

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Health and Corporate Scrutiny Panel
Date of Meeting:	12 th February 2026
Subject:	Integrated Performance Report - Second Quarter 2025/26
Portfolio:	Resources and Central Services
Responsible Officer:	Assistant Director (Democracy and Governance)/ Risk Management and Performance Officer
Corporate Plan – Theme:	Your Council
Corporate Plan – Aim:	Strive for transparency and accountability in all that we do. Increase public scrutiny.
Ward Relevance:	All
Public or Private:	Public
Forward Plan:	Not a key decision

1. Purpose of report

This integrated report seeks to provide appropriate performance information and risk data for service areas within the scope of this Panel - providing the Panel with sufficient information to monitor results to address issues arising.

2. What is the panel being asked to consider?

The panel is asked to scrutinise the performance and risk information contained in this report.

3. Recommendation

The panel is asked to scrutinise the performance and risk information contained in this report and make any recommendations to the relevant Cabinet portfolio holder and/or Cabinet.

4. Background

This report is required for consideration by Overview and Scrutiny panels 3 times per year.

5. Report

5.1 Introduction

- 5.1.1 This integrated report seeks to provide appropriate performance information and risk data for service areas within the scope of this Panel
- 5.1.2 The report has been adapted to reduce the volume of data (as previously reported under the former scrutiny panel arrangements) whilst still providing the Panel with sufficient information to monitor results to address issues arising.

Important Note for Panel Members - Additional information

Should panel members require additional information relating to performance **not fully explained by the comments supplied**, the following process is essential for the effectiveness of the meeting (to ensure that all issues can be addressed at the meeting):

- Having reviewed the report, the panel member should either ask for additional information to be provided ahead of the meeting or, if necessary, request that the relevant officer(s) attend the meeting. In either instance, the panel member should contact the Chair at their earliest opportunity
- The Chair will then advise the Committee clerks to make the necessary arrangements

5.2 Financial Data

5.2.1 The Overview and Scrutiny Panel (OSP) should note that the Integrated Performance Report does not have any financial data that would otherwise be included in reports sent to Cabinet. This will help mitigate any possible confusion amongst officers and elected members, with regards to duplicated financial information. It will also reduce officer time spent producing multiple reports with the same/similar financial data. Previously, financial reports have been reported to both Cabinet and OSP's, and in the case of OSP's, only the financial data relevant to that OSP was presented. This resulted in financial data being compiled and manually separated between OSP's by officers.

5.2.2 The remit of the OSP panel includes scrutinising and reviewing decisions made by the executive and can "call in" a report (if stated within the report itself). Members of each OSP panel are reminded they receive links to Cabinet agendas, reports and meeting minutes which should be being reviewed. Members of the OSP may also discuss and agree whether an item should be added to the OSP work programme for scrutiny purposes, allowing a specific report or update to be provided by the Executive, Cabinet Member and/or Officer(s). Details of the "call-in" process is included in the OSP Procedure Rules contained within the Constitution.

5.2.3 Each OSP should review the Forward Plan and where a decision has been made, members of the OSP should consider calling in an item if they have concerns which need discussing at a future OSP meeting. As per the January 2026 forward plan, the following financial reports are due to be considered by Cabinet in 2026:

- General Fund Budget Monitoring Q3 (March Cabinet)
- HRA Budget Monitoring Q3 (March Cabinet)
- Capital Monitoring Q3 (March Cabinet)

5.3 Report Format 2025/26

Summary of the report content for 2025/26:

REPORT ITEM

Appendix A – summary of :

- Performance measures within the remit of the panel
- Freedom of Information / Environmental Information Requests and trends
- Complaints and trends
- Strategic Risk Register risks within the remit of the panel
- Member Enquiry Forms and trends

Appendix B1 - Performance measures charts

Appendix B2 - Performance measures summary

Appendix C – Details of the Strategic Risk Register risks within the remit of the panel

NOTE: For convenience, an Executive Summary will be provided as the main report for the panel with a link to the full report. As outlined at previous meetings, this means that panel members, in the first instance, will be reviewing a succinct overview of the report content.

5.4 Update - Fundamental Corporate Review of Performance Arrangements

The Business Case Business for external support to embed Microsoft Power BI software has been approved. This will allow the automation of our performance collation processes as much as possible to limit the manual manipulation of data which has shown to be extremely time-consuming and compounding the potential for errors.
External support commenced on 6th January 2026.

5.5 Regulation of Investigatory Powers Act (RIPA) 2000 (covert surveillance)

An inspection report by the Office of Surveillance Commissioners highlighted the following recommendation:

“The importance of keeping the elected Councillors aware of any activity [or non-activity] under RIPA was appreciated and it was accepted that minimal observation would be incorporated at regular intervals into officer’s reports”

Consequently, Elected Members should be aware that, as at the end of this quarter, there have been no surveillance operations.

5.6 Recommendation

The panel is asked to scrutinise the performance information contained in this report and make any recommendations to the relevant Cabinet portfolio holder and/or Cabinet. The panel may decide to establish an OSP Review Working Party, proposed, voted and agreed at an OSP itself, to review a specific item/activity. This would be made up of members from the OSP and the OSP would be required to set a clear scope and remit for the review.

6. Appendices

Please note the following appendices:

Appendix A – Summary Charts

Appendix B1 – Performance Charts

Appendix B2 – Performance Summary

Appendix C – Strategic Risk Register Summary

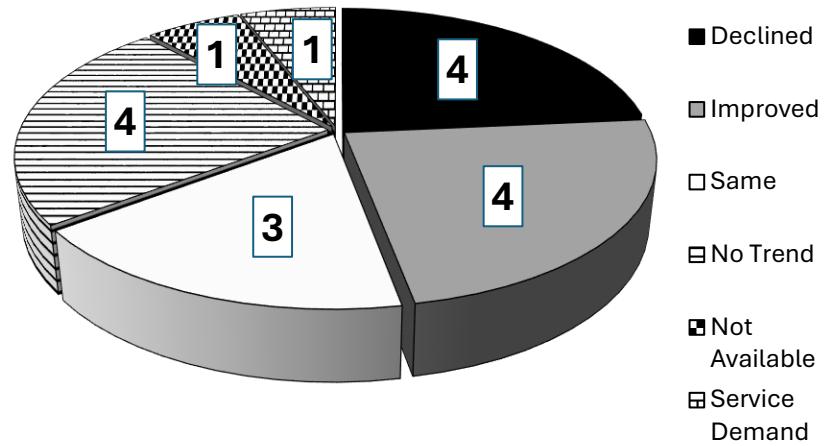
7. Report Writer Details:

Officer Job Title: Risk Management and Performance Officer

Officer Name: Steve Gore

Officer Email Address: steve.gore@nuneatonandbedworth.gov.uk

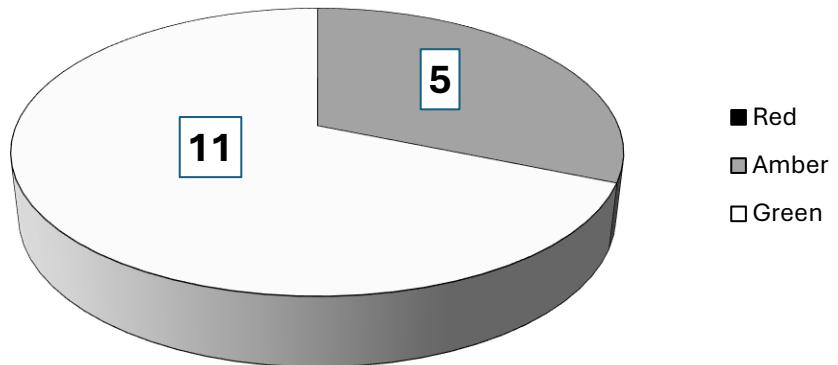
Performance Measures Summary



Freedom of Information (FOI) / Environmental Information Regulations (EIR) Requests and Complaints Summaries – End of Second Quarter

	Number Received 2025/26 (2024/25)	Completed 2025/26 (2024/25)	Late 2025/26 (2024/25)	Outstanding 2025/26 (2024/25)
FOI / EIR Requests - 20-day target	446 (391)	442 (389)	84 (67)	4 (2)
Complaints -10-day target	727 (786)	727 (784)	77 (81)	0 (2)

Strategic Risk Register Summary



Member Enquiry Forms (MEFs) Summary Second Quarter

2024/25	2025/26
394	279

Subject trends identified in the current quarter:

FOI/EIR – None identified

Complaints – None identified

MERs – Housing (129) and Leisure and Culture (58) = 67% of total

This dashboard contains the Health and Corporate OSP Measures. As of the 2025/2026 reporting period, it includes a total of 17 performance measures.

Title	KPI Description	Frequency	KPI Format	Service Area
CFLPI 09	Collection of Council Tax	Monthly	Percentage	Finance
CFLPI 10	Collection of Business Rates	Monthly	Percentage	Finance
CFLPI 11	Average Days to Process New Housing Benefit Claims (Financial YTD)	Monthly	Number	Finance
CFLPI 12	Average Days to Process changes of circumstances Housing Benefit Claims (Financial YTD)	Monthly	Number	Finance
CSR 01	Freedom of Information Requests (FOI) % compliance	Quarterly	Percentage	Customer Services
CSR 02	Subject access requests (SAR) % compliance	Quarterly	Percentage	Customer Services
CSR 03	Member Enquiry forms completed on time %	Quarterly	Percentage	Customer Services
EQ 01	Current training rate total in-house (%)	Annual	Percentage	Equality
EQ 02	Impact assessments	Annual	Number	Equality
HR 02	Recruitment overall turnover %	Quarterly	Percentage	Human Resources
HR 03	Agency use (FTE / timescale)	Quarterly	Percentage	Human Resources
HR 07	Recruitment – % post filled on first attempt	Quarterly	Percentage	Human Resources
PR 01	Spend with local suppliers (N&B %)	Quarterly	Percentage	Procurement
PR 02	Spend with local suppliers (W&WM %)	Quarterly	Percentage	Procurement
PR 03	Spend with local suppliers (UK & International %)	Quarterly	Percentage	Procurement
PR 04	Spend within Nuneaton and Bedworth (% based on value of spend by SME)	Quarterly	Percentage	Procurement
PR 05	Spend within N&B (% based on value of spend with "large" companies)	Quarterly	Percentage	Procurement

Understanding the Report

19/12/2025 10:29:51

Last Refreshed Time

How Performance is Judged

Most metrics have a defined **Favourability Direction**:

- "Higher is better"
- "Lower is better"

However some metrics track volume or demand only, so no directional judgment is applied (no favourability). They are denoted with the following icon 

