 Decisions from other Committees (Pages 57 - 62)

Policy and Resources Committee held on 17 March 2022.

9 O&S Forward Plan (Pages 63 - 64)

10 Any other business that the Chairman decides is urgent.

Overview and Scrutiny Committee

Held at Council Chamber - Ryedale House, Malton, North Yorkshire YO17 7HH
on Thursday 10 February 2022

Present

Councillors Bailey, Middleton (Chair), Oxley, Raine, Riby and Wass (Vice-Chair)

In Attendance

William Baines, Owen Griffiths, Elizabeth Heath, Steph Medcalf, and Margaret Wallace.

Minutes

78 **Apologies for absence**

Apologies were received from Cllrs Cussons, Garbutt Moore, and King.

79 **Minutes of the meeting held on 20 January 2022**

| Decision |
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| That the minutes of the meeting of the Overview and Scrutiny Meeting held on 20 January 2022 be approved and signed by the Chair as a correct record. |
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Voting Record

Unanimous

80 **Urgent Business**

There was no urgent business.

81 **Declarations of Interest**

There were no declarations of interest.

82 **Scrutiny Review on Staff Appraisals**

Considered- The Report of the Project Director, Places and Resources

| Decision |
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| That the scrutiny review report at Appendix 1 and the recommendations from the task group be approved |
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Voting Record

Unanimous

83 **Customer Complaints and Compliments Q3 2021-22**

Considered- The report of the Programme Director for People and Resources.

Decision

That the Overview and Scrutiny Committee note and endorses the continued performance of complaints and compliments received in the third quarter of 2021/22 of the reporting cycle.

Voting Record

Unanimous

84 **Timetable of Meetings**

The Committee received the draft Timetable of Meetings for the 2022/23 year and were invited to make any comments.

85 **Decisions from other Committees**

The Committee received the Minutes of the Policy and Resources Committee held on 3 February 2022.

86 **O&S Forward Plan**

The Committee received the forward plan.

87 **Any other business that the Chairman decides is urgent.**

There being no further business the Chair ended the meeting at 6:55pm.



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|-------------------------|---|
| REPORT TO: | OVERVIEW AND SCRUTINY COMMITTEE |
| DATE: | 24 MARCH 2022 |
| REPORT OF THE: | CHIEF FINANCE OFFICER (s151) ANTON HODGE |
| TITLE OF REPORT: | CIPFA FINANCIAL MANAGEMENT CODE |
| WARDS AFFECTED: | ALL |

EXECUTIVE SUMMARY

1.0 PURPOSE OF REPORT

1.1 This report follows one to Committee in March 2021 which set out how far the Council complied with the requirements of the CIPFA Financial Management Code. This attached Appendix shows the current position against each of the CIPFA principles and gives an update on the current position and areas where action was due to take place in 2021/22. It also highlights any further actions which will ensure continuous improvement.

2.0 RECOMMENDATION(S)

2.1 It is recommended that the Committee notes the work undertaken to enhance compliance with the CIPFA FM Code and that future reports will set out progress against any further actions stated.

3.0 REASON FOR RECOMMENDATION(S)

3.1 To inform the committee of the Council's compliance with the Code.

4.0 SIGNIFICANT RISKS

4.1 Failure to produce a statement would result in reputational loss but, more importantly, failure to ensure a high standard of financial management could lead to significant budget and service provision issues for the Council.

5.0 POLICY CONTEXT AND CONSULTATION

5.1 Local authorities are required to begin to ensure that they comply with the code.

6.0 REPORT CONTENTS

- 6.1 In light of concerns around the financial resilience and management of local authorities, in particular after the well-publicised issues at Northamptonshire County Council, CIPFA developed, and consulted on, a draft code for good practice in financial management.
- 6.2 Finance in local government is governed by a complex mix of rules including primary legislation, regulation and professional standards. The general financial management of a local authority, however, has not historically been supported by a specific professional code. Therefore, the CIPFA FM code will, for the first time, set standards of financial management for local authorities in the UK.
- 6.4 The code is designed to support good practice in financial management and help local authorities demonstrate financial sustainability. It builds upon the underlying principles of leadership, accountability, transparency, professional standards, assurance and sustainability.
- 6.5 The FM code is also consistent with other CIPFA codes in that it is based on principles rather than narrow prescription. The code will not, therefore, detail specific financial management processes that each organisation must follow. Instead the local authority must demonstrate that the principles of the code, the Financial Management Standards, are being satisfied. Demonstrating this compliance with the code is the collective responsibility of elected members, S151 officers and their professional colleagues in the leadership team.
- 6.6 The code in itself, of course, does not eliminate financial pressure or risk but compliance with the code validates the organisation's ability to identify and manage risk and plan for long term financial sustainability.
- 6.7 The final CIPFA FM code was issued in October 2019 with 2021-22 being the first year of expected full compliance. However, In February 2021 CIPFA provided clarification on compliance with the code to reflect COVID-19 pressures. This stated that much of the existing Code requirements are based on statutory responsibilities, the timescales for which CIPFA is not able to influence. The Code does, however, allow for both flexibility and a proportionate approach:
- “The manner in which compliance with the FM Code is demonstrated will be proportionate to the circumstances of each local authority.”
- and that:
- “Financial management standards are to be guided by proportionality.”
- CIPFA concluded that while the first full year of compliance can remain as 2021/2022, it can do so within a more flexible framework where a proportionate approach is encouraged.
- 6.8 CIPFA guidance issued in February 2021 stated that the Council's Annual Governance Statement should include the overall conclusion of the assessment of the organisation's compliance with the principles of the FM Code.

6.9 In recent years, Ryedale District Council has strengthened its financial management, as recognised in the opinions of both external and internal audit. An analysis of the Council's structures, processes and procedures against the FM Code's Financial Management Standards undertaken last year showed a relatively high level of compliance with these principles. The actions set out in the update at Appendix 1 should further enhance this compliance.

7.0 IMPLICATIONS

7.1 The following implications have been identified:

- a) Financial
Failure to manage risk can result in legal action and costs
- b) Legal
Failure to manage risk can result in legal action and costs
- c) Other (Climate Change, Equalities, Staffing, Planning, Health & Safety, Environmental, Crime & Disorder)
Failure to manage risk can result in legal action and costs

Name of Head of Service **Anton Hodge**
Job Title **Chief Finance Officer (s151)**

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Background Papers:

None

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CIPFA Financial Management Code – Self Assessment

