

Warwick District Council - Consumer Standards Improvement Plan Risk Register

Context: This Risk Register is concerned with the delivery of the Consumer Standards Improvement plan produced in response to the Housing Regulators requirement that all Housing Providers comply with the published Consumer Standards.

REF	DATE RAISED OR RR Date Raised	RISK OWNER	RISK TITLE	RISK DESCRIPTION	CONFIDENTIAL	RISK EXPOSURE	RAW RISK RATING			RISK CONTROL MEASURES	EFFECTIVENESS OF CONTROL MEASURES	RISK CONTROL ACTIONNEED(S)	CURRENT RISK RATING			PROGRESS/COMMENTS	NEGATIVE OR OPPORTUNITY RISK	RISK SOURCE	REVIEW	RISK RESPONSE	RISK STATUS	NOTES
							LIKELIHOOD	IMPACT	OVERALL RISK RATING				LIKELIHOOD	IMPACT	OVERALL RISK RATING							
1	29/08/2024	Board	Action plan not comprehensive enough.	Action plan is not comprehensive enough to ensure full compliance with all the standards.	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service	3	4	12	Support by HQN to identify areas for improvement. Senior managers have reviewed the plan and provided amendments and updates. Governance structure will provide challenge and sign off. Ongoing monitoring of any changes or amendments to the Consumer Standards	Partially Effective	Paul Smith	2	3	6	HQN to provide further assurance for both the plan and the Risk register. Officers to review on a quarterly basis	Negative	Legislative	Monthly	Avoid	Open	06.01.2025: no change to risk.
2	29/08/2024	Board	Action plan not delivered	Failure to deliver the overall Consumer Standards Improvement plan	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service Risk that RSH determines WDC to be non-compliant with consumer standards	3	5	15	A new governance structure is in place to oversee delivery. An Improvement strategy, project Initiation Document and Risk Register have been developed	Partially Effective	Lisa Barker	2	3	6	Plan contains target dates Additional resources are being evaluated to ensure the improvement actions will be delivered	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. Though some targets dates have changed, no change to overall delivery date of project.
3	29/08/2024	Board	Self referral elements not actioned.	Failure to implement actions to satisfy the RSH following self-referral	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service Risk that RSH determines WDC to be non-compliant with consumer standards	3	5	15	A new governance structure is in place to oversee delivery. An Improvement strategy, project Initiation Document and Risk Register have been developed	Partially Effective	Lisa Barker	2	3	6	Plan contains target dates Additional resources are being evaluated to ensure the improvement actions will be delivered	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. Though some targets dates have changed, no change to overall delivery date of project.
4	29/08/2024	Board	Safety elements not actioned	Failure to demonstrate effective compliance against the safety elements of the consumer standards	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service Risk that RSH determines WDC to be non-compliant with consumer standards	3	5	15	A new governance structure is in place to oversee delivery. An Improvement strategy, project Initiation Document and Risk Register have been developed	Partially Effective	Lisa Barker	2	3	6	Plan contains target dates Additional resources are being evaluated to ensure the improvement actions will be delivered	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. Though some targets dates have changed, no change to overall delivery date of project.
5	29/08/2024	Board	Not complying with the Housing Ombudsman Complaint handling code	Failure to comply with requirements around complaints (including the expectations of the Ombudsman)	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service	2	4	8	A new governance structure is in place to oversee delivery. An Improvement strategy, project Initiation Document and Risk Register have been developed Self assessment completed in June 2024 improvements to processes identified currently being implemented.	Partially Effective	Lisa Barker	1	2	2	Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
6	29/08/2024	Board	Delivery of Action Plan too slow.	Progress to deliver the plan is slower than anticipated	No	Reputational damage, Non compliance with the Regulations Impact in respect of tenants/customer service	3	4	12	A new governance structure is to be put in place to oversee delivery. An Improvement strategy, project Initiation Document and Risk Register have been developed	Full Effective	Lisa Barker	1	2	2	Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
7	29/08/2024	Board	Action Plan target dates not covering priorities	Improvement is not appropriately targeted to the highest priority first.	No	Significant harm to tenants/leaseholders and buildings. Reputational damage, Prosecution impact in respect of tenants/customer service	3	5	15	HQN's report has prioritised its findings and these are reflected in the timescales for the action plan An Improvement strategy, project Initiation Document and Risk Register have been developed	Full Effective	Paul Smith	1	2	2	Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
8	29/08/2024	Board	Communication of non compliance deficient	Deficiencies in service or non compliant standards are not reported to management	No	Inadequate management response Board unable to fulfill its obligations. Reputational damage Impact in respect of tenants/customer service	3	4	12	An Improvement strategy, project Initiation Document and Risk Register have been developed	Partially Effective	Jen Morrison	2	4	8	service deficiency reporting mechanisms to be established and reported to the Board.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
9	29/08/2024	Board	Progress and impact not correctly monitored	Unknown/conflicting performance or information against any of the compliance areas	No	Inadequate management response Board unable to fulfill its obligations. Reputational damage Impact in respect of tenants/customer service	2	4	8	An Improvement strategy, project Initiation Document and Risk Register have been developed.	Full Effective	Jen Morrison	1	2	2	Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
10	29/08/2024	Board	Poor Data collection and reporting of progress of Action Plan	Data and information is incorrect and cannot be relied upon	No	Inadequate management response. Board unable to fulfill its obligations. Reputational damage	3	4	12	An Improvement strategy, project Initiation Document and Risk Register have been developed.	Partially Effective	Jen Morrison	3	3	9	Data collection, storing and retrieving effectively runs through the Consumer Standards requirements and is an identified priority area in the Action Plan. Assurance controls will need to be introduced to confirm compliance of a number of the standards especially reporting outcomes to the Board.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
11	29/08/2024	Board	Insufficient resources to deliver the Actions.	Operational capacity and resources insufficient to deliver the action plan and enable the Board to effectively function and deliver the outcomes	Yes	Inadequate management response. Board unable to fulfill its obligations. Reputational damage	4	4	16	Resources are being evaluated and discussions held. Final resource requirements will require the final signed of action plan and the priority of the actions to be confirmed to start to obtain and deploy resources.	Partially Effective	Darren Knight	3	4	12	Resources will be efficiently acquired, appropriately deployed and effectiveness monitored within the complete project environment for delivering the Action Plan	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. Recruitment is underway.
12	29/08/2024	Board	Effective governance at board level	The Board are not competent to provide effective leadership.	Yes	Ineffective monitoring, controls or decision making. Board unable to fulfill its obligations. Reputational damage impact in respect of tenants/customer service	2	4	8	The existing Board arrangements and similar personnel will be engaged to oversee the delivery of the action plan. An external independent sector specialist will be on the board.	Partially Effective	Darren Knight	2	2	4	Review and self assessment of board arrangements will take place.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.