CFLPI 10

Collection of Business Rates

September 2025 vs Target: -1.67% 

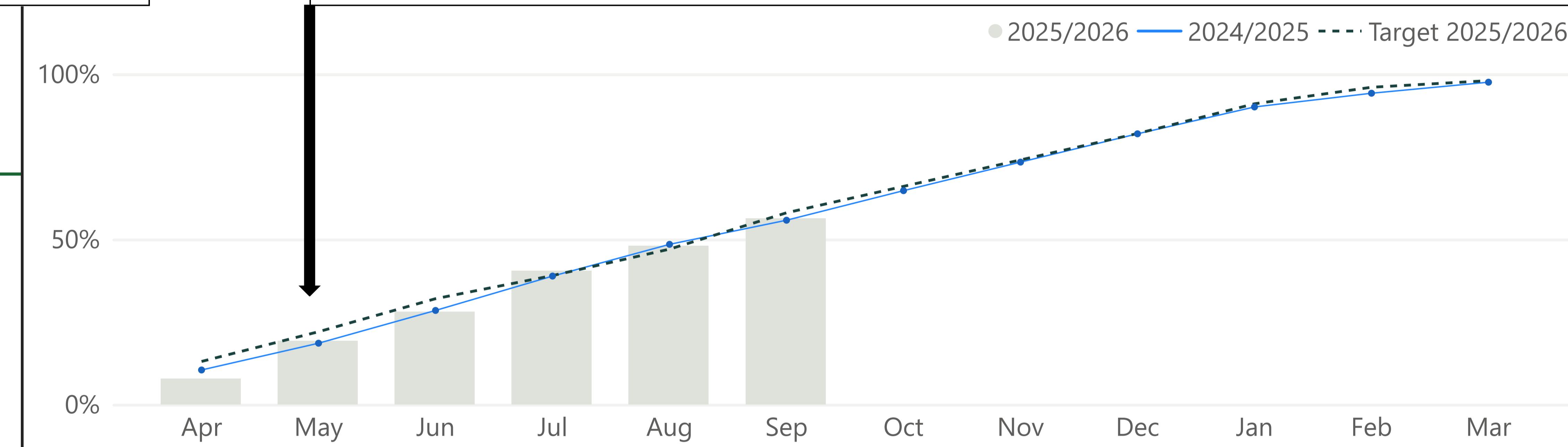
September 2025 vs Last FY: +0.58% 

September 2025 vs August 2025: +8.34%

Favourability: Higher

Frequency: Monthly

Service Area: Finance



Financial Year 2025/2026

Month	Value (%)	Value Last Year (%)	Vs Last Year (%)	Vs Last Year Percentage Change	Performance	Target (%)	Vs Target (%)
Apr	7.80	10.42	-2.62	-25.14% 	13.00	-5.20 	
May	19.27	18.52	0.75	4.05% 	22.00	-2.73 	
Jun	28.09	28.44	-0.35	-1.23% 	32.00	-3.91 	
Jul	40.47	38.84	1.63	4.20% 	39.00	1.47 	

This shows how the current value compares to the same period last year, as a **% change**.

-  Good performance - Change is in the favourable direction (increase or decrease as defined).
-  Within Tolerance - The change is in the wrong direction but within a 2.5% threshold.
-  Poor performance - The change is in the wrong direction and exceeds the 2.5% threshold.
-  No change from last year.

The **"Vs Target"** value shows how each result compares to the target set for that financial year.

Green Up Arrow - Good performance above Target

When higher values are favourable, and the result is higher than the target.

Green Down Arrow - Good performance below Target

When lower values are favourable, and the result is lower than the target.

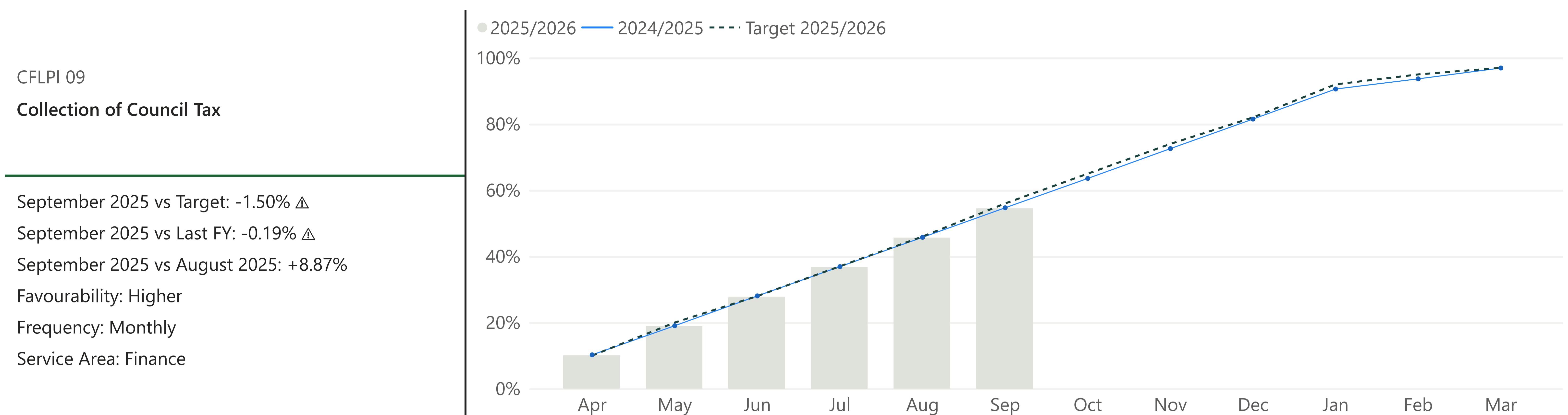
Red Up Arrow - Bad Performance Above Target

When lower values are favourable, but the result is higher than the target.

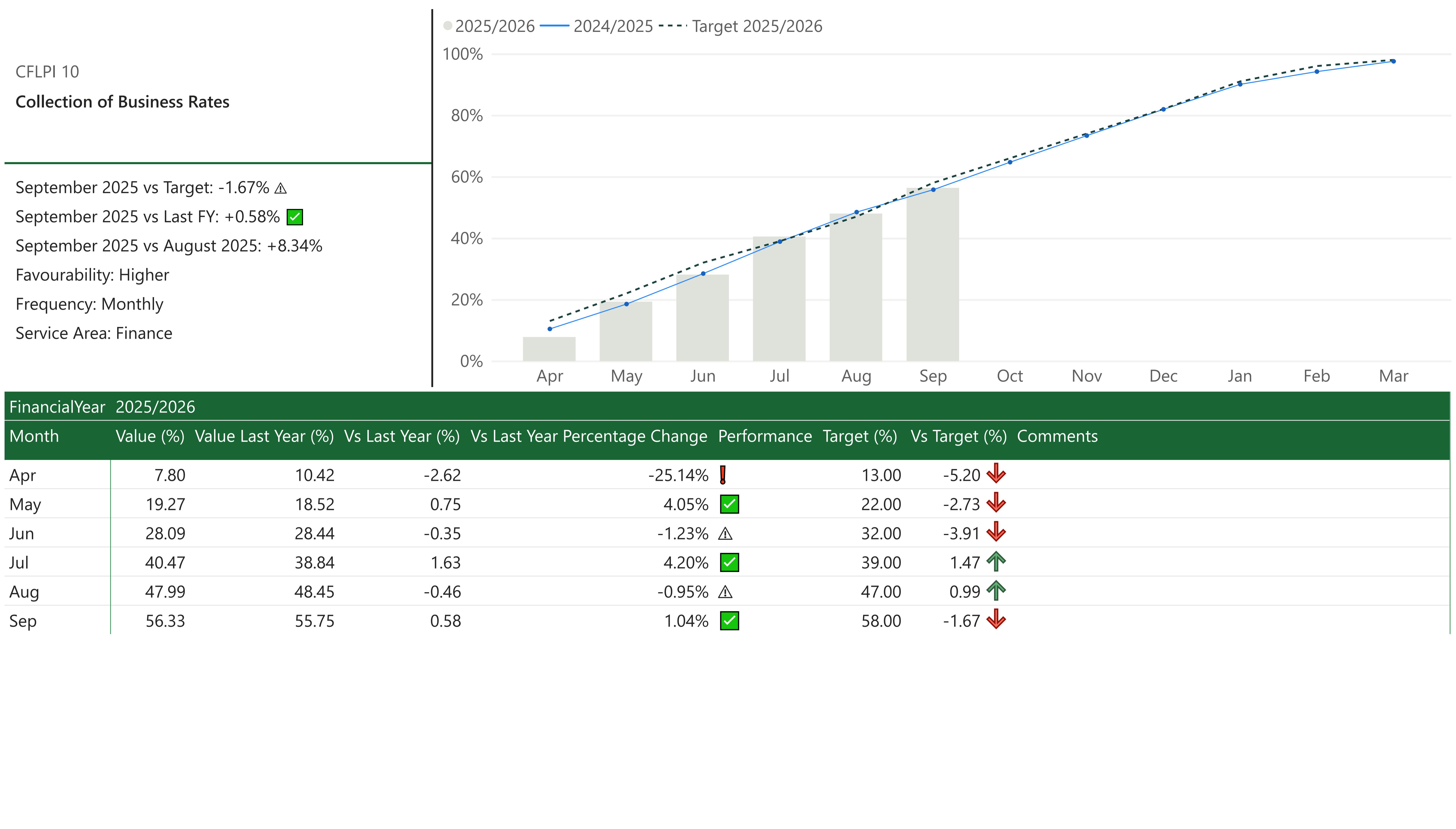
Red Down Arrow - Bad Performance Below Target

When higher values are favourable, but the result is below the target.

Grey Side Arrow - The value matches the target exactly.



Financial Year 2025/2026									
Month	Value (%)	Value Last Year (%)	Vs Last Year (%)	Vs Last Year Percentage Change	Performance	Target (%)	Vs Target (%)	Comments	
Apr	10.06	10.24	-0.18	-1.76% ⚠️	10.00	0.06	↑		
May	18.95	19.03	-0.08	-0.42% ⚠️	20.00	-1.05	⬇️		
Jun	27.80	28.05	-0.25	-0.89% ⚠️	28.00	-0.20	⬇️		
Jul	36.86	36.90	-0.04	-0.11% ⚠️	37.00	-0.14	⬇️		
Aug	45.63	45.75	-0.12	-0.26% ⚠️	46.00	-0.37	⬇️		
Sep	54.50	54.69	-0.19	-0.35% ⚠️	56.00	-1.50	⬇️		



CFLPI 11

Average Days to Process New Housing Benefit Claims (Financial YTD)

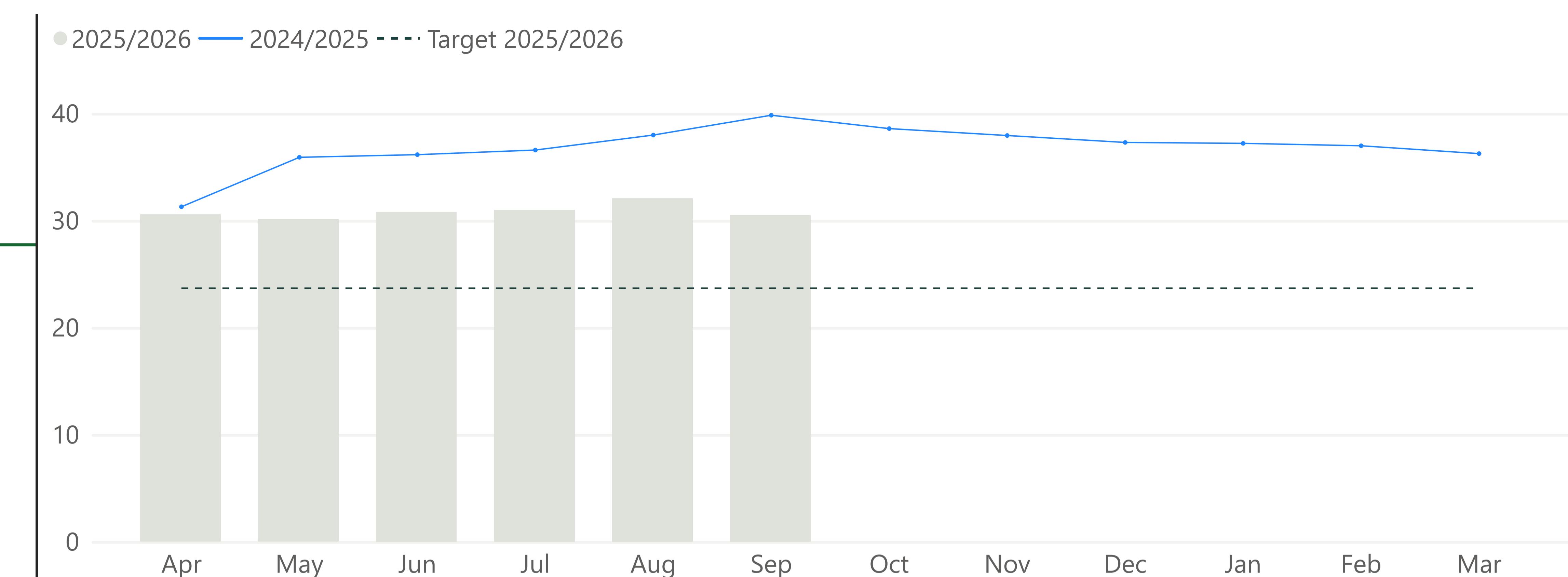
September 2025 vs Target: +8.53 !September 2025 vs Last FY: -6.47 ✓