Council: Ryedale District Council

RAG Rating

Green – Compliant with the Code

Amber – largely compliant but some areas for improvement

Red – Not compliant /significant areas for improvement

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|---|---|---|--|
| <p>Financial Management Standard A The leadership team is able to demonstrate that the services provided by the authority provide value for money.</p> | <p>Amber - Value for Money is assessed as part of the external audit process and for 2020/21 the Council received an unqualified Value for Money Opinion.</p> <p>Business cases for spending plans – both in the budget – and, especially in the last year as a result of the pandemic – are brought to Strategic Management Board for evaluation before passing through to members.</p> <p>Regular meetings are held between the Chief Executive and the Chair of Policy and Resources to discuss budget issues including – in the past year – the continuing impact of COVID on the council’s finances and to ensure that any proposals for additional spend show value for money.</p> <p>Further meetings take place between the s151 officer and the Chair of Policy and Resources to discuss budget, including ongoing forecasting.</p> <p>An annual ‘Value for Money’ review is contained within the Service Level Agreement for the Finance Service and this identifies (with the caveat that published data is limited) those services where the Council performs strongly relative to its peers and where improvements could be made.</p> | <p>For 2020/21 and beyond the s151 officer will undertake an annual Value for Money review. For 2020/21 and 2021/22 this will largely be retrospective as COVID-19 and now LGR has impacted on resources available to do this, and will form part of the report to Audit Committee alongside the External Auditors opinion</p> <p>Business Cases have been drawn up for key projects and presented to SMB and Committees where appropriate, including Affordable Housing projects, Milton Rooms investment, Malton and Norton Infrastructure and Connectivity</p> <p>Additional finance capacity was agreed in the 2021/22 budget and additional staffing in place, although LGR has now added an additional pressure to workload</p> | <p>Ensure ongoing VFM assessments through the Council’s final financial year (2022/23)</p> |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|--|--|---|---|
| <p>Financial Management Standard B The authority complies with the CIPFA Statement on the Role of the Chief Financial Officer in Local Government.</p> | <p>Green - The Council complies with CIPFA’s Statement on the Role of the CFO – the CFO is part of the Council’s Strategic Management Board and reports directly to the Chief Executive.</p> <p>The role is currently a joint role with NYCC and is employed by NYCC as part of the wider ‘Better Together’ collaboration between the two councils.</p> <p>The CFO is actively involved in preparations for LGR.</p> | <p>Notice given by NYCC on the delivery of financial services has been withdrawn and the service will continue to operate until 31.03.23</p> | |
| <p>Financial Management Standard C The leadership team demonstrates in its actions and behaviours responsibility for governance and internal control.</p> | <p>Amber – In 2020/21 the Council set up a new Corporate Governance service to ensure that all key governance issues are managed properly and effectively. This encompasses risk management, codes of conduct and standards, democratic services, Freedom of Information, Information Governance and relationships with external bodies. An Annual Governance Statement is reviewed and agreed by Strategic Management Board.</p> <p>Internal Audit play a key part of the Council’s assurance framework and meet routinely with the S151 Officer and other members of Strategic Management Board to ensure that Audit resources are appropriately directed towards areas of greatest need (applying a risk-based approach) and that audit actions are followed up.</p> | <p>Quarterly Internal Audit progress reports are discussed at SMB to ensure sufficient focus on implementing agreed actions, but noting the impact of COVID</p> | <p>Apart from urgent technical/legal updates, the focus will now be on a complete refresh of financial procedures as one of the LGR workstreams</p> |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|--|--|---|---|
| | <p>Senior Managers and internal audit have acknowledged the impact of the pandemic on the audit plan and have agreed a schedule for completing all audit work in the plan through to the end of the financial year. Resource has been allocated to this and Strategic Management Board will support delivery of internal audit work as far as they are able during the remainder of the year but it is recognised that, given the response to the coronavirus and recovery efforts, it is likely that the number of audits and timelines for completion of work will slip further. We have therefore agreed that work to be carried out will be targeted towards higher priority areas. The internal audit plan for 2022/23 will also take account of any outstanding priorities or work deferred from previous years.</p> | <p>Discussions were held with internal audit to ensure that the programme of work for 2021/22 took account of the ongoing pandemic effect and to ensure that work is prioritised appropriately. This approach has continued for setting the 2022/23 Plan.</p> | |
| <p>Financial Management Standard D The authority applies the CIPFA/SOLACE Delivering Good Governance in Local Government: Framework (2016).</p> | <p>Green - The Council's Annual Governance Statement is prepared with consideration to CIPFA's good governance framework and principles.</p> | | |
| <p>Financial Management Standard E The financial management style of the authority supports financial sustainability.</p> | <p>Green - The Council Plan and MTFS set the strategic framework for the Council and the tone for financial leadership. The Strategy contains eleven objectives:</p> <ul style="list-style-type: none"> • Budgets are Prudent and Sustainable in the Long Term. The Council will aim to maintain a balanced budget by ensuring that in-year expenditure is matched by income from Council Tax, Business | <p>There has been closer working together between finance and budget managers to ensure that budgets are as accurate as possible and that any pressures (and savings) are highlighted and</p> | <p>Continue to develop managers' capabilities for financial management.</p> |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|-----------|---|--|----------------------------------|
| | <p>Rates, fees and charges and grants from government and other bodies. Funding from reserves will be used to cover one-off investments or temporary initiatives subject to a detailed business case being approved by Members.</p> <ul style="list-style-type: none"> • Financial plans recognise corporate Priorities and Objectives. • Significant risks are identified, and mitigation factors identified. • The Capital Programme is planned over a 4 year period with no further borrowing planned at this stage other than Finance lease arrangements. This will be kept under review to ensure optimum Financing arrangements are put in place as capital plans progress. • Constraints on capital and revenue resources, including the uncertainties around future government funding, are recognised and taken into account. • Council Tax increases will be kept within the Government’s expected upper level of increase, and the broad anticipated increase for future years will be set out within the Financial Plans, recognising that these increases may be subject to change. | <p>presented to members in the quarterly monitoring reports and budget planning process.</p> | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|---|---|---|----------------------------------|
| | <ul style="list-style-type: none"> • Prudent levels of general balances, reserves and contingencies are maintained in the context of an assessment of the risks facing the Council; • Value for Money and achievement of improved efficiency and service delivery underpin the Financial Strategy. • The Financial Strategy supports the achievement of Excellence in Financial Management and use of resources. • The Council will seek to maximise income through a Commercial Strategy. <p>Budget Management in the council is carried out through a principle of delegation and management accountability. Finance officers advise but budget managers have operational responsibility for spending against agreed resources.</p> | | |
| <p>Financial Management Standard F The authority has carried out a credible and transparent financial resilience assessment.</p> | <p>Green - Financial resilience underpins the objectives of the Council’s Medium Term Financial Strategy. An annual budget risk assessment is undertaken which underpins the budget.</p> <p>The Council scores well on the CIPFA Resilience index especially due to high levels of reserves. In terms of reliance on Council Tax it is around average but has a lower ratio of fees and charges to service expenditure</p> | <p>A new commercial strategy was launched in 2020, but full implementation has been delayed due to the impact of the pandemic. This will now be picked up as part of the transition work for LGR (The Ryedale CFO is sponsor for the workstream on commercial activities)</p> | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|---|---|---|---|
| <p>Financial Management Standard G The authority understands its prospects for financial sustainability in the longer term and has reported this clearly to members.</p> | <p>Green - The MTFS is developed in consultation with Strategic Management Board and elected members. It is approved by the Policy and Resources Committee before being recommended to full Council.</p> <p>The later years of the MTFS take into account scenario planning and the overall Strategy includes projections over a four-year period. The reports and briefing to members are clear about the long-term risks and sustainability. The council retains appropriate reserve balances to manage risks over the medium term and the Strategy includes the specific policy on use of reserves.</p> <p>The capital plan covers the same time period. This has been updated in recent years and spending is now linked to some key strategic objectives, such as affordable housing or supporting business</p> | | <p>During 2022/23, the long-term financial position will be updated to members of RDC and also feed into planning for the new Council</p> |
| <p>Financial Management Standard H The authority complies with the CIPFA Prudential Code for Capital Finance in Local Authorities.</p> | <p>Green – Management of the Council’s debt is governed by the Treasury Management Strategy and Prudential Indicators which aim to ensure the Council’s capital expenditure plans are prudent, affordable and sustainable, with decisions on borrowing taken in light of spending plans and available funding, cash flow needs and interest rates (current and future forecasts). Regular monitoring reports are presented to members.</p> | | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|--|--|---|----------------------------------|
| | <p>The Council’s Treasury Management Strategy and prudential indicators comply with the requirements of the Prudential Code.</p> <p>The CIPFA Code requires the Chief Finance Officer to ensure that members with responsibility for treasury management, particularly those with responsibility for scrutiny, receive adequate training in treasury management. Training has been provided to members by Link Asset Services and further training will be arranged as required.</p> | | |
| <p>Financial Management Standard I The authority has a rolling multi-year medium-term financial plan consistent with sustainable service plans.</p> | <p>Green - The Council has a 4-year indicative budget which underpins annual service planning. This is updated annually with the process of revision beginning in summer and feeding through member meetings in the autumn.</p> <p>Latest information on funding, costs and risks are highlighted on every available occasion.</p> | | |
| <p>Financial Management Standard J The authority complies with its statutory obligations in respect of the budget setting process.</p> | <p>Green - The Council sets a balanced budget and complies with the requirements in relation to the S151 Officer statement (s25) on the robustness of the budget and adequacy of reserves.</p> <p>(See annual budget report to full Council – February each year)</p> | | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|--|--|---|----------------------------------|
| <p>Financial Management Standard K The budget report includes a statement by the chief finance officer on the robustness of the estimates and a statement on the adequacy of the proposed financial reserves.</p> | <p>Green - As above through the s25 opinion</p> | | |
| <p>Financial Management Standard L The authority has engaged where appropriate with key stakeholders in developing its long-term financial strategy, medium-term financial plan and annual budget.</p> | <p>Green - The MTFS and budget is developed in consultation with Members and Senior Management Board, building on discussions held with budget managers to identify pressures and savings. A public consultation takes place and its results are reported to members.</p> <p>Member briefings are held during the autumn to highlight the key budget issues and encourage further discussion between groups and the s151 officer. More detailed discussions are held with the leader throughout the budget process.</p> | <p>The draft budget consultation document was approved by Policy and Resources (delegated to it by Full Council) and comments on specific services will be examined by SMB to ascertain any further action required</p> | |
| <p>Financial Management Standard M The authority uses an appropriate documented option appraisal methodology to demonstrate the</p> | <p>Green - Investment decisions are subject to financial appraisal using appropriate financial modelling for example discounted cash flow using whole life costs and income.</p> | | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|--|--|--|---|
| value for money of its decisions. | | | |
| <p>Financial Management Standard N The leadership team takes action using reports enabling it to identify and correct emerging risks to its budget strategy and financial sustainability.</p> | <p>Green - Quarterly in-year financial monitoring reports are produced as part of the council’s reporting cycle. This includes setting out the impact on reserves</p> <p>Ad-hoc reports are also brought when significant issues are identified.</p> | | |
| <p>Financial Management Standard O The leadership team monitors the elements of the balance sheet that pose a significant risk to its financial sustainability</p> | <p>Amber - Use of reserves is explicitly reported in quarterly performance reports. Quarterly treasury reports update on investments and debt.</p> <p>Regular reviews of Reserves by the s151 officer are undertaken mid-year in order to justify amounts and reasons for the Reserves. This is then incorporated into the longer term forecasting of reserve balances is included as part of the MTFs report. However as it is expected that reserves will be used more in the forthcoming years and therefore this will be enhanced</p> | <p>Balance sheet items are reported to Strategic Management Board as part of Q reporting regime.</p> | <p>During 2022/23, the long-term financial position and impact on reserves will be updated to members of RDC and also feed into planning for the new Council.</p> <p>As part of the LGR preparation, there will be financial reviews of all eight councils including balance sheets</p> |
| <p>Financial Management Standard P The chief financial officer has personal and statutory responsibility for ensuring that the</p> | <p>Green - The Statement of Accounts is prepared in accordance with The Code of Practice on Local Authority Accounting in the United Kingdom. This is stated in the accounts that have been signed off by the s151 Officer ahead of submission to the Audit Committee.</p> | | |

| Principle | Current Position | Update on areas identified for Improvement in 2021/22 | Areas for Improvement in 2022/23 |
|---|--|---|----------------------------------|
| statement of accounts produced by the local authority complies with the reporting requirements of the Code of Practice on Local Authority Accounting in the United Kingdom | The Council has consistently received an unqualified audit opinion from the external auditor and this was also the case for 2020/21. | | |
| Financial Management Standard Q The presentation of the final outturn figures and variations from budget allows the leadership team to make strategic financial decisions | Green - The outturn report identifies key variances from budgets with appropriate explanations and recommends action where appropriate in line with the in-year quarterly monitoring process. Any key issues arising from the outturn figures are reflected in the budget and MTFS process. | | |



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| PART A: | MATTERS DEALT WITH UNDER DELEGATED POWERS |
| REPORT TO: | OVERVIEW AND SCRUTINY COMMITTEE |
| DATE: | 24 MARCH 2022 |
| REPORT OF THE: | HEAD OF CORPORATE GOVERNANCE ELIZABETH HEATH |
| TITLE OF REPORT: | UPDATE ON RISK MANAGEMENT – CORPORATE RISK REGISTER |
| WARDS AFFECTED: | ALL |

EXECUTIVE SUMMARY

1.0 PURPOSE OF REPORT

1.1 This report provides an update on work to review and revise the Council's Corporate Risk Register, attached at Appendix 1.