13	29/08/2024	Board	Officer Competence to deliver the Action Plan	Senior officers and those responsible for compliance are not trained or competent.	No	Inadequate management response. Board unable to fulfil its obligations. Reputational damage	2	4	8	Senior officers have received training, and are experienced in delivering against plans and ensuring compliance with all aspects of services.	Partially Effective	Lisa Barker	2	2	4	Project and delivery competences will be addressed. Ongoing organisational and training needs assessment and delivery of ongoing training and support.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. HQN training has been provided and ongoing needs will be assessed.
14	29/08/2024	Board	Effective governance at Committee level	Committee are not competent to provide the appropriate governance	Yes	Inadequate support and decision making. Board unable to fulfil its obligations. Reputational damage Impact in respect of tenants/customer service	2	4	8	Training being provided by HQN to the Committee. Committee members have the experience and competent levels	Partially Effective	Darren Knight	2	2	4	Effective governance will be reviewed by the Councils Monitoring officer	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
15	29/08/2024	Board	Poor communication through project and governance levels	Lack of/poor communications between the levels, within the levels and internally/externally	No	Reputational damage. Non compliance with Housing Regulations	3	4	12	An improvement strategy, project Initiation Document and Risk Register have been developed.	Partially Effective	Darren Knight	2	2	4	Communication plan to be developed as part of the project environment Regular and frequent reporting through the governance structure to be set up Standing item on managers meeting agendas Team meetings, briefings and review sessions All relevant information shared on the Intranet, Teams Channels and SharePoint	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
16	29/08/2024	Board	Poor communication with Tenants	Poor communication with Tenants and Leaseholders	No	Reputational damage Non compliance with Housing Regulations	3	4	12	An improvement strategy, project Initiation Document and Risk Register have been developed.	Partially Effective	Paul Smith	2	3	6	Communications plan to be developed for Tenant and leaseholder communications Updates provided to T&L frequently Regular information to T&L via the website and newsletters	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
17	29/08/2024	Board	Management of Resources	Key staff leaving or being absent for a period of time	No	Reputational damage Non compliance with Housing Regulations	3	4	12	Processes are in place to bring in agency, temporary staff or additional consultancy support as necessary, whilst recruitment is undertaken.	Partially Effective	Lisa Barker	3	2	6	Additional resourcing requirements to be put in place. Project team to have regular communications with project leads Regular and frequent check-ins with key staff to assess wellbeing Deputies and buddying system to be put in place	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
1C	03/11/2023	Board	Action plan not comprehensive enough.	Compliance action plan is not accurate	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	1	1	1	Penningtons are highly qualified with a strong reputation in this field. They will be involved throughout the project.	Fully Effective		1	1	1	Consideration to be given to engage an external auditor, independent from Pennington, near to completion of project. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
2C	03/11/2023	Board	Action plan not delivered	Failure to deliver the overall Compliance Action Plan	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	1	2	2	New plan, so there are no existing controls. The plan contains milestones and target dates. A Board reports directly and on a monthly basis to the Asset Compliance Audit & Scrutiny Committee Additional resources are being recruited	Fully Effective		1	2	2	Monitored and reported to Compliance Board for regular review. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
3C	03/11/2023	Board	Delivery of Action Plan too slow.	Progress to deliver the plan is slower than anticipated	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	1	5	3	Plan contains milestones and target dates. Board reports directly and on a monthly basis to the Asset Compliance Audit & Scrutiny Committee. Additional resources are being recruited	Fully Effective		1	1	1	Monitored and reported to Compliance Board for regular review. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk. There has been a change to delivery dates and overall delivery. These have been communicated via Governance structures.
4C	03/11/2023	Board	No priority to action plan	Improvement is not appropriately targeted to the highest priority first.	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	1	3	3	Through the Pennington Report, the action plan has been prioritised. Fire, Gas and Lift safety identified as critical areas for action first. Action plan to be cross checked with Penningtons report. Regular progress reports	Fully Effective		1	1	1	Monitored and reported to Compliance Board for regular review. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
5C	03/11/2023	Board	Poor communication through project and governance levels	Incidents are not reported to management	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	3	3	9	New plan and therefore there are no existing controls. Incident reporting mechanisms to be established and reported to the Board.	Fully Effective		1	3	3	Incident reporting mechanisms has been established and reported to the Board. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
6C	03/11/2023	Board	Inaccurate Data - not reliable	Unknown performance against all of the compliance areas	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	3	3	9	Needs visibility of performance and progress - a dashboard. The dashboard needs to be visible to appropriate officers and board members	Fully Effective		1	1	1	Dashboard showing Compliance reporting underway. The dashboard needs to be visible to appropriate officers and board members. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
7C	03/11/2023	Board	Inaccurate Data - not reliable	Current data is incorrect and cannot be relied upon when it comes to the Big 6.	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	3	3	9	A data validation exercise is recommended by Penningtons and is contained within the action plan. Will provide a baseline of current data held.	Fully Effective		1	1	1	A data validation exercise is underway with Penningtons and is contained within the action plan. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.