September 2025 vs August 2025: -1.55

Favourability: Lower

Frequency: Monthly

Service Area: Finance



Financial Year 2025/2026

Month	Value	Value Last Year	Vs Last Year	Vs Last Year Percentage Change	Performance	Target	Vs Target	Comments
Apr	30.57	29.06	1.51	5.20% !	22.00	8.57	↑	
May	30.12	33.35	-3.23	-9.69% ✓	22.00	8.12	↑	
Jun	30.80	33.58	-2.78	-8.28% ✓	22.00	8.80	↑	
Jul	31.00	33.98	-2.98	-8.77% ✓	22.00	9.00	↑	
Aug	32.08	35.28	-3.20	-9.07% ✓	22.00	10.08	↑	36.02 for the month
Sep	30.53	37.00	-6.47	-17.49% ✓	22.00	8.53	↑	

CFLPI 12

Average Days to Process changes of circumstances Housing Benefit Claims (Financial YTD)

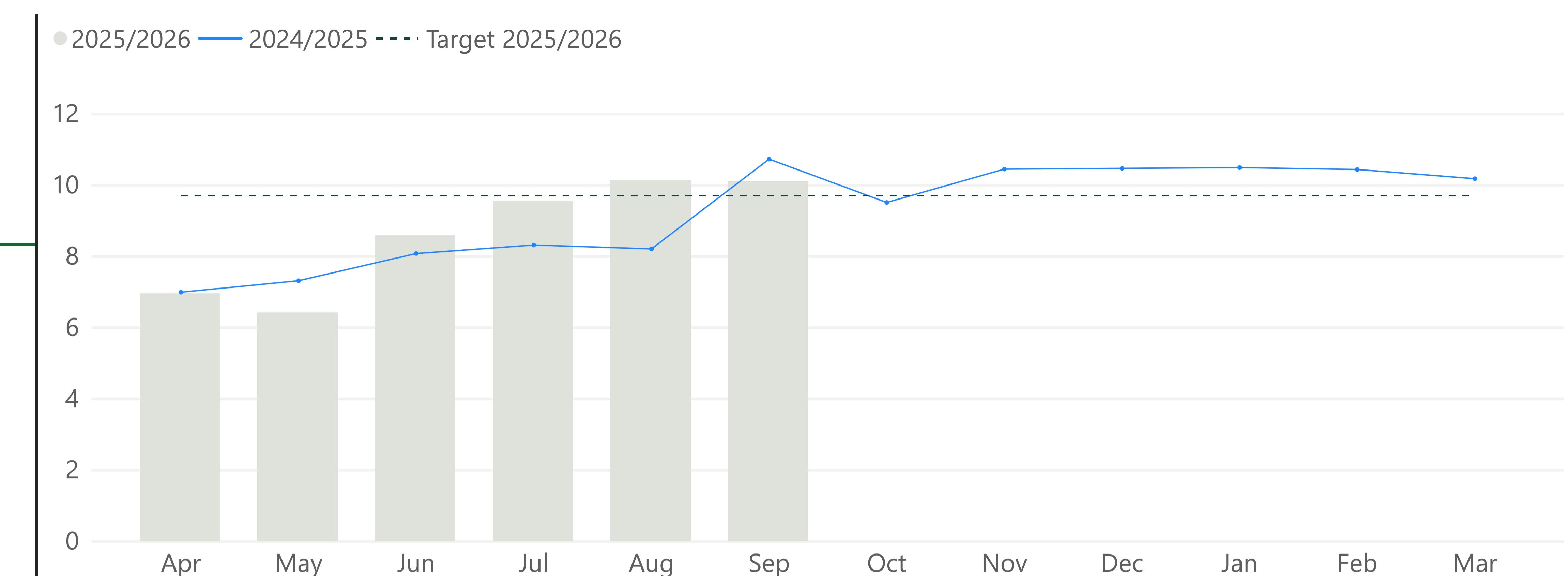
September 2025 vs Target: +1.09 ▲September 2025 vs Last FY: +0.14 ▲