2.0 RECOMMENDATION(S)

2.1 It is recommended that the Overview and Scrutiny Committee notes the contents of this report and feeds back any comments on the format and details of the Corporate Risk Register.

3.0 REASON FOR RECOMMENDATION(S)

3.1 This report provides an update on work to review the Corporate Risk Register. Risk Management has been highlighted as a key improvement issue in recent years, and this paper is evidence of improvements made in the process and reporting to Elected Members.

4.0 SIGNIFICANT RISKS

4.1 The risk of not managing corporate risks are as identified in the register.

5.0 POLICY CONTEXT AND CONSULTATION

5.1 The authority has a duty to manage risk.

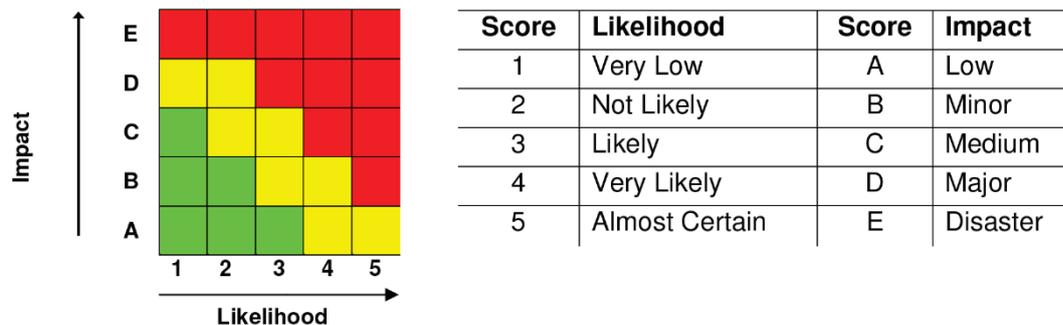
5.2 Significantly more risk has been introduced into the system as a consequence of Local Government Reorganisation, which is continually being continually assessed as the

process continues. This may affect subsequent iterations of the risk register, and risk ratings.

6.0 BACKGROUND AND INTRODUCTION

Introduction

- 6.1 A revised approach to managing risk has been adopted in recent years. This has led to an overhaul of the Corporate Risk Register. Advice and guidance has been provided by Veritau and in some cases by North Yorkshire County Council.
- 6.2 This work has been recognised and endorsed by Elected Members who see it as an important part of the Council's improvement strategy. As part of that, an update on Risk Management, including the Corporate Risk Register, is presented to Overview and Scrutiny Committee twice a year.
- 6.3 The ongoing cycle of regularly updating of the Corporate Risk Register has demonstrated the Council's improvement journey, showing how risks are being managed and generally downgraded over that period. However Risk Management is an ongoing process and the papers presented here will continue to be updated.
- 6.4 The Corporate Risk Register is a key strategic document setting out the medium to long term goals and objectives of the Council and the associated risks. The register is a live document and is updated on a regular basis to set out the controls and mitigations in place to control identified risks.
- 6.5 To assist with consideration of the register, the current scoring matrix is defined as below:



- 6.6 Each risk has two elements: the probability of the event occurring (likelihood) and the consequence if it does occur (impact).
- 6.7 The Council uses a 5x5 matrix which means that there are five levels of likelihood (*very low, not likely, likely, very likely and almost certain*) and five levels of impact (*low, minor, medium, major and disaster*). The intersection of the likelihood and impact of a specific risk on the matrix will decide its score and, in turn, the requirements for its management. This is known as 'risk analysis' and is the quantitative element of the risk assessment process which takes place following risk identification.

- 6.8 The aim of risk analysis is to estimate the likelihood and impact of the risk on three different levels. The first level is the original risk (also known as the 'gross risk' or the 'inherent risk'). This is an estimation of the impact and likelihood of the risk *before* the effects of any controls that have been put in place are taken into account. The significance of this score is that it provides clear indication as to whether or not the risk has the potential to have a disastrous impact on the Council. Equally importantly, if not more so, is that the score enables an assessment of the importance of the controls acting on the risk. A control is any preventative / proactive (i.e. help to reduce the likelihood of the event) or mitigating / reactive (i.e. help to reduce the impact of the consequences of the event) measure that is put in place to reduce the likelihood and/or impact of the risk.
- 6.9 The second level is the current risk (also known as the 'net risk' or the 'residual risk'). This is the analysis of the impact and likelihood of the risk occurring with all the controls and mitigating actions in place. It is the assessment of the risk at the time the risk analysis was undertaken.
- 6.10 The third level is the target risk. This is a score which reflects the analysis of the impact and likelihood of the risk when all desired controls are fully implemented and are operational. Wherever possible, the target risk score should be set at or below the risk appetite for the risk being analysed. However, the nature of the risk might mean that this not possible. In these circumstances the risk should be managed to a level that is as low as reasonably practicable.
- 6.11 Since the last report to the Overview and Scrutiny Committee in September 2021, the main update areas to the Corporate Risk Register include the Covid-19 risk (CRR01) to incorporate references to the potential impact of the Omicron Covid variant and the prioritisation of critical services to support businesses and the local community. The risk linked to Local Government Organisation (CRR012) has also been reviewed to take account of the latest feedback from the LGR workstreams and updates from the implementation team.

7.0 IMPLICATIONS

- 7.1 The following implications have been identified:
- a) Financial
As set out in the Corporate Risk Register.
 - b) Legal
Failure to manage risk effectively can result in legal action and costs.
 - c) Other (Climate Change, Equalities, Staffing, Planning, Health & Safety, Environmental, Crime & Disorder)
Failure to manage risk can result in failure to fulfil obligations and duties.

Elizabeth Heath
Head of Corporate Governance

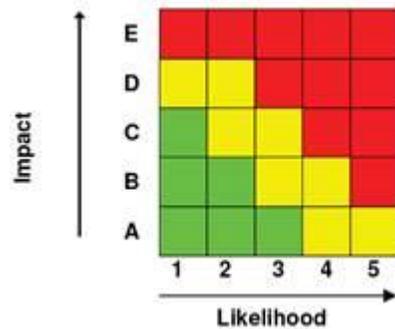
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Background Papers:

None

RYEDALE DISTRICT COUNCIL: CORPORATE RISK REGISTER

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| Score | Likelihood | Score | Impact |
|-------|----------------|-------|----------|
| 1 | Very Low | A | Low |
| 2 | Not Likely | B | Minor |
| 3 | Likely | C | Medium |
| 4 | Very Likely | D | Major |
| 5 | Almost Certain | E | Disaster |

| | | |
|--|--|----------------------------------|
| CRR01: Covid - 19 | Risk Owner: Stacey Burlet | Risk Score |
| <p>Description</p> <p>Failure to protect lives and livelihoods in Ryedale during the response and recovery stages of the Covid -19 pandemic and to plan and deliver measures to ensure organisational resilience and staff support through the Covid/post-Covid recovery period</p> | <p>Causes</p> <p>Spread of virus/mutations cannot fully be controlled</p> <p>Partnership response means that multiple bodies have overlapping accountabilities and responsibilities</p> <p>Legislation means that the district council has additional accountabilities and responsibilities; frequently determined at short notice</p> <p>Fast paced and constantly changing policy environment necessitating the development of immediate procedures / standardised policies and procedures may not be fit for purpose</p> <p>Lack of understanding, buy in and consistency across the Council</p> <p>Inadequate recording</p> <p>Lack of proactive actions</p> <p>Lack of adequate training</p> <p>Subcontractors and commissioned organisations fail / cannot fulfil agreed obligations</p> <p>Lack of / inadequate equipment</p> <p>Poverty and unemployment resulting from the impact of Covid - 19</p> <p>Economic recession arising from the consequences of Covid – 19 with subsequent local business failures and job losses</p> <p>Staff sickness and the ability to deliver critical services/ longer term objectives as set out in the Council Plan / the LGR programme</p> <p>Multiple staff isolation all at the same time impacting on resources and the level of service delivery across all areas</p> <p>Failure to recognise the scale of the Covid shock upon the operations of the Council and its staff and respond accordingly, including short and long-term impact</p> <p>Vulnerable residents not being able to access support</p> <p>Lack of sustainability over the longer term across the voluntary and community sector</p> <p>Failure to support Community Support Organisations and the wider voluntary and community sector effectively</p> <p>Failure to secure sufficient Government funding to address key issues</p> <p>Lack of financial and staffing capacity deliver required actions</p> | <p>Original</p> <p>5E</p> |

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| CRR01: Covid - 19 | | Risk Owner: Stacey Burlet | Risk Score |
| | | <p>Lack of effective strategic planning to address response and recovery</p> <p>Lack of effective engagement with partner agencies within and beyond Ryedale</p> <p>Lack of access to testing</p> | |
| Consequences | Proactive Controls | Reactive Controls | Current |
| <p>Rate and spread of Covid-19 mutations increases locally, nationally and globally</p> <p>Increased deaths and/or long-term health conditions</p> <p>Lack of test and trace capacity locally including RDC's failure to support the provision of effective processes</p> <p>Increased risk of and potential consequences of local targeted interventions</p> <p>Increased levels of poverty, job losses, business failure and homelessness across the district</p> <p>Failure to plan for and deliver a strong post-Covid recovery</p> <p>Failure to ensure that vulnerable people are supported through and beyond the Covid emergency</p> <p>Decline in community resilience</p> | <p>Full engagement with district, regional and national partners to support COVID response and recovery, including national Government and funding agencies and multi-agency locality focused activity</p> <p>Advice, guidance and proactive support provided to attractions, businesses and communities by a range of Council services</p> <p>Proactive engagement on mutual aid issues</p> <p>Plans for response and recovery are in place and operational.</p> <p>RDC employee procedures and arrangements are in place including personal and workplace based risk assessments; these are revisited in line with changing Government guidance</p> <p>Additional capacity sourced and implemented where required (e.g. Planning support)</p> | <p>Additional control measures as identified and put in place as required to ensure COVID secure workplaces, customer access, democratic meetings and service delivery to ensure that the Council's role in protecting lives and livelihoods is fully acquitted</p> <p>Daily scrutiny of data and intelligence to determine any actions required</p> <p>Facilitation of physical and virtual meetings in accordance with virus prevalence</p> <p>Briefings and communications for Elected Members, Strategic Management Board, and all staff as needed</p> <p>Ongoing participation in district, regional and national working groups, that are coordinating immediate response (i.e. in relation to outbreak management) and recovery</p> <p>Ongoing activity to ensure that strategic plans reflect emerging policy direction</p> | 3D |

| CRR01: Covid - 19 | Risk Owner: Stacey Burlet | | Risk Score |
|---|---|---|------------|
| <p>Decline in physical and mental health of residents</p> <p>Pressures resulting in reduced voluntary and community sector sustainability</p> <p>Potential for community tensions</p> <p>Performance reduction / failures as a consequence of increased demands on Council services from customers and businesses</p> <p>Failure to deliver key Council services / longer term Council Plan objectives / LGR</p> <p>Adverse social and health consequences for staff leading to staff absence/reduced productivity</p> <p>Reputational risks resulting in a loss of public confidence in the Council</p> <p>Breach of obligations relating to legislation e.g. civil contingency, health and safety, data protection, with the risk of claims, prosecution and financial penalties for the organisation and prosecution and personal liability of officers (HSE)</p> <p>Loss of revenue to the Council and use of reserves to offset the financial consequences of Covid -19</p> | <p>Workforce access to PPE and health assured support</p> <p>Weekly staff meetings with the CX, supplemented by email and intranet based communications, which includes updates in relation to customer, democratic and workforce arrangements as impacted by COVID</p> <p>Additional support for the voluntary and community sector including the Community Connect partnership support programme</p> <p>Participation in regional and national partnerships to identify and support the district's most vulnerable residents</p> <p>Finance tracker and Government returns are maintained to assess the financial impact of Covid-19 mitigation. This is complemented by proactive lobbying to ensure that the maximum amount of Government funding is secured and appropriate resources are in place</p> <p>Update of Business Continuity Plans to take into account of ongoing Covid/post-Covid demands</p> | <p>Provision of budgets to ensure appropriate resources are in place to deliver key services following Section 151 advice</p> <p>Regular performance monitoring, with mitigating actions taken</p> <p>Report on an ongoing basis to central Government on Covid/post EU transition community impacts</p> <p>Targeted interventions are being undertaken where required by Environmental Health Officers</p> | |

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| CRR01: Covid - 19 | Risk Owner: Stacey Burlet | Risk Score |
| Mitigating Actions | | Target |
| <p>Targeted interventions are being undertaken where required by Environmental Health Officers</p> <p>Increased staffing capacity in stress / high volume areas in place - e.g. Planning</p> <p>Proactive monitoring of staff and community contraction rates</p> <p>COVID - 19 actions are proactively and reactively addressed as required following guidance and, on occasions, instruction for Government and the Director of Public Health</p> <p>Work with businesses, partner agencies, community support organisations and Government to ensure that funding is maximised, support is in place and plans are delivered to support communities through post Covid/post-EU transition periods</p> <p>Continual delivery of effective communications for businesses/Ryedale residents</p> <p>The Section 151 Officer has assessed the cost of post-Covid recovery work to the end of Q3 2021/22. Financial impacts associated with Omicron will now be tracked, with the Covid 19 financial tracker now being reissued to ensure that any additional costs are tracked and can be reported to Elected Members as needed</p> <p>Increased investment in resources to support ongoing good staff mental and physical health and well-being; including continuing to ensure that key messages/information on support for staff is publicised internally</p> <p>Ensure provision of appropriate PPE for staff and that appropriate home working facilities and support are in place</p> <p>Assessing levels of staff resilience/appropriate resourcing in the event of concurrent incidents (e.g. winter flooding), with clear plans in place with regards to prioritising the delivery of critical services – e.g. Ryecare, housing and homelessness, domestic waste collection, revenues and benefits, communities and environmental health</p> <p>Put in place appropriate plans to ensure health and safety in all Council premises for staff and visitors, including when office based working at RDC facilities takes place</p> | | 3C |

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| CRR02: Health and Safety | | Risk Owner: Margaret Wallace | | Risk Score |
| Description Failure to comply with and embed health and safety policy and procedures in the council could result in risk to the safety of employees, visitors, contractors and citizens | | Causes Policies and procedures outdated or not fit-for-purpose Lack of management oversight and controls by managers and lack of understanding, buy in and consistency across the Council Inadequate recording Lack of proactive actions Weak action planning Lack of support capacity Lack of adequate training Subcontractors and commissioned organisations, contract management Lack of /inadequate equipment Public health incidents / pandemics | | Original 5E |
| Consequences | | Proactive Controls | Reactive Controls | Current |
| Resulting in injuries, fatalities, claims Reputational damage Impact on service delivery Risk of prosecution and financial penalties for the organisation Prosecution and personal liability of senior officers and consequences for Leader/Dep Leader Lack of containment of public health emergencies Covid outbreak / lack of staff and reputational damage | | Health and safety policy and action plan are reviewed on a regular basis, with updates and advice provided to managers Health and safety risk assessment in place and reviewed regularly Quarterly Corporate Health , Safety and Wellbeing Group Mandatory training (SMB monitored) and service-specific training Covid -19 risk assessment and controls in place with regards to service delivery, employee welfare and democratic meetings Democratic meetings policy and risk-assessments | Accident reporting procedure Annual health and safety report Daily COVID-secure workplace monitoring | 3C |

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| CRR02: Health and Safety | Risk Owner: Margaret Wallace | Risk Score |
| Mitigating Actions | | Target |
| <p>All staff required to confirm understanding of policy on annual basis</p> <p>Delivery of action plan monitored on quarterly basis</p> <p>Provision of specialist health and safety advice to provide up-to-date guidance and lead progression on health and safety activity</p> <p>Communications rolled out across staffing and employee groups and on intranet</p> <p>Regular meetings with UNISON and service managers on COVID-secure workplace</p> <p>Targeted intervention programme in place in Waste and Environmental Services using additional capacity</p> <p>Ongoing health and Safety audit of facilities</p> <p>Implementation of COVID guidance/instruction from government and public health</p> | | <p>2B</p> |

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| CRR03: Staffing Resilience and Capacity | | Risk Owner: Haroon Rashid | | Risk Score | | |
| Description Lack of resilience or capacity to achieve strategic and/or operational objectives | | Causes Lack of staffing resource to support delivery against the range of strategic and operational objectives and demands Lack of staff development to support succession planning, retention and successful delivery, including LGR transition Inadequate budget to fund an appropriate staffing structure / LGR implementation Poor reputation as an employer / lack of perceived continuity as an employer given LGR Failure to recruit, particularly in specialist areas where the market is highly competitive Lack of or inadequate workforce strategy including failure to take advice to inform planning, delivery or decision-making Covid-19 pandemic impact on labour market Covid-19 long Covid implications Unprecedented circumstances requiring the reallocation of resources to meet urgent, reactive need e.g. COVID outbreak, natural emergency , BREXIT, LGR Increasing impact of LGR proposals on staff turnover, staff resilience and morale Loss of senior staff prior to vesting date of the new North Yorkshire Council Sensitivity around elected member / officer relationships | | Original | | 5D |
| Consequences | | Proactive Controls | | Reactive Controls | | |
| Customer and local resident detriment Service failure Special measures if statutory or legislative expectations are unmet Poor customer satisfaction, leading to complaints and requests for compensation | | On-going proactive approach to recruitment and resourcing to address current 'gaps' in establishment Learning Zone access for all employees Job evaluation process in place | | Outsourcing to specialist agencies where there is a need to ensure that statutory, legislative or important service need is met e.g. legal advice, dog breeder accreditation Re-prioritisation of service delivery Turn the service off if practical - this course of action has been taken when extreme | Current 3C | |

| CRR03: Staffing Resilience and Capacity | Risk Owner: Haroon Rashid | | Risk Score |
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| <p>Low staff morale Poor productivity among staff</p> <p>Increasing sickness levels</p> <p>Higher staff turnover and loss of talent</p> <p>LGO decisions</p> <p>Damage to reputation</p> <p>Staff wellbeing suffers</p> <p>Legal action</p> <p>Financial penalties</p> <p>Failure to meet legislative requirements, election and electoral register responsibilities</p> <p>Increasing levels of sickness absence as a result of COVID-19 contraction rates</p> <p>Inability to meet increased service demand as a consequence of additional accountabilities and increased service demand brought about by COVID -19</p> | <p>Financial monitoring and reporting - including a new approach to budget strategy development and oversight</p> <p>Regular CX, SMB, manager & staff communication and engagement sessions taking place to ensure that the pulse of the organisation is taken and responded to</p> <p>Regular surveys – ensuring views of workforce are captured and an action plan put in place to address concerns</p> <p>Graduate trainees and apprenticeship programmes in place</p> <p>HR/OD service ensures that organisational development and the employee journey is increasingly focused upon</p> <p>Elections Risk Register</p> <p>All staff complete mandatory training requirements, with accelerated levels for managers</p> <p>Shared service arrangements in place to support organisational resilience where this represents best value and ensures that a focus can be maintained on both short and longer term objectives</p> | <p>staff shortages have occurred (e.g. street sweeping so that bin collections occurred) Overtime – exceptional and by agreement</p> <p>Service Risk Registers incorporate mitigations for resilience and capacity risks</p> <p>Zero tolerance approach rolled out includes acting on the speak out policy as needed and exit interview intelligence</p> <p>Additional control measures as identified / required to ensure COVID secure workplaces and service delivery</p> | |

| CRR03: Staffing Resilience and Capacity | Risk Owner: Haroon Rashid | Risk Score |
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| | <p>Increased staffing capacity investment in place endorsed through budget setting processes</p> <p>People and Culture Plan reviewed and rolled out with ongoing assessment of effectiveness</p> <p>Organisational Development programme initiated with manager & staff involvement as appropriate</p> <p>New Ways of Working plans discussed and implemented – service specific</p> <p>New collective agreement and revised pay, terms and conditions package implemented for Grade 10 and below directly employed by the organisation</p> <p>Appraisal process rolled out linked to LGR decision and council plan delivery</p> <p>Delivery of HR/OD actions in the corporate delivery programme of the Council Plan</p> <p>Revised Council Plan and associated corporate programme in place to determine strategic objectives and the delivery plan for achieving them</p> <p>New partnership arrangement in place for Procurement support</p> | |