September 2025 vs August 2025: -0.03

Favourability: Lower

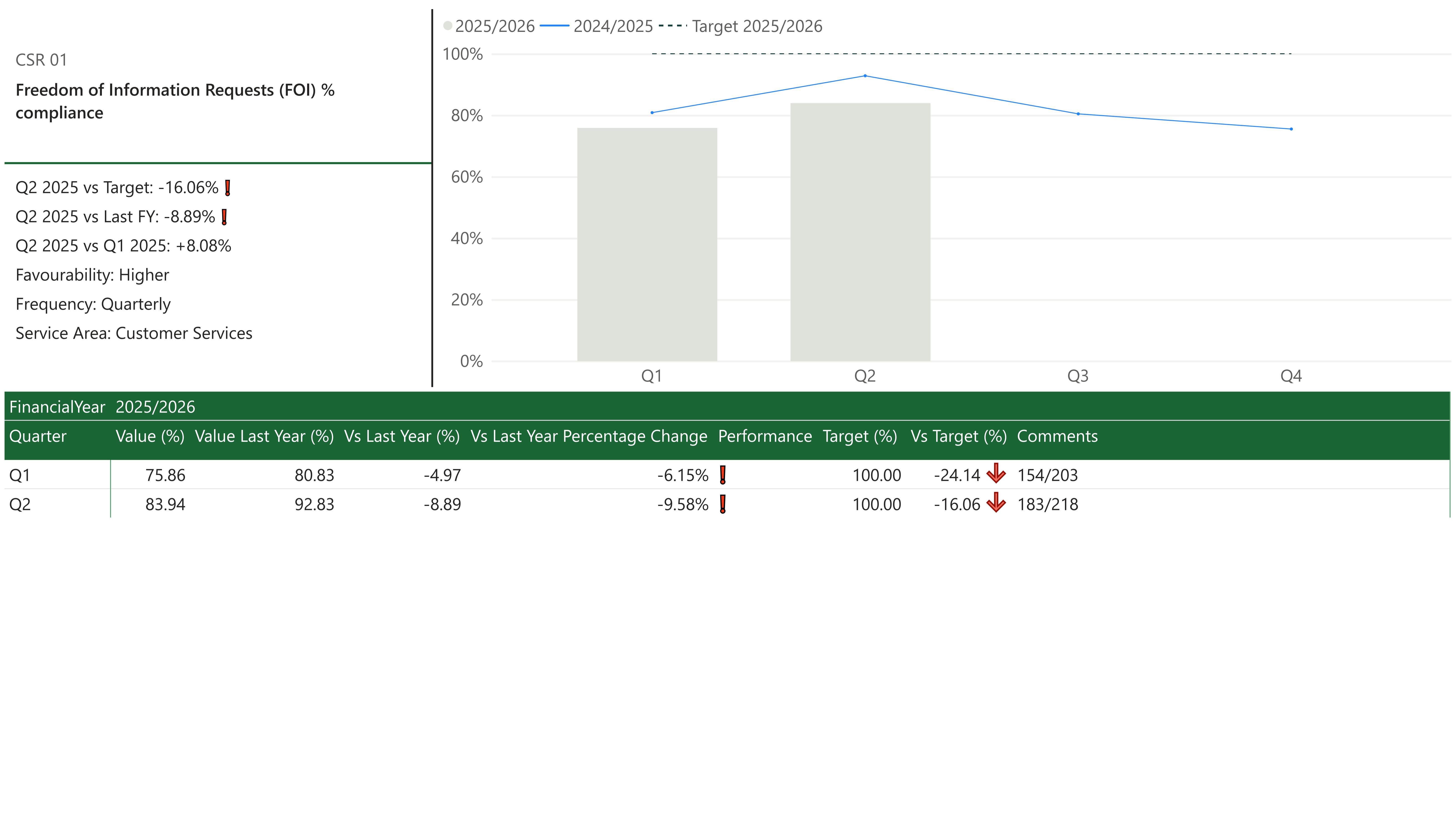
Frequency: Monthly

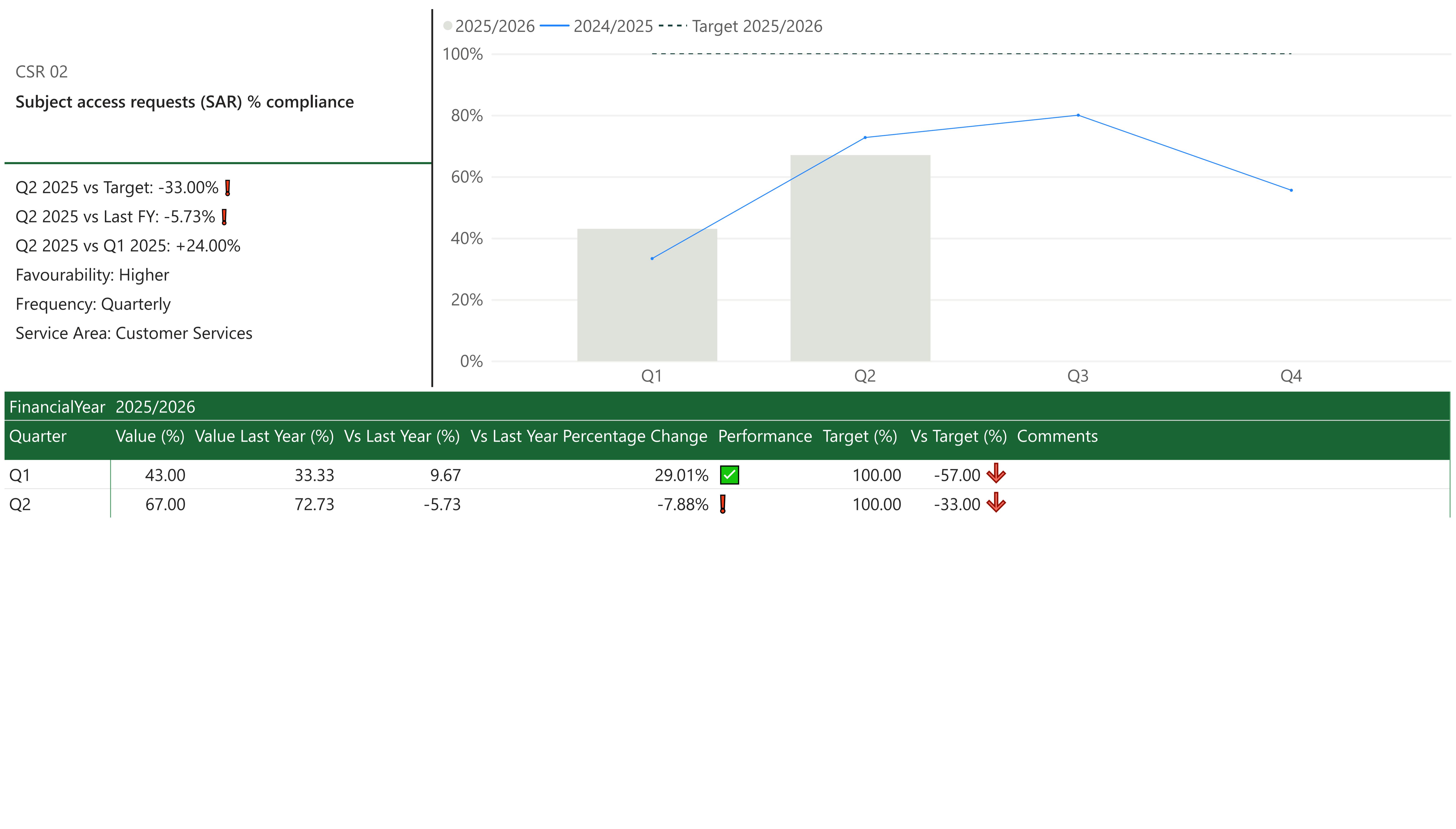
Service Area: Finance

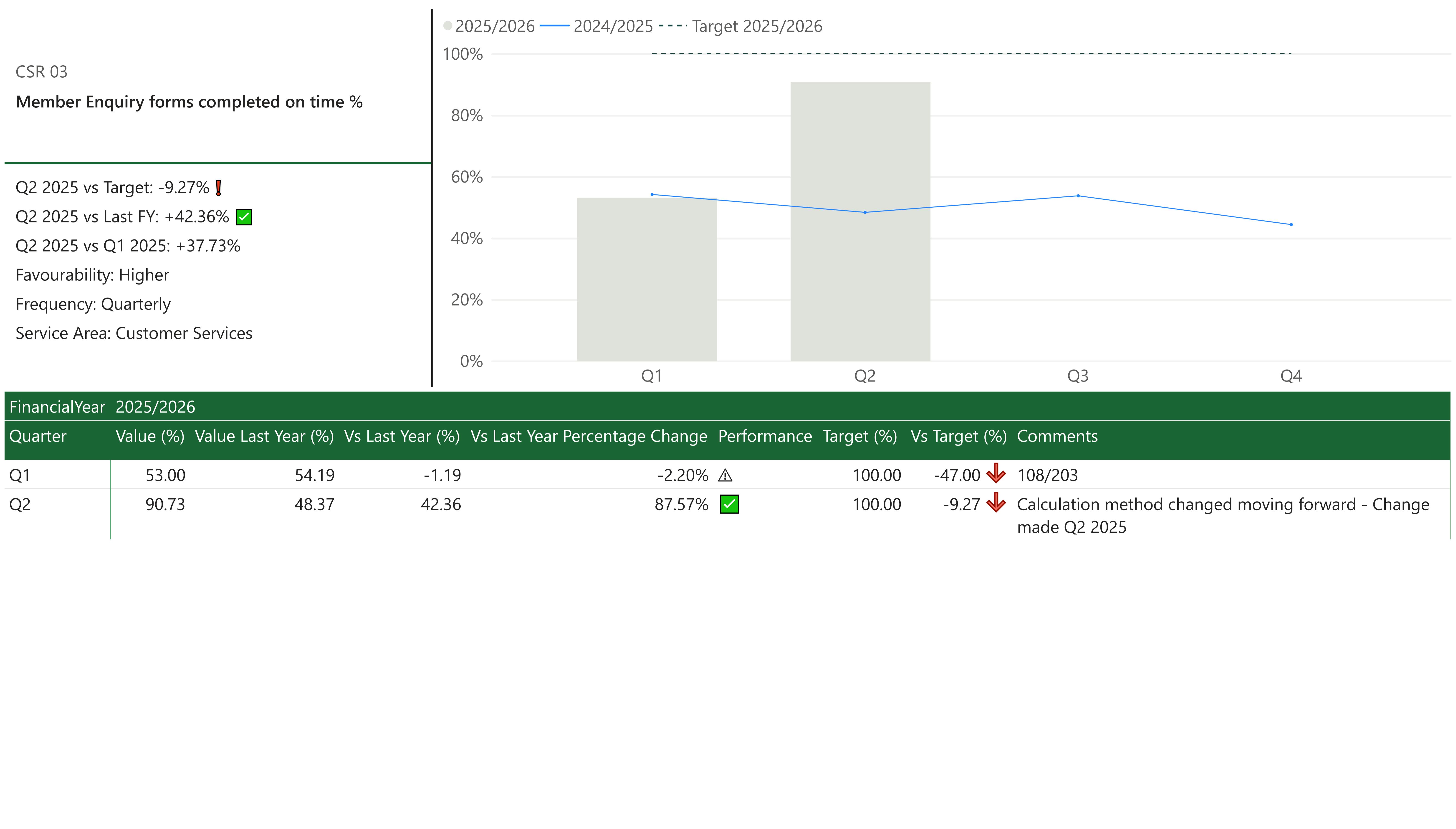


Financial Year 2025/2026

Month	Value	Value Last Year	Vs Last Year	Vs Last Year Percentage Change	Performance	Target	Vs Target	Comments
Apr	6.94	6.48	0.46	7.10% !		9.00	-2.06 ↓	
May	6.41	6.78	-0.37	-5.46% ✓		9.00	-2.59 ↓	
Jun	8.57	7.49	1.08	14.42% !		9.00	-0.43 ↓	
Jul	9.55	7.71	1.84	23.87% !		9.00	0.55 ↑	
Aug	10.12	7.61	2.51	32.98% !		9.00	1.12 ↑	14.04 for the month
Sep	10.09	9.95	0.14	1.41% ▲		9.00	1.09 ↑	







EQ 01

Current training rate total in-house (%)

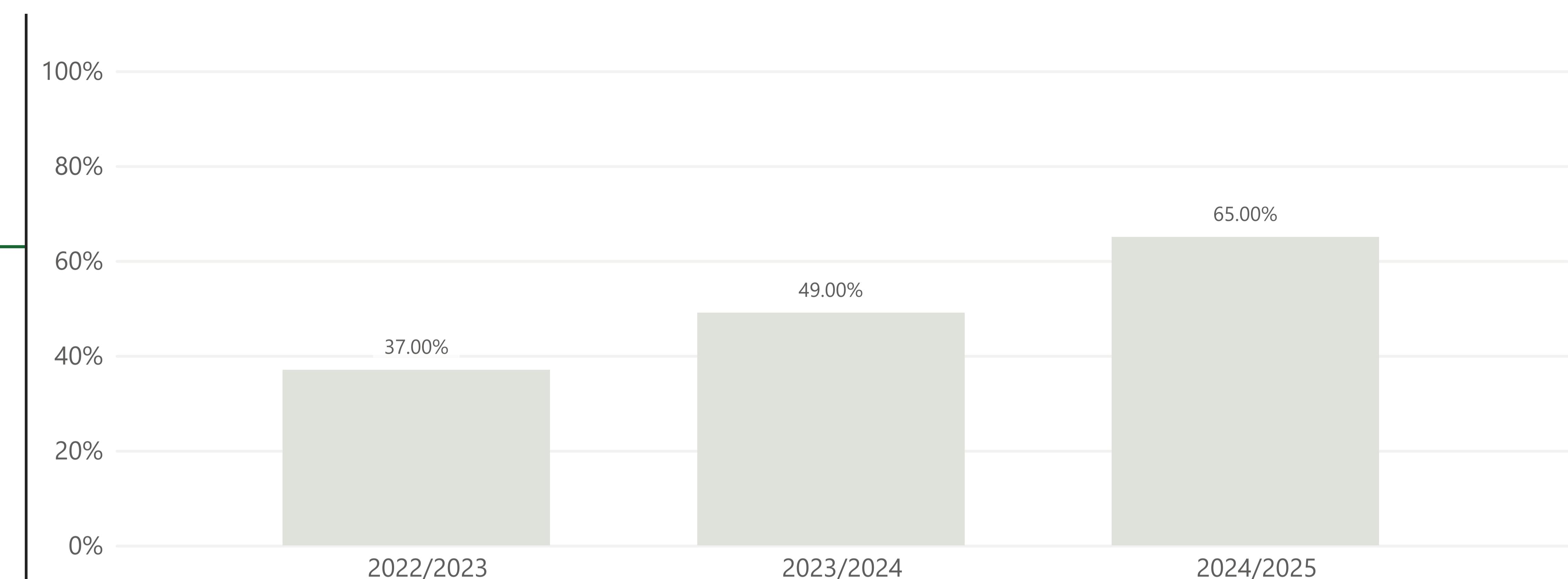
FY24/25 vs Target: -5.00% !