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| CRR03: Staffing Resilience and Capacity | | Risk Owner: Haroon Rashid | Risk Score |
| | <p>Adoption of new policies and procedures such as zero tolerance</p> <p>Budget strategy development, financial monitoring and reporting includes a strong focus on workforce related issues</p> <p>Covid 19 procedures and arrangements reviewed regularly</p> | | |
| Mitigating Actions | | | Target |
| <p>Appraisal process has been refreshed and revised to ensure that there is a focus on issues such as supporting LGR transition, and performance against strategic and operational goals and a training, learning and development plan linked to professional and personal goals. Appraisals took place across the organisation in August/September 2021 and will be reviewed every 6 months</p> <p>Initial Training Needs analysis completed; new training and development programme in place for employees and so that managers support and fulfil their responsibilities to employees</p> <p>Review of commissioned and third party arrangements and obligations</p> <p>New partnership arrangement in place for legal support</p> <p>Rolling programme of review of policies and procedures underway to ensure they are fit for purpose</p> <p>Review of Waste Services currently taking place to ensure the operating model is fit for purpose</p> | | | 2B |

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| CRR04: Financial Management | | Risk Owner: Anton Hodge | | Risk Score |
| Description Failure to have adequate financial management within the Council | | Causes Lack of data or poor system output Finance staff capacity Political/management perception Lack of informed decision making Lack of confidence, engagement, experience and awareness within managers across the council Unforeseen financial pressures resulting from Covid-19 and associated variants Funding cuts Political environment changes Economic – high inflation/increased demand | | Original 5E |
| Consequences | Proactive Controls | Reactive Controls | Current | |
| Over or underspend Lack of investment Damage to reputation Qualified audits Lack of awareness of resources, leading to impact on performance (spending in 'wrong' areas) Possible external intervention Weak long term planning | Budget monitoring and reporting Root and branch reviews External support Financial Performance Reports Budget Managers' access to Pentana Financial Strategy Capital Plan Treasury management Report to committees | Budget monitoring and reporting, including capital Continuous cycle of Root and branch reviews Review of Audit arrangements to ensure correct focus on areas of risk Prioritisation of funding/use of reserves Review of commissioned and third party arrangements and obligations In-year review to ascertain impact of Covid and assess reliance on reserves to ensure a balanced outturn for 2021-22 | 3C | |

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| CRR04: Financial Management | | Risk Owner: Anton Hodge | | Risk Score |
| | <p>Review and update reports on financial performance</p> <p>Review capacity of financial support More member involvement and transparency in Financial Strategy and Capital Plan</p> | <p>Work with partners and other LAs to determine medium term impact of Covid on income streams and build into refreshed Financial Strategy</p> | | |
| Mitigating Actions | | | | Target |
| <p>Additional External support where appropriate</p> <p>Deliver training/agree expectations of role of budget managers</p> <p>Use of Benchmarking – including financial and service performance</p> <p>Review all financial procedures including contract procedures</p> <p>Focussed reviews on areas of budget vulnerability, including overspends and where savings are expected</p> <p>Work with service managers to ensure required savings are agreed and understood</p> <p>Ensure members are kept informed of spending plans and impact on reserves</p> <p>Set out financial procedures relating to LGR, including any impact on decision-making processes</p> | | | | 2B |

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| CRR05: Information Governance | | Risk Owner: Elizabeth Heath | | Risk Score |
| Description Ineffective data governance arrangements lead to unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FOI requests, and inability to locate key data upon which the Council relies, resulting in loss of reputation and poor decision-making | | Causes Lack of staff and expertise Lack of staff development Governance not embedded in organisational culture – lack of communication Information governance arrangements not in place for shared services Simple mistakes | | Original 5E |
| Consequences | Proactive Controls | Reactive Controls | Current | |
| Service user detriment Service failure Special measures Poor customer and/or staff satisfaction Staff turnover ICO decisions LGO decisions Damage to reputation Staff wellbeing suffers Legal action Financial penalties | Training, policies in place, regular CIGG meetings, access to expert advice, monitoring systems and audits, information asset register DPIA template in place Continue to emphasise personal responsibility of staff for all information and consider disciplinary action against breaches Continue to review information asset registers Ensure individual data sharing arrangements are completed for each activity Ensure Data Protection risks are managed to comply with GDPR Separate Information Governance Risk Register | Breach process in place to report and investigate potential data breaches FOI review process in place, lessons learnt considered CIGG reviews | 3C | |

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| CRR05: Information Governance | Risk Owner: Elizabeth Heath | Risk Score |
| | Online mandatory training completed by existing staff and by new starters as part of induction | |
| Mitigating Actions | | Target |
| <p>Ensure individual data sharing arrangements are completed for each activity</p> <p>Ensure Data Protection risks are managed to comply with GDPR - specifically around contracts and other service agreements</p> <p>Continue communications to staff</p> <p>Continue regular training</p> <p>Breaches recorded, monitored and followed up</p> <p>Review resourcing for dealing with FOI' and SAR's</p> | | 3C |

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| CRR06: ICT | | Risk Owner: Margaret Wallace | | Risk Score | |
| Description Ability to deliver public services is severely compromised or reduced due to ICT failure, risk of cyber- security | | Causes Outdated or inappropriate policies Poor corporate controls over ICT system Increase investment in maintaining and developing core systems Inadequate contractual arrangements, and poor contract management Over-reliance on third party suppliers and lack of out of hours support Outdated, ineffective or ill-configured ICT infrastructure/ lack of investment in appropriate technologies Ill-configured or inadequate software Limited internal capacity within local IT team to manage increasing IT service delivery expectations Lack of investment in strategic IT resource Loss of program management support to implement large projects Lack of adequate training in effective system use Lack of/inadequate equipment Inadequate disaster recovery planning System security is compromised through inadequate security controls or cyber attack Fraud - internal theft of data or sabotage of system/data Insufficient investment reduces ICT capacity and effectiveness National/ regional electric grid failure No back up supply of electricity at Ryedale House | | Original 5E | |
| Consequences | Proactive Controls | Reactive Controls | Current | | |
| Citizens do not receive a service or receive a poor service Services are unable to operate, or must operate at a reduced level, for a protracted period of time Services are unable to operate efficiently | PSN compliance health check and certification/ regularly undertaken Robust Business Continuity and Disaster recovery plans Contract audit | DR site available if required Third party support | 3C | | |

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| CRR06: ICT | | Risk Owner: Margaret Wallace | | Risk Score |
| <p>Data is lost or irretrievable/ reputational damage</p> <p>Organisation loses PSN connection Systems are breached</p> <p>Fraud/Financial Impact</p> <p>Damage to reputation</p> | <p>Centralization of IT decision-making and budgets</p> <p>IT policies and procedures</p> | | | |
| Mitigating Actions | | | | Target |
| <p>External service review and reporting</p> <p>Annual third party health check and implementation of actions</p> <p>Maintenance of software and systems within service support dates. A program of system upgrades, supported by IT, is underway to ensure the Council is operating secure and compliant systems</p> <p>Ongoing investment in cloud and SaaS</p> <p>Training and development of staff in appropriate use of systems and software, including security</p> <p>Links with National Cyber Security Centre</p> <p>Testing of DR arrangements</p> <p>Review our emergency planning arrangements to mitigate if there is a National/ regional electric grid failure. Link with CRR08 - assets on Ryedale response to electrical outage in conjunction with IT to ensure we have a robust infrastructure and response</p> <p>Review of demands for IT third party support for out of hours</p> | | | | 2C |

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| CRR06: ICT | Risk Owner: Margaret Wallace | Risk Score |
| Regular review and updating of WhatsApp group alert systems in liaison with the Communications Team; to inform managers, staff and elected members of any emergency response of IT issues | | |
| Project management support recruited to assist in the program delivery of the strategic IT upgrades | | |

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| CRR07: Contracts and Procurement | | Risk Owner: Elizabeth Heath | | Risk Score |
| Description Failure to ensure that effective procurement and contract management is carried out across the Council Brexit risk to procurement and supply chain | | Causes Lack of awareness and ownership across the Council Outdated policies and procedures The UK leaving the EU (Brexit) with no trading deals in place | | Original 5D |
| Consequences | | Proactive Controls | Reactive Controls | Current |
| Inability to deliver Value for Money Risk of breaking procurement law and regulation Financial penalties Less effective contracts/contract management Missed opportunities The result of the Brexit negotiations could have a negative impact on the Council's supply chain, both with direct tier 1 suppliers and their sub-contractor network Existing supply contracts may be impacted by changes in regulation, or legal requirements Assurance of Supply - risk that a complete failure in supply of the goods / service (e.g. Carillion) from key suppliers could be felt Service levels may be impacted negatively by any changes in the Supply Chain or access to workers, particularly in low skilled categories | | Contracts Register Quarterly update and review Wider Partnership arrangements Increase the regularity of supplier risk assessments, from annual to bi-annual or quarterly, dependent on the strategic importance of the contract Work with legal services to understand financial and legal the impact of non-compliant contracts or those operating on suppliers' terms and conditions Early engagement with supply markets when we are looking to tender Review of the services the council delivers to assess the potential impact on specific supply chains Early supplier engagement should identify areas of cost increase that need to be | Review of expired contracts Retrospective permissions applied for Review of projects due out to the market at the time the UK leaves the EU | 3C |

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| CRR07: Contracts and Procurement | | Risk Owner: Elizabeth Heath | Risk Score |
| Financial risk need to consider if any supply changes will drive up costs of the Goods / Services/Works in the short/medium/long term | factored into budget control and or change in requirements New partnership in place with NYCC to deliver procurement services | | |
| Mitigating Actions | | | Target |
| <p>Ensure all staff with authority for procurement and contracts are appropriately trained and are aware of their responsibilities</p> <p>New Procurement and Contract Management Strategy (taking into account health check) and Action Plan in place to ensure that Value of Money is a key requirement and that relevant staff take a commercial approach to purchasing. This also encompasses a detailed spend analysis to identify and deliver savings</p> <p>Networking with relevant groups and other local authorities to ensure we are aware of important developments and to share and learn from good practice and review shared agreements</p> <p>Regular reporting on performance</p> <p>Review of shared service arrangements to ensure they are fit for purpose, including Internal Audit reports</p> <p>Undertake Supplier analysis, segment and understand our supplier base. See where your critical suppliers are, and even look at who supplies our suppliers. If there are EU companies in that mix, understand how that could impact the rest of our flow</p> | | | 2B |

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| CRR08: Major Events/Incidents (non-Covid) | | Risk Owner: Margaret Wallace | Risk Score |
| Description Failure to respond to major regional, national or global events and incidents – and to learn from previous incidents | | Causes Lack of senior officer and workforce capacity Lack of business support Poor networking Lack of IT capacity Lack of policy and horizon scanning function Unknown and unpredicted events e.g. natural disasters Potentially foreseeable events Carbon emissions Local Government reorganisation Government policy – major change of direction Scale of natural disaster e.g. flooding Sustained periods of inclement weather Electrical failure Injury/ death to public or staff Terrorism related act at major event and in crowded places | Original 5E |
| Consequences | Proactive Controls | Reactive Controls | Current |
| Lack of staff capacity to deliver services Lack of funding to deliver services Unable to cope with reduced (or increased) funding Not able to lobby appropriately Delays in responding to / implementing new requirements Costs arising from lack of pre-agreements and agreed policy/processes | Membership of regional/sub-regional response structures NYLRF Service Level Agreement with NYCC Resilience and Emergencies Team to provide expert support, training and advice (1 day per week) Corporate Emergencies and Resilience Action Plan Corporate Recovery Plan Service Business Continuity Plans | Briefing papers for Strategic Management Board and Elected Members on immediate and urgent issues relating to major change and incidents Participation in civil contingency planning and delivery – Strategic Command Group, Tactical Command Group for York and North Yorkshire Participation in region/sub-regional response groups | 5D |

| CRR08: Major Events/Incidents (non-Covid) | | Risk Owner: Margaret Wallace | Risk Score |
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| <p>Missed opportunities</p> <p>Death and / or failure to protect public health</p> <p>Increased risk of flooding and other natural disasters</p> <p>Lack of ability to deliver civil contingency partnership accountabilities</p> <p>Inability to support local communities and businesses to recover from major changes or incidents</p> <p>Trauma faced by families and work colleagues</p> | <p>Membership of expert bodies that lobby Government and provide updates and guidance during period of crisis e.g. DCN, LGA</p> <p>Allocation of finance to address key issues</p> <p>Cross department and cross-agency working</p> <p>Membership of expert bodies to guide our response to policy development</p> <p>Attendance at seminars, workshops and professional development</p> <p>Attendance of various Yorkshire and the Humber/ NY and Yorkshire-wide meetings i.e. Leaders, Chief Executives Group</p> <p>Regular liaison with partnership bodies e.g. the LEP</p> <p>Climate Change Action Plan</p> <p>Participation in civil contingency planning and delivery, e.g. Strategic Recovery Group for York and North Yorkshire</p> <p>Learning from previous incidents</p> <p>Integrated emergency planning meeting</p> <p>Corporate Emergency Planning meeting</p> | <p>Learning form table top exercises/previous events</p> | |

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| CRR08: Major Events/Incidents (non-Covid) | Risk Owner: Margaret Wallace | Risk Score |
| | <p>Corporate Emergency Planning Training and Exercise Plan</p> <p>Malton, Norton and Old Malton Multi-Agency Emergency Pump Plan</p> | |
| Mitigating Actions | | Target |
| <p>Networking with relevant groups and other local authorities to ensure we are consistent and sharing and learn from good practice</p> <p>Review civil contingency planning and delivery – considering new legislation, national resilience standards, corporate command structure and out of hours arrangements to include the delivery of an action plan monitored on quarterly basis</p> <p>Link with assets on Ryedale response to electrical outage in conjunction with IT to ensure we have a robust response</p> <p>Continue to develop the new integrated emergency planning meeting (multi-agency) for Ryedale</p> <p>Continue to develop the new corporate emergency planning group with key action plan</p> <p>Provision of specialist emergencies and resilience advice to provide up-to-date guidance and lead progression on emergency planning activity</p> <p>Develop community resilience plans in partnership with parish and town councils</p> <p>Increase awareness of community preparedness in collaboration with other partner agencies including the production of town</p> | | 4D |

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| CRR09: Job Creation, Economic Sustainability and Growth | | Risk Owner: Phillip Spurr | | Risk Score |
| <p>Description</p> <p>Failure to support business and the growth/retention of jobs locally as the district recovers from the Covid pandemic; failure to take advantage of the benefits of national and international changes (departure from the EU)</p> <p>Failure to secure a devolution deal for York and North Yorkshire, and to take advantage of new funding opportunities, such as the Shared Prosperity Fund</p> | | <p>Causes</p> <p>Failure to recognise the scale of the Covid economic shock and respond accordingly</p> <p>Failure to engage business appropriately</p> <p>Failure to recognise the opportunities offered by the new arrangements with the EU</p> <p>Lack of effective strategic planning to address these issues</p> <p>Lack of effective engagement with partner agencies within and beyond Ryedale</p> <p>Failure to engage effectively in shaping a devolution deal</p> <p>Failure to secure sufficient Government funding to address key issues</p> <p>Lack of financial and staffing capacity deliver required actions</p> | | Original |
| | | | | 5D |
| Consequences | Proactive Controls | Reactive Controls | Current | |
| <p>Economic underperformance leading to business failures and job losses</p> <p>Adverse social and health consequences</p> <p>Decline/stagnation in district town centres</p> <p>Decline in key economic sectors, including agriculture/manufacturing/services/retail, leisure and hospitality</p> <p>Inability to deliver key infrastructure improvements</p> <p>Inability to deliver low carbon initiatives</p> | <p>New corporate plan reflects opportunities/priorities in each of these areas</p> <p>Provision of ongoing Covid business and town centre support measures</p> <p>Delivery of a comprehensive Ryedale post-Covid economic recovery plan</p> <p>Effective provision of business support – both financial and non-financial</p> <p>Full engagement with district, regional and national partners to deliver economic recovery – e.g. LEP/NYCC/national</p> | <p>Briefing papers for Elected Members and, Strategic Management Board provided on a regular basis on each of these issues</p> <p>Ongoing participation in working groups, fora and partnerships helping to direct these activities</p> <p>Ongoing activity to ensure that strategic plans reflect emerging policy direction</p> <p>Regular performance monitoring, with mitigating actions taken</p> <p>Briefing papers for Elected Members and, Strategic Management Board provided on a regular basis on each of these issues</p> | 3D | |

| CRR09: Job Creation, Economic Sustainability and Growth | Risk Owner: Phillip Spurr | | Risk Score |
|--|---|--|------------|
| <p>Ryedale becomes an unattractive location for investment, and for people to live, work, invest and visit</p> <p>Increased loss of young people seeking economic opportunities elsewhere</p> <p>Decrease in new employment opportunities and increased unemployment</p> <p>Loss of investment/business as it seeks opportunities elsewhere</p> <p>Reputational risks – to the council and to the wider district</p> <p>Loss of public confidence in the council</p> <p>Recruitment difficulties</p> <p>Price uncertainty and supply chain difficulties</p> <p>Price pressures from contractors, increased demands on services from customers and businesses</p> <p>Loss of revenue to the council</p> | <p>Government/funding agencies</p> <p>Securing of additional investment – e.g. Levelling Up/Community Renewal Fund resources</p> <p>Proactive lobbying to ensure that Government funding support is maximised for all Ryedale economic sectors including manufacturing, services, retail, leisure and hospitality, tourism and culture</p> <p>Proactive engagement to shape the York/North Yorkshire devolution deal negotiations/local government reorganisation to ensure that benefits to Ryedale are maximised</p> <p>Utilisation of guidance upon Britain’s future relationship with the EU on specific areas such as trade/procurement/funding programmes</p> <p>Development of comprehensive Investment Plan to secure Shared Prosperity Fund funding</p> <p>Progress on all actions monitored and reported to Strategic Management</p> | <p>Lobbying of local, regional and national partners to increase support and resources to promote increased economic sustainability</p> | |

| | | |
|---|--|------------|
| CRR09: Job Creation, Economic Sustainability and Growth | Risk Owner: Phillip Spurr | Risk Score |
| | Board and to Members of a regular basis | |
| Mitigating Actions | | Target |
| <p>Work with businesses, partner agencies and Government to ensure that funding is maximised, support is in place and plans are delivered to support business health, jobs and livelihoods in the Covid/post Covid/post-EU transition periods</p> <p>Engage in partnership groups/fora to ensure effective planning and delivery of cross-North Yorkshire economic recovery initiatives</p> <p>Report on an ongoing basis to central Government on Covid/post EU transition economic impacts</p> <p>Play a full role in negotiations with Government to agree devolution asks and shape local government reorganisation proposals</p> <p>New EU relationship - continue to receive notification on emerging guidance on areas affecting Local Government, review impact on the Council and report regularly on this to Strategic Management Board</p> <p>Workforce: monitor the potential impact on recruitment and retention of LGR and other issues and address accordingly</p> <p>As part of the budget setting process, consider the impact of Covid and post-Covid economic recovery work, devolution/local government reorganisation proposals and the impact of the new relationship with the EU</p> <p>Continue to ensure that key messages/information in each of these areas is publicised both internally and externally</p> | | 3C |