FY24/25 vs Last FY: +16.00% ✓

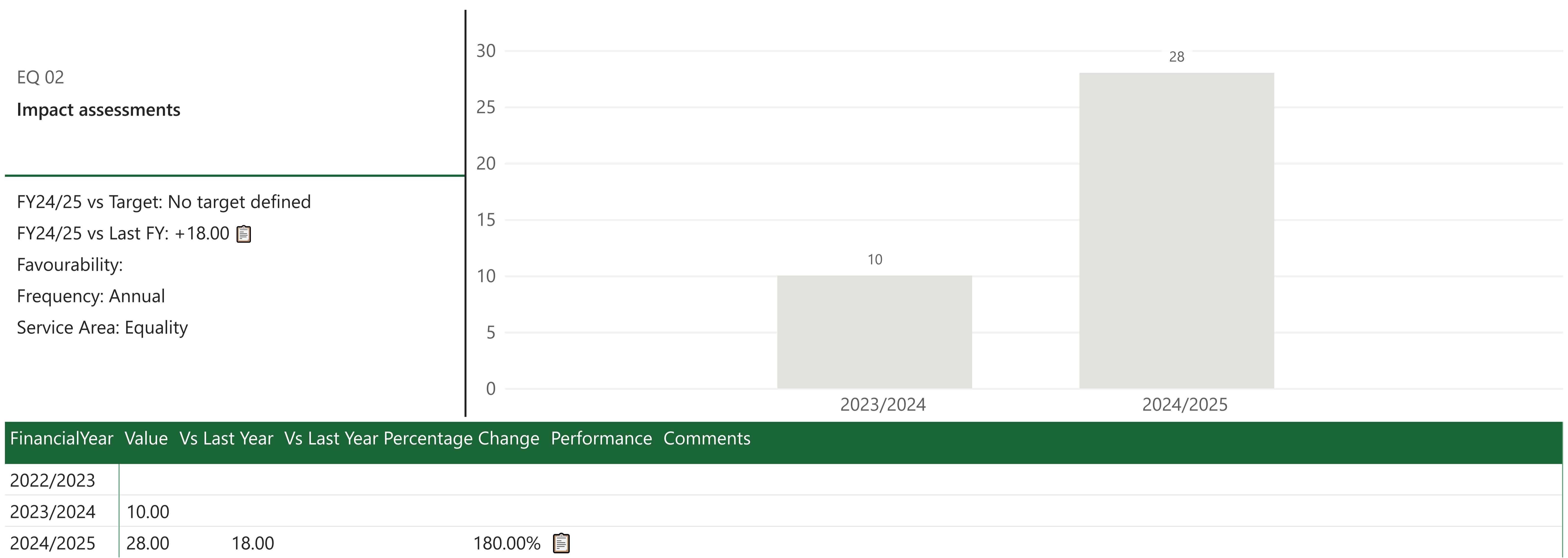
Favourability: Higher

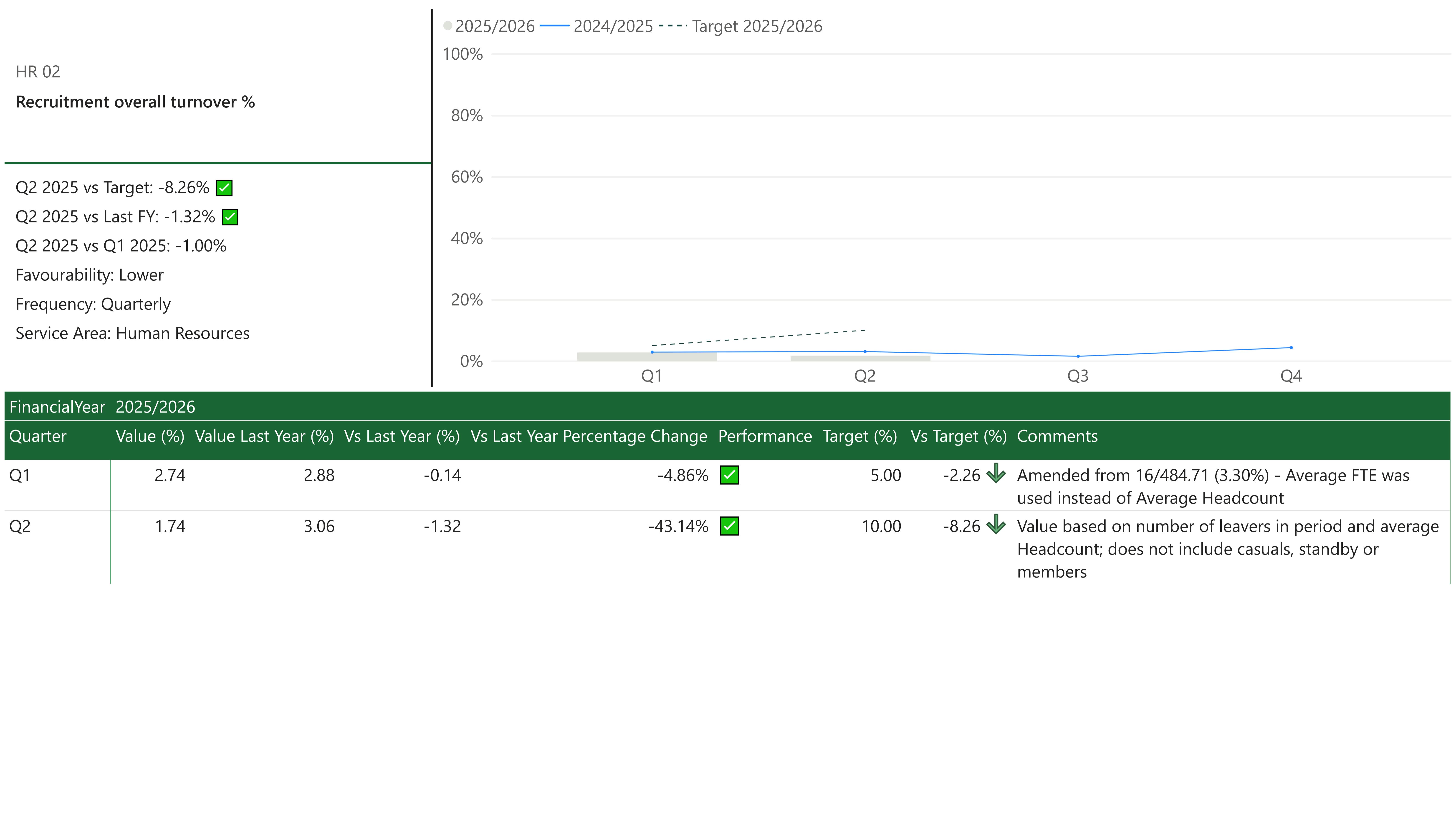
Frequency: Annual

Service Area: Equality



Financial Year	Value (%)	Vs Last Year (%)	Vs Last Year Percentage Change	Performance	Target (%)	Vs Target (%)	Comments
2022/2023	37.00						
2023/2024	49.00	12.00	32.43% ✓				
2024/2025	65.00	16.00	32.65% ✓	70.00	-5.00 ↓		





HR 07

Recruitment – % post filled on first attempt

Q2 2025 vs Target: -5.00% !

Q2 2025 vs Last FY: No historical data for comparison

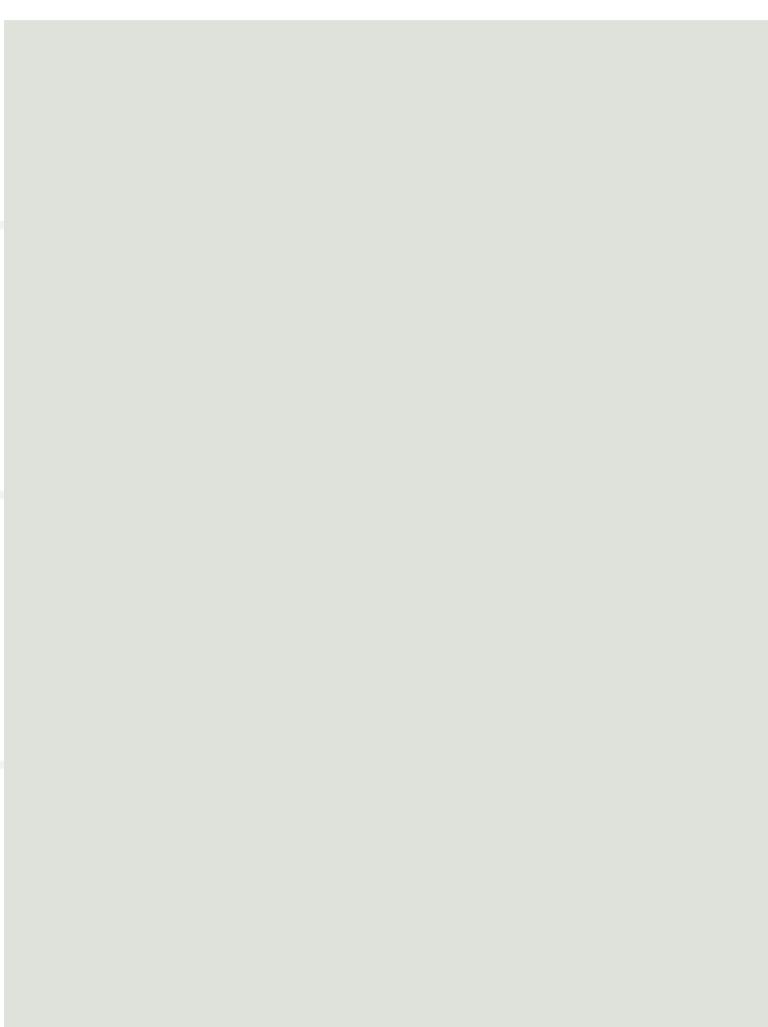
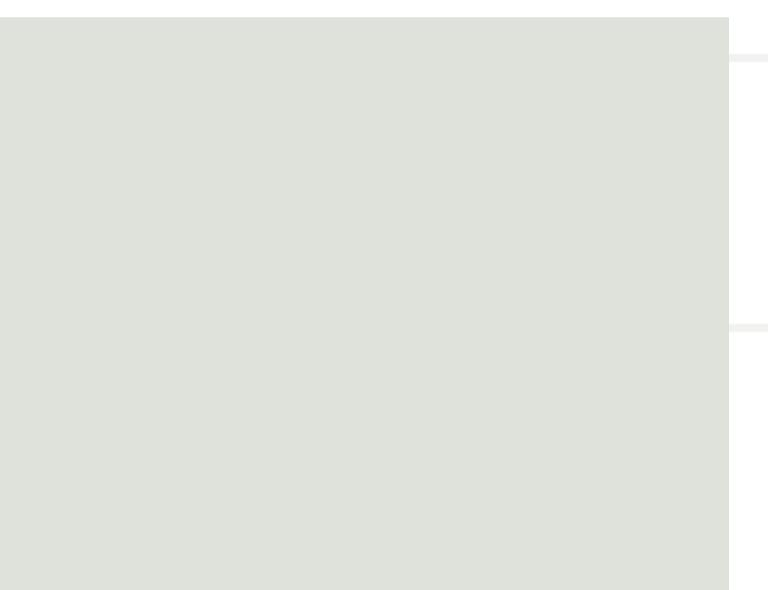
Q2 2025 vs Q1 2025: +32.14%

Favourability: Higher

Frequency: Quarterly

Service Area: Human Resources

● 2025/2026 — 2024/2025 - - - Target 2025/2026

100%
80%
60%
40%
20%
0%

Q1

Q2

Financial Year 2025/2026

Quarter	Value (%)	Value Last Year (%)	Vs Last Year (%)	Vs Last Year Percentage Change	Performance	Target (%)	Vs Target (%)	Comments
Q1	42.86					80.00	-37.14 ↓	Not included adverts with a closing date after 30/06/2025; includes roles advertised pre april 2025 where they have been advertised again in the reporting period
Q2	75.00					80.00	-5.00 ↓	Not included adverts with a closing date after 01/10/2025 or where shortlisting not yet undertaken; roles advertised in this period for a second, third, etc time also not included; Filled means at appointment or offer stage

PR 01

PR 02

PR 03

Spend with local suppliers (N&B %)

Q2 2025 vs Target: No target defined
Q2 2025 vs Last FY: No historical data for comparison
Q2 2025 vs Q1 2025: -2.42%
Favourability:
Frequency: Quarterly
Service Area: Procurement

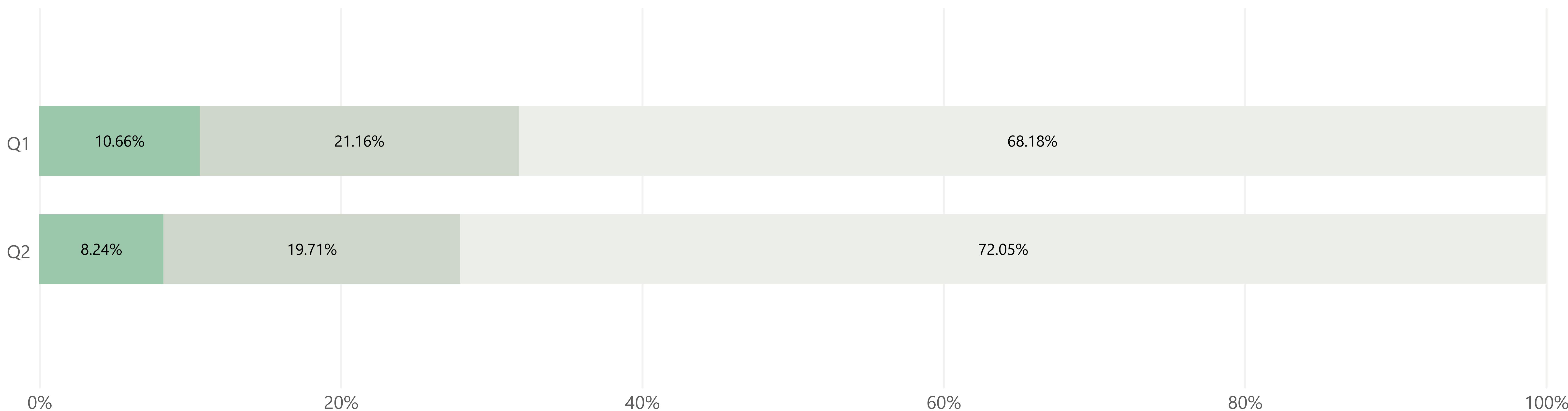
Spend with local suppliers (W&WM %)

Q2 2025 vs Target: No target defined
Q2 2025 vs Last FY: No historical data for comparison
Q2 2025 vs Q1 2025: -1.45%
Favourability:
Frequency: Quarterly
Service Area: Procurement

Spend with local suppliers (UK & International %)

Q2 2025 vs Target: No target defined
Q2 2025 vs Last FY: No historical data for comparison
Q2 2025 vs Q1 2025: +3.87%
Favourability:
Frequency: Quarterly
Service Area: Procurement

KPI ● PR 01 - Spend with local suppliers (N&B %) ● PR 02 - Spend with local suppliers (W&WM %) ● PR 03 - Spend with local suppliers (UK & International %)



PR 04

Spend within Nuneaton and Bedworth (% based on value of spend by SME)

2024/2025 Q1 87.28% 12.72%

Q2 2025 vs Target: No target defined

Q2 2025 vs Last FY: -6.99% 🚫

Q2 2025 vs Q1 2025: -4.28%

Favourability: Higher

Frequency: Quarterly

Service Area: Procurement

PR 05

Spend within N&B (% based on value of spend with "large" companies)

2024/2025 Q4 88.25% 11.75%

Q2 2025 vs Target: No target defined

Q2 2025 vs Last FY: +6.99% 🚫

Q2 2025 vs Q1 2025: +4.28%

Favourability: Lower

Frequency: Quarterly

Service Area: Procurement

Appendix B2

Performance Summary Second Quarter 2025/26 - Health and Corporate OSP

There are **17** measures within the remit of the panel.

Eleven have comparable trend data for the second quarter (four improved, four declined and three stayed the same). **Four** have no comparable trend data. **One relates to service demand** and **one is currently not available**:

Four improved trend:

REF.	Measure	Target 2024/25	2023/24	2024/25
EQ 01	Current training rate total in-house – annual measure	70%	49%	65%
		Target 2025/26	Second Quarter 2024/25	Second Quarter 2025/26
CSR 03	Member Enquiry forms completed on time	100%	48.37%	90.73%
HR 02	Recruitment overall turnover %	10%	3.06%	1.74%
CFLPI 11	Housing Benefit Processing of new claims	22 days	37 days	30.53 days

Three stayed the same:

REF.	Measure	Target 2025/26	Second Quarter 2024/25	Second Quarter 2025/26
CFPLI 09	Collection of Council Tax	56%	54.69%	54.50%
CFPLI 10	Collection of Business Rates	58%	55.75%	56.33%
CFPLI 12	Housing Benefit processing of changes of circumstances claims	9 days	9.95 days	10.09 days

Appendix B2

Performance Summary Second Quarter 2025/26 - Health and Corporate OSP

Four have a **declined** trend:

REF.	Measure	Target 2025/26	Second Quarter 2024/25	Second Quarter 2025/26	Comments
CSR 01	Freedom of Information Requests (FOI) compliance	100%	92.83%	83.94%	Drop in performance has been formally escalated to Assistant Directors and their Strategic Directors and performance is improving (75% in first quarter).
CSR 02	Subject access requests (SAR) compliance	100%	72.73%	67%	Slight decline in performance. However, there is an issue being addressed relating to accurate reporting of cases that are extended (to be reflected in the next quarter results).
PR 04	Spend within Nuneaton and Bedworth (%) based on value of spend by SME)	No	88.41%	81.42%	A Section 106 payment to a large organisation was made which has skewed the percentage outcome. By removing the S106 payment, the percentage would be closer to 87% which would be comparable to the 88.41% in 2024/25.
PR 05	Spend within N&B (%) based on value of spend with “large” companies)	No	11.59%	18.58%	A Section 106 payment to a large organisation was made which has skewed the percentage outcome. By removing the S106 payment, the percentage would be closer to 13% which would be comparable to the 11.59% in 2024/25.

Appendix B2

Performance Summary Second Quarter 2025/26 - Health and Corporate OSP

Four with no comparable trend data:

REF.	Measure	Target 2025/26	Second Quarter 2024/25	Second Quarter 2025/26
HR 07	Recruitment – % post filled on first attempt	80%	No data	75%
PR 01	Spend with local suppliers (Nuneaton & Bedworth)	No	No data	8.24%
PR 02	Spend with local suppliers (Warks. & West Midlands)	No	No data	19.71%
PR 03	Spend with local suppliers (UK & International)	No	No data	72.05%

One service demand measure:

REF.	Measure			
			2023/24	2024/25
EQ 02	Impact assessments		10	28

One currently not available:

REF.	Measure	Comment
HR 03	Agency use	Work is in progress to establish the most meaningful measure.

NBBC Strategic Risk Register Summary

Second Quarter 2025/26

Full Register Summary

The total number of ‘live’ risks is 25.

As at the end of September 2025, the breakdown according to “net” risk is:

- “Net red” 2 (8%)
- “Net amber” 9 (36%)
- “Net green” 14 (56%)

Consequently, 23 of 25 (92%) risks are deemed “satisfactorily managed” – meaning that the ‘traffic light’ reporting position is “Green” (target 80%).

The “net red” risks are:

- **R1 - Potential failure to provide adequate accommodation to meet the needs of the borough with consequent impact on the lives of residents**
- **R4 - Failure to maintain the economic vibrancy of the borough / town centres**

Health and Corporate OSP Risks Summary

There are sixteen strategic risks within the remit of the panel. Five are “net amber” and eleven are “net green”. Details of these risks are shown below.



NBBC Strategic Risk Register

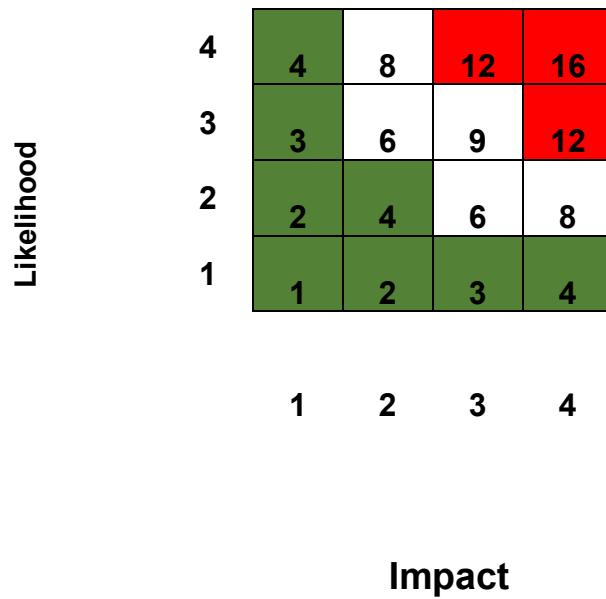
Current Version: 24th October 2025

Health and Corporate OSP Risks

Risk Level Indicator Matrix and Descriptors

Key

	Green 1 - 4 (acceptable)
	Amber 6 - 9 (tolerable)
	Red 12 - 16 (unacceptable)



Likelihood

- 4: **Very High** – occurrence is most likely or has already happened and will do so again if control measures are not introduced
- 3: **High** – occurrence is anticipated within the next 12 months
- 2: **Significant** – occurrence is probable in the next 3 years
- 1: **Low** – foreseeable, but not probable in the next 3 years

	Level of Impact	Service Delivery	Financial / Legal	Reputation / Community
4	Major	<ul style="list-style-type: none"> A service delivery failure causes significant hardship to people for a period of 3 to 4 weeks or more or 1 week for anyone that is vulnerable, or failure to meet a nationally mandated deadline Loss of major stakeholder/partner. Adverse outcome of a serious regulatory enquiry 	<ul style="list-style-type: none"> Financial loss over £400,000 Serious risk of legal challenge 	<ul style="list-style-type: none"> Sustained adverse TV/radio coverage Borough wide loss of public confidence Major damage to local environment, health and economy Multiple loss of life
3	Serious	<ul style="list-style-type: none"> A service delivery failure causes significant hardship for a period of 2 to 3 weeks or 3 to 7 calendar days for vulnerable people Formal regulatory inquiry Loss of a key partner or other partners 	<ul style="list-style-type: none"> Financial loss between £200K and £399K High risk of successful legal challenge 	<ul style="list-style-type: none"> Significant adverse coverage in national press or equivalent low national TV coverage Serious damage to local environment, health and economy Extensive or multiple injuries &/or a fatality
2	Moderate	<ul style="list-style-type: none"> A service delivery failure causes significant hardship for 1 to 2 weeks or 1 - 2 calendar days for vulnerable people Loss of a significant non-key partner Legal concerns raised Loss of employees has moderate effect on service provision 	<ul style="list-style-type: none"> Financial loss between £50K and £199K Informal regulatory enquiry 	<ul style="list-style-type: none"> Significant adverse coverage in local press or regional TV Large number of customer complaints Moderate damage to local environment, health and economy Moderate injuries to an individual
1	Low	<ul style="list-style-type: none"> Disruption to services for up to 1 week Minor legal implications Loss of employees not significantly affecting service provision 	<ul style="list-style-type: none"> Financial loss up to £49K 	<ul style="list-style-type: none"> Minor adverse media coverage Minor environmental, health and economy damage Minor increase in number of customer complaints One or more minor injuries to an individual

NET AMBER RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R8	Failure to deliver / refresh the key elements of the Corporate Plan	Very High / Moderate (AMBER)	1. Member training programme.	1: Chief Executive	High / Moderate (AMBER)	1. Records of all formal Employee & Member meetings and training.	Management Team / PH - Leader and R&CS / H&CR OSP
			2. Annual Development Reviews.	2: Strategic Directors		2. Records of all formal Employee & Member meetings and training.	
			3. Management Development training.	3. Strategic Director (CR)		3. Records of all formal Employee & Member meetings and training.	
			4. Performance management framework.	4: Assistant Director (Democracy and Governance)		4 & 5. Strategic Performance Report (monthly to Management Team / quarterly to Overview and Scrutiny Panels).	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Corporate Plan Delivery Plan.	5: Management Team		5. Delivery plan in place.	
			6. Monitor and utilise external funding opportunities.	6: Management Team		6. Capital Programme and Revenue Budgets.	
			7. Partnership working arrangements.	7: Management Team		7. Partnership board meeting minutes.	
			8. On-going annual review of delivery plan.	8: Assistant Director (Democracy and Governance)		8. Current plan in place.	
			9. Medium Term Financial Plan (reviewed annually).	9: Strategic Director (CR)		9. Current plan in place / Cabinet reports.	
			10. HRA Business Plan (reviewed annually).	10: Strategic Directors (CR) / (H&CS)		10. Current plan in place / Cabinet reports	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			11. Revised Corporate Plan 2025/29 in place following new political leadership.	11: Assistant Directors (Democracy and Governance)		11. Approved plan in place.	
			<u>Planned:</u>				
			1. Annual (31 st March) review of Delivery Plan against external factors.	1: Management Team/ Cabinet.			