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|---|---|--|------------|
| CRR10: Safeguarding | | Risk Owner: Margaret Wallace | Risk Score |
| Description | | Causes | Original |
| <p>Failure to ensure Safeguarding (Children and Adults), risk of death or injury to children/adults, through inappropriate practices, care or attention</p> <p>Failure to prevent children and vulnerable adults from being radicalised and drawn into extreme activity</p> | | <p>Lack of awareness and ownership across the Council</p> <p>Outdated policies and procedures</p> <p>Lack of assurance that written policies and procedures are actually being followed</p> <p>Contact details in the Safeguarding Policy are not up to date</p> <p>Training records are not adequate</p> <p>Compulsory attendance at safeguarding training for members has not been monitored and enforced</p> <p>No clear list of DBS checks necessary for staff</p> <p>Updating the guidance available to employees in respect of convictions</p> <p>Safeguarding arrangements are not included in contracts as standard</p> <p>Regular refresher training about information security and internet usage</p> <p>The Whistleblowing Policy needs to be updated</p> <p>Compulsory training on Prevent had not been delivered during since February 2020 due to Covid-19</p> | 5D |
| Consequences | Proactive Controls | Reactive Controls | Current |
| <p>Poorer outcomes for children and adults</p> <p>Impact on statutory responsibilities and regulatory judgement</p> <p>Complaints/claims/litigation</p> <p>Increased costs</p> <p>Adverse publicity</p> <p>Reputation damage</p> | <p>Internal Audit undertaken</p> <p>Quarterly safeguarding meetings are place with representatives from each service areas</p> <p>Quarterly meeting in place with elected members leads</p> <p>SMART Safeguarding action plan in place to mitigate risk and address any issues</p> <p>Quarterly reports to SMB on safeguarding</p> | <p>Annual check on safeguarding terms or reference/ policy</p> <p>Annual review of contract management for safeguarding clause</p> <p>Annual review of safeguarding training</p> <p>Policies and procedures will be reviewed on an annual basis to ensure they are kept up to date with new legislation/guidance and version control will be introduced to ensure annual review undertaken</p> | 3C |

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|---|---|---|--|--|--------|
| CRR10: Safeguarding | | Risk Owner: Margaret Wallace | | Risk Score | |
| <p>Adverse effect on the Council's partners and providers</p> <p>Adverse effect on morale</p> <p>Failure to ensure that vulnerable people are supported through and beyond the Covid emergency</p> <p>Staff may miss opportunities to prevent a vulnerable person from being radicalised or carrying out extreme activities</p> | <p>HR policies updated, and placed on Bob, all staff have read and understood the policy, and this is recorded centrally</p> <p>Training records updated</p> <p>Safeguarding training records being updated centrally</p> <p>Safeguarding performance statistics are included in the quarterly performance reports in line with this Council Plan priority</p> <p>Home Office online training rolled out to all staff as mandatory</p> | <p>Safeguarding action plan/report will report quarterly to SMB and Overview and Scrutiny Committee</p> <p>CTLP (Counter Terrorism Local plan) reviewed annually and information submitted to populate this</p> | <div style="background-color: yellow; width: 100%; height: 100%;"></div> | | |
| Mitigating Actions | | | | | Target |
| <p>Quarterly meeting set up and attended by all managers (service reps) to highlight awareness and ownership across the Council</p> <p>New policy and procedure drafted and distributed to all managers and staff and placed on BOB</p> <p>Record of employee having read and understood the new safeguarding policy recorded across the council centrally and checked quarterly for staff who have left or started with the council</p> <p>Contact details in the Safeguarding Policy are now updated</p> <p>Guidance drafted from HR of necessity for DBS checks and assessment, all managers checking JD, risk assessing and ensuring safe recruitment practices put in place</p> <p>The Whistleblowing Policy has been updated</p> <p>Senior management/heads of service/ managers to include safeguarding in their service/team plans and report back on progress</p> | | | | <div style="background-color: green; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center; font-size: 24px; font-weight: bold;">2B</div> | |

| CRR10: Safeguarding | Risk Owner: Margaret Wallace | Risk Score |
|---|------------------------------|------------|
| <p>All head of service/ managers will ensure that all staff have undertaken mandatory safeguarding training and ensured they have been given the policy and procedures and this is recorded centrally or on 1-2-1 and PRDs</p> <p>Review arrangements for the recovery of the systems following a software crash in line with business continuity/risk plans</p> <p>Out of hours standby arrangements in place in Ryecare, housing and community team</p> <p>Quarterly multi-agency Prevent meetings and annual action plan</p> <p>New domestic abuse legislation to be implemented and integrated into Ryedale services</p> | | |

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|--|---|--|-----------|------------|
| CRR11: Local Government Reorganisation | | Risk Owner: Stacey Burlet | | Risk Score |
| <p>Description</p> <p>Failure to plan for local government reorganisation, operate effectively during reorganisation, and plan for and manage the transition to a new local authority, resulting in failure to deliver against the strategic/corporate priorities in the Council Plan</p> | | <p>Causes</p> <p>Challenging and inflexible timeline set by Government directive and legislation</p> <p>Insufficient staffing resources</p> <p>Ineffective collaboration between authorities, resulting in lack of clarity or confidence in strategic direction</p> <p>Insufficient capacity to support implementation expectations for resourcing</p> <p>Workforce instability / loss of staff</p> <p>Lack of adequate training and development programmes, support and guidance for members and officers</p> <p>Reduction in quality of democratic representation / decision-making</p> <p>Loss of local knowledge and expertise</p> <p>Disruption to existing service delivery</p> <p>Anticipated benefits may not be realised</p> <p>Potential non-compliance with data regulations and cyber-attacks</p> <p>Lack of clear political direction resulting in political instability</p> <p>Weakened Trade Union/industrial relations</p> <p>Financial cost to RDC</p> <p>Service failure</p> <p>Lack of / poor governance</p> <p>Unforeseen spread of Covid-19 variants</p> <p>Increasing impact of LGR proposals on staff turnover, staff resilience and delivery of services</p> | | Original |
| | | | | 5E |
| Consequences | Proactive Controls | Reactive Controls | Current | |
| <p>Reputational damage / poor reputation among stakeholders, communities and partners</p> <p>Lack of productivity / reduced performance / service failure</p> <p>Risk of prosecution and financial penalties for the organisation</p> | <p>Staff Q&As and communications (email, intranet); including CX-led weekly meeting</p> <p>Elected Member communications/briefings and Group Leader Engagement</p> <p>Regular Management Board programme determines officer guidance and advice on corporate and strategic matters</p> | <p>Weekly staff meeting updates at a Departmental level</p> <p>Repeat red and amber performance ratings are investigated and addressed where possible, with appropriate elected member scrutiny</p> | 3C | |

| CRR11: Local Government Reorganisation | | Risk Owner: Stacey Burlet | Risk Score |
|---|--|--|------------|
| <p>Weakened relationships with other key stakeholders</p> <p>Loss of key staff during the transition, combined with reduced ability to recruit new staff</p> <p>Loss of meaningful representation of local communities</p> <p>Complexity in achieving strategic alignment between Members</p> <p>Potential for conflict in change process resulting in poor leadership performance and lack of clear direction</p> <p>Reduced budgets/capital due to increased spend prior to reorganisation</p> <p>Increased levels of staff sickness and fatigue</p> <p>Low staff morale and motivation</p> <p>Demand overwhelms capacity given the range of strategic and operational expectations / actions that need to be fulfilled throughout the LGR transition – e.g. service continuity, Omicron, winter management, loss of staff</p> | <p>Programme to provide advice, support and training to the workforce; which includes refreshed appraisal roll out to determine the programme for support over the next 18 months</p> <p>CX involvement in Government and North Yorkshire wide CX meetings; Chair of P&R involvement in political equivalent</p> <p>Clear communication on transferring terms and conditions and any associated implications</p> <p>NY website is accessible to all</p> <p>Individual work streams include subject specialist</p> <p>In kind and direct cost tracking is taking place (includes backfilling and specific invoices)</p> <p>Information Governance and Data</p> <p>Protection Rights Policy</p> <p>Equalities in Employment Policy</p> <p>Redeployment and Redundancy Policy and procedure</p> | <p>Targeted interventions as required to address complaints trends</p> <p>Mutual aid being established for enacted as required during LGR transition</p> | |

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|---|---|------------|
| CRR11: Local Government Reorganisation | Risk Owner: Stacey Burlet | Risk Score |
| | <p>Recruitment Policy, Framework and Guidelines including Safer Recruitment Council Plan 2020-24 articulates key delivery priorities up to 31 March 2023</p> <p>Strategy and performance management team in place to report on performance trends via quarterly and annual reporting</p> <p>Annual report and quarterly performance monitoring</p> <p>Complaints and compliments monitoring</p> | |
| Mitigating Actions | | Target |
| <p>The 2023 implementation timeline has appropriate governance and implementation arrangements are in in place</p> <p>Additional resource is being reviewed following recommendations from subject specialists in conjunction with work stream demands</p> <p>Defined work stream meetings taking place on a regular basis involving expert leads across all service areas, with representation from all North Yorkshire councils</p> <p>Significant amount of communications and engagement with staff is occurring across employee groups and on intranets, as well as open and honest engagement with trade unions and implementation team arrangements</p> <p>Boundary Commission will undertake review during the first term of the new council; electoral arrangements are being considered at the earliest stages of the implementation process</p> <p>All councils are playing a key role in the design of new services/transition arrangements to ensure service continuity from day 1</p> <p>There is a process in place for significant spending to be signed off through continuing authority governance processes and within RDC</p> <p>Ongoing tracking of benefits realised occurs via the NYCC Programme Office</p> | | 3C |

| | | |
|---|---------------------------|------------|
| CRR11: Local Government Reorganisation | Risk Owner: Stacey Burlet | Risk Score |
| <p>Quarterly performance monitoring is ongoing, with reports presented at Policy and Resources Committee throughout the year</p> <p>An annual report of progress against the Council Plan during 2021-22 is in progress, due to be presented to P&R in June 2022</p> <p>Refresh of the Council Plan is progressing to determine key delivery priorities up to 31 March 2023 and changes in political leadership</p> <p>Coordination team meetings are held each week to determine capacity concerns</p> | | |

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Public Document Pack Agenda Item 8

Policy and Resources Committee

Held at Council Chamber, Ryedale House, Malton
on Thursday 17 March 2022

Present

Councillors Joy Andrews, Arnold, Burr MBE (Vice-Chair), Clark, Delaney, Docwra, Duncan, Frank, Graham, Keal (Chair)

Overview & Scrutiny Committee Observers: Councillors Oxley, Raine and Wass

In Attendance

Lucy Furneaux, Lily Hamilton, Craig Nattress and Phillip Spurr

Lynne Bayes, Beckie Bennett, Stacey Burlet, Elizabeth Heath, Anton Hodge, Marcus Lee, Haroon Rashid, Bridget Skaife and Howard Wallis joined the meeting virtually

Minutes

103 **Emergency Evacuation Procedure**

104 **Apologies for absence**

There were no apologies for absence.

105 **Declarations of Interest**

Councillors J Andrews and Clark declared a personal, non-pecuniary and non-prejudicial interest in item 12 (Pickering Town CIC – Cycling Hub Proposal) due to their Group Leader Councillor Potter's involvement in the CIC programme.

106 **Minutes of the meeting held on 3 February 2022**

| Decision |
|---|
| That the minutes of the Policy and Resources Committee meeting held on 3 February 2022 be approved and signed by the Chair as a correct record. |

Voting Record

Carried by general affirmation

107 **Minutes from the Flood Management Working Party held on 8 February 2022**

The minutes from the Flood Management Working Party held on Tuesday 8 February 2022 were received.

108 **Minutes from the Local Plan Working Party held on 22 February 2022**

The minutes from the Local Plan Working Party held on Tuesday 22 February 2022 were received.

109 **Minutes from Grants Working Party held on 28 February 2022**

Councillor Arnold proposed and Councillor J Andrews seconded to approve the recommendations of the Grants Working Party held on 28 February 2022.

Decision

That the recommendations of the Grants Working Party held on 28 February 2022 be approved.

Voting Record

Approved by general affirmation

110 **Urgent Business**

There was one item of urgent business regarding amendments to the Community Grant Scheme criteria. The reason for the urgency was the timescale in which a decision was required.

The Chair also used this item to inform the Committee that the Structural Change Order had been approved. She noted that this could mean a change in how financial approvals over a certain amount are made. Further information will follow.

Finally, the Chair gave a statement regarding the Norton Skate Park as a report on this issue had been requested for this meeting of Policy and Resources. However, due to the complex nature of the proposals, the number of parties officers need to consult, and the capacity issues currently faced by staff, it had not been possible to produce this report in time. The Chair informed the Committee that significant progress had been made on the Skate Park. Norton Town Council has committed circa £40,000 of its budget to modify and resurface the equipment, excluding the half pipe. A contractor has been appointed and work is due to start imminently, with a view to the Skate Park opening in late spring. Negotiations regarding the refurbishment of the half pipe are ongoing. Progress will continue to be reported to the Committee, and the promised report will be presented at the next possible opportunity.

PART 'A' ITEMS - MATTERS TO BE DEALT WITH UNDER DELEGATED POWERS OR MATTERS DETERMINED BY COMMITTEE

111 **Appointment of Working Parties and Sub-Committees**

Decision

That the item be deferred for consideration at the next meeting of the Policy and Resources Committee.

Voting Record

Carried by general affirmation

112 **Contract Renewal - Supply of Liquid Fuel**

Considered – report of the Programme Director for People and Resources

Decision

Policy and Resources Committee retrospectively approved:

- i. The annual spend ranging from £233,000 to £277,400 from existing budgets for a 4 year period covering from 27 November 2019 to 26 November 2023 for the supply of fuel for the Council's vehicle fleet; and
- ii. The Council entering into the Contracts.

Voting Record

Carried by general affirmation

113 **Malton and Norton Infrastructure and Connectivity: Potential Funding Allocations**

Considered – report of the Programme Director for Place and Resources

Decision

That the item be deferred for consideration at the next meeting of Full Council.

Voting Record

6 For

4 Against

0 Abstentions

Recorded vote

For

Councillors J Andrews, Arnold, Burr, Clark, Frank, Keal

Against

Councillors Delaney, Docwra, Duncan, Graham

PART 'B' ITEMS - MATTERS REFERRED TO COUNCIL

114 **Pickering Town CIC - Cycling Hub Proposal**

Considered – report of the Programme Director for Place and Resources

Recommendation to Council

The Council approves funding of £175,000 to fund works outlined in section 6.12, subject to overview of detailed plans, with delegated authority given to the Programme Director to release the funds, in consultation with the Chair of Policy and Resources Committee.

Voting Record

Carried by general affirmation

115 **Council Performance - Quarter 3 2021-22**

Considered – report of the Strategy and Performance Manager

Recommendation to Council

It is recommended to Council that the progress report is noted.

Voting Record

Carried by general affirmation

116 **Timetable of Meetings 2022-2023**

Considered – report of the Head of Corporate Governance

Recommendation to Council

That the timetable of meetings is approved as a basis for working in 2022-23.

Voting Record

Carried by general affirmation

117 **Exempt Information**

Resolved

To exclude the press and public from the meeting during consideration of the following items:

Item 16 (Housing Debtor Write Offs) as provided by paragraph 1 of Schedule 12A of Section 100A of the Local Government Act 1972, as it contains information relating to an individual.

Item 17 (Directors Pay Clarification) as provided by paragraph 3 of Schedule 12A of Section 100A of the Local Government Act 1972, as it relates to the financial or business affairs of any particular person (including the authority holding that information).

Item 18 (Agree the Eligibility Criteria and Proposed Grant Award Levels Under the Additional Restrictions Grant Scheme for January 2022) as provided by paragraph 3 of Schedule 12A of Section 100A of the Local Government Act 1972, as it relates to the financial or business affairs of any particular person (including the authority holding that information).

The public interest test has been considered and, in all the circumstances of the case, the public interest in maintaining the exemption is considered to outweigh the public interest in disclosing the information.

Voting Record

4 For

6 Against

0 Abstentions

Recorded Vote

For

Councillors J Andrews, Arnold, Burr, Clark, Frank, Keal

Against

Councillors Delaney, Docwra, Duncan, Graham

118 Housing Benefit Debtor Write Offs

Considered – report of the Chief Finance Officer

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|-----------------|
| Decision |
|-----------------|

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|--|
| Members approve to write off the debt as detailed in the report. |
|--|

Voting Record

Carried by general affirmation

119 Directors Pay Clarification

The report of the Principal HR Adviser and the Head of HR was received.

120 Eligibility Criteria and Proposed Grant Award Levels Under the Additional Restrictions Grant Scheme for January 2022

The Committee level decision made under urgency powers was received and the Constitutional requirement was met.

121 Any other business that the Chair decides is urgent.

Considered – report of the Safer, Stronger Communities Manager

Recommendation to Council

That Council approves the amendment to the Community Grant Scheme criteria to ensure the allocated funding is used within 2022/23 financial year.

Voting Record

Carried by general affirmation

There being no further business, the meeting closed at 8:25pm.

Overview & Scrutiny Forward Plan

| Date of Meeting | Committee | A/B | Service Area | Report Title | Draft Deadline | Final Deadline | Draft Press Release | Implement Date | Full Council | Reporting Officer | Annual Y/N |
|-----------------|---------------------------------|-----|----------------------|--|----------------|----------------|---------------------|----------------|--------------|-------------------|------------|
| April | | | | | | | | | | | |
| 21-Apr-22 | Overview and Scrutiny Committee | OS | Corporate Governance | Standards Complaints Overview and Annual Report | 30-Mar-22 | 12-Apr-22 | | | | EH | Y |
| 21-Apr-22 | Overview and Scrutiny Committee | OS | People and Resources | Progress on the Equalities Action Plan | 30-Mar-22 | 12-Apr-22 | | | | MW | N |
| 21-Apr-22 | Overview and Scrutiny Committee | Au | Financial Services | Draft Annual Governance Statement | 30-Mar-22 | 12-Apr-22 | | | | AH | Y |
| 21-Apr-22 | Overview and Scrutiny Committee | Au | Financial Services | 2020-21 Auditor's Annual Report on VFM arrangements | 30-Mar-22 | 12-Apr-22 | | | | AH | Y |
| 21-Apr-22 | Overview and Scrutiny Committee | Au | Financial Services | Third Internal Audit and Counter Fraud Progress report | 30-Mar-22 | 12-Apr-22 | | | | AH | Y |
| 21-Apr-22 | Overview and Scrutiny Committee | Au | Financial Services | Internal Audit and Counter Fraud Governance Plans 2022/23 | 30-Mar-22 | 12-Apr-22 | | | | AH | Y |
| 21-Apr-22 | Overview and Scrutiny Committee | OS | People and Resources | Safer Ryedale and Ryedale Community Safety Partnership Action Plan | 30-Mar-22 | 12-Apr-22 | | | | BS | Y |

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