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R16	“Cyber” crime or attack	High/ Major (RED)	1. Anti-virus, managed firewall, security patches and robust back-up procedure updated weekly.	1: ICT and Comms. Manager	Significant / Major (AMBER)	1. PSN certification in place	Strategic Director (CR) / PH – R&CS / H&CR OSP
			2. Awareness training sessions held throughout the year.	2: ICT and Comms. Manager		2. Training programme and attendance records.	
			3. Monthly e-communication from Cyber Crime Officer (WCC).	3: Strategic Director (CR)		3. Monthly e-communication.	
			4. Public Services Network (PSN) annual compliance certification.	4: ICT and Comms. Manager		4. PSN certification in place	
			5. Post “Azure” migration, LGA cyber security peer review undertaken (December 2023).	5: ICT and Comms. Manager		5. Peer review report.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			6. Phising e-mail testing of staff to identify and action training requirements (On-going).	6: ICT and Comms. Manager		6. Tests undertaken and training identified.	
			<u>Planned:</u>				
			1. "Cyber Essentials" certification application to be resubmitted pending Cyber security and risk review (2025/26, subject to upgrade of Electoral Registration software).	1: ICT and Comms. Manager		1. Certificate in place.	
			2. Test internal e-mail security (on-going).	2: ICT and Comms. Manager		2. Report to Management Team.	
			3. Access to Electoral Registration database to be addressed (linked to Central Government elections "cyber" security threat briefing).	3: Democratic and Electoral Services Manager		3. Review completed with access arrangements in place and monitored at least annually.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			4. Review of maintenance, access, storage and disposal of shared files containing electoral data.	4: Democratic and Electoral Services Manager		4: Review completed / records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R20	Pandemic – service, social and economic implications	Very High/ Major (RED)	1. Corporate Business Continuity Plan.	1: Chief Executive	Significant / Major (AMBER)	1. Plan in place.	Management Team / PH - Cabinet / H&CR OSP
			2. Business Continuity Plans (BCPs).	2: Assistant Directors		2: Plans in place.	
			3. Emergency Plan including regular training.	3: Strategic Director (CR)		3. Plan in place / training records.	
			4. Risk assessment in place to address and co-ordinate the safe delivery of (revised) services / working arrangements.	4: Head of Health and Safety and Environmental Health		4. Risk assessment in place.	
			5. Pandemic response and recovery: <ul style="list-style-type: none"> • Incident Management Team • Implement responsibilities linked to Civil Contingencies Act 	5: Chief Executive		5. Terms of reference / meeting minutes:	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			6. Implement directives from Central Government, as required.	6: Chief Executive		6. Regular completion of pro forma returns to Government.	
			7. Effective and timely communication systems (employees, Elected Members, public and media).	7: Chief Executive		7. E-mail and public / media communications / bulletins.	
			8. Encourage employees to take up vaccination offers.	8: Chief Executive		8. Employee newsletters and bulletins.	
			<u>Planned:</u>				
			1. Update Emergency / Business Continuity Plans (March 2026).	1: Management Team		1. Plans in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R25	<p>Noncompliance with regulations relating to:</p> <ul style="list-style-type: none"> • Freedom of Information • Environmental Information • General Data Protection <p>resulting in penalties applied by the Information Commissioner's Office</p>	Very high / major (RED)	<u>Freedom of Information / Environmental Information</u>		Significant / major (AMBER)		Management Team / PH – Cabinet / H&CR, H&COM, E&L & BRP OSPs
			1. Monthly FOI reports to designated service areas.	1: Corporate Support and Data Compliance Manager		1. Reports.	
			2. Dash Customer Service Workflow application used to manage outstanding cases.	2: Strategic Director (CR)		2. Dash application.	
			3. Email alerts on receipt of new requests.	3: Strategic Director (CR)		3. Emails.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			4. Nominated officers in some service areas to monitor outstanding requests.	4: Chief Executive / Strategic Directors		4. Nominated Officers.	
			5. Workflow process regularly reviewed and updated if necessary	5: Information Management Group (IMG)		5. Request reports.	
			6. Regular targeted training on meeting FOI request deadlines.	6: Information Management Group (IMG)		6. Training records.	
			7. Nominated employees to monitor and manage FOI / EIR requests.	7: Strategic Director (CR)		7. Officer in place.	
			8. Qualified DPO co-ordinating information in line with the Freedom of Information Act 2000	8: Strategic Director (CR)		8. Officer in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				
			1. Refresher training for Senior Managers (September 2025).	1: Corporate Support and Data Compliance Manager		1. Senior Management Team minutes / training records.	
			<u>General Data Protection Regulations (GDPR)</u>				
			1. Corporate Information Governance Group (CIGG) / Information Management Group.	1: Assistant Director (Democracy and Governance)		1. Meeting minutes.	
			2. Use of an accredited contractor to dispose of electrical equipment (including IT equipment). The contractor guarantees data destruction & provides certification accordingly.	2: Strategic Director (CR)		2. Contractor agreement and meetings minutes	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			3. Compliance with Public Services Network Code of Connection (PSN Co-Co).	3: Strategic Director (CR)		3. Annual PSN Compliance Certification / "Cyber Essentials Scheme" certification.	
			4. Senior Information Risk Owner (SIRO) and Deputy appointed.	4: Strategic Director (CR)		4. SIRO's Job Description	
			5. Information Governance Framework/ ICT Code of Conduct for Employees/Member Protocol for the Use of IT Resources.	5: Assistant Director (Digital & Business Change)		5. Individual Cabinet Member Decision	
			6. Data Protection Officer (DPO) in line with Data Protection regulations.	6: Corporate Support and Data Compliance Manager		6. DPO in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			7. Data audit and publication of privacy notices.	7: Assistant Director (Democracy and Governance).		7. Audit records (records of processing activity)/notices on council website.	
			8. Internal Audit undertaken (Option via Central Midlands Audit Partnership).	8: Assistant Director (Democracy and Governance)		8. Report in place.	
			9. Data Protection training available on Delta.	9: DPO and Training Officer		9. Delta training records	
			10. Refresh of Corporate Governance Group (CGG) / Information Management Group (October 2023) – including monitoring of data breach reports.	10: Assistant Director (Democracy and Governance) / DPO		10. Meetings minutes	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				
			1. Data Protection policy to be updated (April 2025).	1: DPO		1. Policy approved.	
			2. Data Protection information to be made available to employees via the new Intranet when available (April 2025).	2: DPO		2. Intranet.	
			3. Information Asset Register to be established (timescale to be agreed with Information Management Group).	3: DPO / Information asset owners		3. Register in place.	
			4. Data protection and Freedom of Information Act training for Senior Managers (on-going).	4: DPO		4. Senior Management meeting records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Data Protection training to be reviewed to ensure that it is up to date and appropriate (ongoing).	5: DPO and Training Officer		5. Delta training records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R34	Corporate Fraud: <ul style="list-style-type: none"> • Procurement • Payments and Finance • Elections • Employment application / recruitment • Internal Fraud • Housing benefit fraud, tenancy fraud, Right to Buy fraud, subletting and Council tax fraud • External grants (3rd sector, private sector and activity-based funding/grants) • Insurance claims • Insider and employee fraud 	Very High/ Major (RED)	1. Employment of a Corporate Fraud Officer.	1: Assistant Director (Finance)	High / Serious (AMBER)	1. Officer in place.	Management Team / R&CS / H&CR OSP
			2. National Fraud Initiative.	2: Assistant Directors (Democracy and Governance / Finance / Social Housing and Community Safety)		2. Records and exercise undertaken every 2 years (data upload, checked and updated)	
			3. Approved officers for different levels of approval for credit cards, purchase orders, invoices and payments.	3: Assistant Director (Finance)		3. Records and authorised list. Systems updated.	
			4. Officer declarations of interest process and duty.	4: Assistant Director (Democracy and Governance)		4. Records maintained.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Member declarations of interest process and duty.	5: Assistant Director (Democracy and Governance)		5. Records Maintained.	
			6. Annual accounts – third party related transactions (chief officers).	6: Assistant Director (Finance)		6. Records maintained.	
			7. Procurement conflicts of interest assessment forms and declarations.	7: Assistant Director (Democracy and Governance)		7. Records maintained.	
			8. Procurement Contract Procedure Rules and Strategy.	8: Assistant Director (Democracy and Governance)		8. Strategy and Procedure Rules in place.	
			9. Access to Internal Audit provision (CMAP).	9: Strategic Director (CR)		9. CMAP in place.	
			10. Employee Code of Conduct.	10: People Services Manager.		10. Code in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			11. Elected Member Code of Conduct.	11: Assistant Director (Democracy and Governance)		11. Code in place.	
			12. Corporate Governance Training.	12: Assistant Director (Democracy and Governance)		12. Training records.	
			13. No Purchase Order No Pay Policy, Financial Procedure Rules and segregation of duties.	13: Assistant Director (Finance)		13. Strategy and Procedure Rules in place.	
			14. Evidence-based insurance claims to mitigate fraudulent insurance claims.	14: Assistant Director (Finance)		14. Records maintained, and checks undertaken.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			15. Council policies and procedures (Employee Code of Conduct, Gifts & Hospitality Policy, Anti-Fraud, Corruption and Bribery Strategy, Anti-Money Laundering Policy, Whistleblowing Procedures).	15: Assistant Director (Democracy and Governance) / Assistant Director (Finance) / People Services Manager		15. Policies and Procedure Rules in place.	
			16. Directors are responsible for ensuring that there is a strong internal control environment within their service areas, for example, by making sure that proper authorisation and approval controls are in place, e.g. payroll documentation, or that certain duties are divided amongst the team to prevent the risk of fraud or accidental error.	16: Strategic Directors and Assistant Directors		16. Procedures updated and tested following National Fraud Initiative and Audits.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			17. Recruitment employee related checks (No right to work in the UK, false identity, false qualifications, false references, concealment of key information for example reasons for breaks in employment history).	17: People Services Manager		17. Checks in place and files recorded and maintained.	
			18. Evidence based checks and challenge for over inflation of activity data by providers to obtain increased funding / payments from the Council for all grant applications.	18: Strategic Directors and Assistant Directors		18. Checks in place and files recorded and maintained.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			19. Electoral based fraud: identify fraud, applications for registration, absent voters and voter ID.	19: Democratic and Electoral Services Manager		19. Records maintained per elections risk register.	
			20. Undertake visits to properties across the housing stock to ensure that the tenants assigned are residing there as their main and principal home.	20: Assistant Director (Social Housing and Community Safety)		20. Correspondence / records of checks.	

NET GREEN RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R3	A major NBBC contractor or supplier cannot deliver a service as planned or ceases trading / failure to comply with requirements for procuring goods and services	Significant / Major (AMBER)	1. Managed under the Democracy and Governance Operational Risk Register.	1: Assistant Director (Democracy and Governance)	Low / Major (GREEN)	1. Democracy and Governance Operational Risk Register.	Management Team / PH – R&CS / H&CR OSP
			2. Procurement Team notify service areas of declining economic financial stability of a supplier for appropriate action.	2: Procurement Team / Assistant Directors		2. Correspondence and Credit Agency records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R7	Breakdown of Council services due to an emergency or significant incident.	Low/Major (AMBER)	1. Corporate Business Continuity Plan.	1: Management Team	Low/ Serious (GREEN)	1. Plan in place.	Chief Executive and Strategic Director (CR) / PH - Cabinet / H&CR OSP
			2. Emergency Plan including regular training.	2: Management Team		2: Plan in place.	
			3. Shared service Emergency Planning Officer in place.	3: Strategic Director (CR)		3. Joint Emergency Planning Officer (JEPO) two-year work streams plan.	
			4. Flexibility of working at Town Hall or Gresham Road Depot.	4: Strategic Director (CR)		4. Availability of locations.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. People Services Manager appointed as strategic lead officer for emergency planning.	5: Strategic Director (CR)		5. Officer in post.	
			6. Business Continuity Planning policy.	6: Strategic Director (CR)		6. Policy in place.	
			7. Updated Emergency Plan.	7: Strategic Director (CR) and Joint Emergency Planning Officer (shared service)		7. Plan in place.	
			8. "Cloud"-based service has replaced server rooms in council buildings.	8: Strategic Director (CR) and Joint Emergency Planning Officer (shared service)		8. Service in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			9. On-going Strategic and Assistant Directors attending Warwickshire Local resilience Forum (WLRF) training on Civil Contingencies Act responsibilities.	9: Chief Executive		9. Training records held by WLRF.	
			10. Engagement with WLRF and Coventry, Solihull and Warwickshire partnership (CSW), as appropriate, to explore options to mitigate national power outages.	10: Strategic Director (CR)		10. Meeting minutes	
			<u>Planned:</u>				
			1. Update Business Continuity Plans (March 2026).	1: Strategic Directors			
			3. Training sessions on new Emergency Plan by end of March 2026.	3: Strategic Director (CR)			

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R10	Failure to effectively manage the Council's finances	V. High / Serious (RED)	1. Adequate level of reserves held to manage fluctuations. Section 151 assurance statement on budget proposals	1: Management Team	Low / Moderate (GREEN)	1. Reserves maintained and kept under review / S151 Officer's annual Assurance Statement on reserves.	Chief Executive & Strategic Director (CR) – Section 151 Officer / PH – R&CS / H&CR OSP
			2. Housing Revenue Account Business Plan (regularly updated).	2: Management Team		2. Internal audit / annual Cabinet report.	
			3. Updated Medium-Term Financial Plan.	3: Management Team		3. Cabinet / Full Council minutes.	
			4. Strategic Risk Register maintenance and review.	4: Management Team		4. Document controlled Strategic Risk Register.	
			5. Financial and contract procedure rules and associated regular training.	5: Management Team		5. Internal / External audit reports / training records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			6. Level of reserves reviewed as part of annual budget setting process.	6: Strategic Director (CR)		6. Cabinet report.	
			7. Section 151 Officer in post.	7: Chief Executive		7. Member-led appointment process.	
			8. Multi-year capital budget and funding monitoring (in February).	8: Strategic Director (CR)		8. Cabinet / Council reports.	
			<u>Planned:</u>				
			1. Medium-Term Financial 5-year Strategy (February 2026).	1: Strategic Director (CR)			

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R12	Safeguarding children and adults with care and support needs from abuse, neglect and harm	Significant / Serious (AMBER)	1. Safeguarding Policy and Guidance (and subject to regular review)	1: Assistant Director (Democracy and Governance)	Low / Serious (GREEN)	1. Policy in place and training records.	Strategic Director (CR) / PH – R&CS / H&CR OSP
			2. Corporate safeguarding lead officer and single point of contact for Warwickshire Family Connect.	2: Assistant Director (Democracy and Governance)		2. Job description and person specification.	
			3. NBBC Recruitment & selection procedure.	3: Strategic Director (CR)		3. Recruitment records.	
			4. Disclosure & Barring Service policy and checks (DBS).	4: People Services Manager		4. DBS check records.	
			5. Warwickshire Family Connect and Adult Social Care (ASC).	5: Assistant Director (Democracy and Governance)		5. NBBC and WCC Website	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			6. Safeguarding refresher training (every 3 years).	6: Assistant Director (Democracy and Governance)		6. Training records ("DELTA").	
			7. Warwickshire Safeguarding partnership best practice guidelines.	7: Assistant Director (Democracy and Governance)		7. Warwickshire Safeguarding website	
			8. Warwickshire Housing safeguarding lead officer.	8: Assistant Director (Social Housing and Community Safety)		8. Correspondence / meeting minutes.	
			9. Multi Agency Public Protection Authority (MAPPA).	9: Assistant Director (Social Housing and Community Safety)		9. Minutes of meetings.	
			10. Referrals and requests for information (separate ones for Children and Adults).	10: Assistant Director (Democracy and Governance)		10. Referrals and requests records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				
			1. Update sharing agreement with Warwickshire Family Connect / Warwickshire Safeguarding Children's Board (in 2025/26).	1: Assistant Director (Democracy and Governance) / Equalities and Safeguarding Officer		1. Revised agreement in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R15	Insufficient planning or resourcing of capital investment priorities	Significant / Serious (AMBER)	1. Corporate / Strategic programme management arrangements.	1: Chief Executive	Low / Moderate (GREEN)	1. Minutes of meetings (including Strategic / HRA / ITC / Regeneration / Corporate Asset Management programme boards).	Management Team / PH - Cabinet / H&CR OSP
			2. Housing Revenue account (HRA) Business Plan regularly reviewed.	2: Strategic Directors (H&CS) and (CR)		2. Plan and dedicated Finance Business Partner in place.	
			3. Medium Term Financial Plan including regular review.	3: Strategic Director (CR)		3. Plan in place.	
			4. Internal audit programme.	4: Strategic Director (CR)		4. Audit reports.	
			5. Treasury Management Strategy and Prudential Indicators.	5: Strategic Director (CR)		5. Strategy in place / Council minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			6. Regular reporting on the multi-year Capital programme.	6: Strategic Director (CR)		6. Reports.	
			7. WMCA funding for land remediation.	7: Strategic Director (H&CS)		7. Funding received.	
			8. Local Regeneration funding agreed.	8: Strategic Director (H&CS)		8. Monitoring and evaluation return and programme board minutes	
			9. Bedworth funding agreed.	9: Strategic Director (H&CS)		9. Funding agreement in place. Corporate programme strategic board minutes.	
			10. Monthly WMCA engagement meetings.	10: Strategic Director (H&CS)		10. Meeting minutes / funding applications.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			11. HRA Corporate Programme Strategic Board to oversee major capital work spend / budget management.	11 Strategic Director (H&CS)		11. Meeting minutes.	
			12. Annual General Fund / HRA budget setting (3-year budget process).	12: Strategic Director (CR)		12. Cabinet meeting minutes.	
			13. Budget monitoring.	13: Management Team (Senior Leadership Team)		13. MT reports / minutes.	
			14. Programme management arrangements.	14: Management Team (Senior Leadership Team)		14. MT reports / minutes.	
			15. Investment plan agreed under the Local Regeneration funding programme.	15: Strategic Director (H&CS)		15. Agreement in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				
			1. Revised HRA Asset Management Plan (December 2025).	1: Assistant Director (Social Housing and Community Safety)		1. Plan in place.	
			2. Establish up-to-date Asset Management Plan & Capital Strategy including Acquisition and Disposal programme (in 2025/26).	2: Assistant Directors (Finance) and (Economy) / Strategic Director (CR / Strategic Director (H&CS)		2. Cabinet / Full Council reports / Corporate Governance Group minutes	
			3. Review of HRA governance arrangements (December 2025).	3: Strategic Director (H&CS)		3. Housing and Communities OSP report.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R23	Communications - disruptive adverse comment or media coverage reflecting extremely badly on the Council, impacting on the reputation of the Council and/or the Borough, resulting from failure to take appropriate communications action	Low / Moderate (GREEN)	1. Communications and marketing strategy associated protocols and plans (and on-going review).	1: Strategic Director (CR)	Low / Moderate (GREEN)	1. Press releases, training, communications and marketing action plan; media statements; Media monitoring.	Strategic Director (CR) / PH - Cabinet / H&CR OSP
			2. Media training for Strategic / Assistant Directors.	2: ICT & Communications Manager / Communications and Marketing Team Leader		2. Training records.	
			3. LGA social media training for Elected Members (and on-going internal training, as required).	3: Chief Executive		3. Training delivered.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R26	Non-compliance with Department of Work and Pensions (DWP) data use guidelines.	High / Serious (AMBER)	1. On-going system testing linked to DWP plan.	1: Strategic Director (CR)	Low / Low (GREEN)	1. DWP plan.	Strategic Director (CR) / PH – R&CS / H&CR OSP
			<u>Planned:</u>				
			1. On-going audit of DWP Plan.	1: Assistant Director (Finance)		1. Audit logging records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R27	Arson or accidental fire in NBBC corporate buildings	Significant / Major (AMBER)	1. Fire Management Group (FMG).	1: Strategic Directors (PS) / (H&CS)	Low / Major (GREEN)	1. FMG meeting minutes. HASCOG reports.	Management Team / PH – B&R, R&CS & LC&H, / BRP, E&L & H&CR OSP
			2. Regularly serviced fire detection & alarm systems / fire extinguishers and appropriate Fire Risk Assessments (FRA) regularly reviewed.	2: Strategic Director (H&CS) / Assistant Director (SH&CS)		2. Service records, Fire extinguisher service records & records of FRA outcomes. External report (review of arrangements).	
			3. Quarterly Health & Safety inspections give attention to fire risks.	3: Respective Strategic / Assistant Directors.		3. Quarterly Health & Safety inspection records.	
			4. Annual Capital Fire Safety Work Programme.	4: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety)		4. Cabinet reports and Capital Projects Meeting Minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Existing insurance policy documents.	5: Assistant Director (Finance)		5. Policy documents in place.	
			6. Internal audit of fire risk arrangements (completed February 2022).	6: Audit and Governance Manager (CMAP)		6. Internal Audit report.	
			7. Certified fire doors.	7: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety)		7. Doors / Certification in place.	
			8. Corporate review of Health and Safety arrangements (September 2025).	8: Strategic Director (P&S)		8. MT Report / minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			9. Town Hall fire prevention arrangements (including upgrade of door entry system).	9: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety) / Health and Safety Manager		9. Monitored action plan in place / Updates to Fire Services	
			10. Implement periodic Audit report (CMAP) recommendations.	10: Health and Safety Manager		10. Audit action plan.	
			11. Act on appropriate recommendations arising from public enquiries / legislation changes (on-going).	11: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety) / Health and Safety Manager		11. Reports / action plans.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<u>Planned:</u>				
			1. Review and refresh Business Continuity Plans (March 2026).	1: Strategic / Assistant Directors			
			2. Leasehold commercial properties – review and establish landlord checks for structure / electrical / gas / fire safety and security of empty purchased properties pending redevelopment (2025/26).	2: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety)			
			3. Review of corporate assets and associated operations (2025/26).	3: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety)		3. Review findings / updated register / CET report.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R29	Human Resources (HR) – failure to effectively manage workforce planning / comply with legislation and policies	Low / Serious (GREEN)	1.Advisory Conciliation and Arbitration Service (ACAS) code of practice and legislation.	1: People Services Manager	Low / Serious (GREEN)	1.Approved policies in place.	Chief Executive (Head of Paid Services) / PH R&CS / H&CR OSP
			2.Up-to-date HR policies and procedures subject to regular review and developed in consultation with trade unions.	2: People Services Manager		2.Regular alerts from designated bodies / Policies in place.	
			3.Appropriate training on HR policies and procedures.	3: People Services Manager		3.Training records.	
			4.Change Management Policy	4: People Services Manager / Service managers.		4.Management Team minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Periodic review of employee remuneration levels.	5: People Services Manager		5. Report to Remuneration Panel and Employee Committee.	
			6. Strategic Workforce Planning training undertaken.	6: People Services Manager / Assistant Directors.		6. Training records	
			<u>Planned:</u>				
			1. Introduction of Human Resources and People Strategy (March 2026).	1: People Services Manager		1. Strategy in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R30	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after completion of our complaints process	High / Low (GREEN)	1. Formal complaints policy and process.	1: Corporate Support and Data Compliance Manager	High / Low (GREEN)	1. Policy and procedure in place.	Strategic Director (CR) / PH Cabinet / H&CR, H&COM, E&L & BRP OSPs
			2. Designated support and compliance team in place.	2: Corporate Support and Data Compliance Manager		2. Designated manager / team in place.	
			3. Review / Final check of service area escalated responses.	3: Corporate Support and Data Compliance Manager		3. Review records retained.	
			4. Ombudsman monitoring by CET / SLT (Strategic Performance Report).	4: CET / SLT		4. Strategic Performance Report.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Annual Ombudsman report to Scrutiny panel.	5: Corporate Support and Data Compliance Manager		5.FPS meeting minutes.	
			<u>Planned:</u>				
			1. Update complaints policy following regulatory changes (December 2025).	1: Chief Executive / Strategic Director (CR)		1. Updated policy in place.	
			2. Quarterly data compliance update report to SLT.	2: Corporate Support and Data Compliance Manager		2. SLT meeting minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R 31	Modern Slavery and Human Trafficking – failure to effectively monitor and comply with legislation	Low /Major (GREEN)	1. Annual modern slavery statement (including policies and training).	1: Assistant Director (G&D) / People Services Manager	Low /Major (GREEN)	1. Cabinet minutes / Modern Slavery Statement Register.	Management Team / PH – R&CS / H&CR OSP
			2. Qualified officers in post (Human Resources & Procurement).	2: Assistant Director (Governance & Democracy) / People Services Manager		2. Officers in post.	
			3. Raising awareness with Elected Members.	3: Strategic Director (CR) / Assistant Director (Governance & Democracy)		3. Cabinet minutes / Corporate Governance Training.	
			4. Procurement procedures including Modern Slavery questions as part of the tender process – including contract terms and conditions.	4: Assistant Director (Governance & Democracy)		4. Contract procedure rules and monitoring and review of tender templates	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Specific Modern Slavery e-learning training module for senior officers.	5: People Services Manager		5. Training records.	