8C	03/11/2023	Board	Management of Resources	Operational capacity insufficient to enable the Board to effectively function and deliver the action plan	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	3	3	9	Leads and project manager have been identified and hired.	Partially Effective		2	2	4	Any further gaps in resources will be identified through process mapping. Recruitment will be as needed.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
9C	03/11/2023	Board	Effective governance at board level	The Board is not competent to provide required leadership.	No	Adverse impact on the Council	1	2	2	An external independent sector specialist has been invited to sit on the board and has accepted. Training will also be provided by Pennington Choices for Board members.	Fully Effective		1	1	1	Further refresher training organised as needed. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
10C	03/11/2023	Board	Officer Competence to deliver the Action Plan	Senior officers and those responsible for compliance or other health and safety work are not trained or competent.	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	1	2	2	Training to be provided by Pennington Choices for Officers.	Fully Effective		1	2	2	Further refresher training organised as needed. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
11C	03/11/2023	Board	Effective governance at Cabinet level	Cabinet are not competent to provide the appropriate governance	No	Reputational damage. Inadequate management response Board unable to fulfil its obligations.	1	2	2	Training to be provided by Pennington Choices for Cabinet members.	Fully Effective		1	2	2	Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
12C	03/11/2023	Board	Poor communication through project and governance levels	Lack of/poor communications between the levels, within the levels and internally/externally	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	1	1	1	Regular and frequent reporting to the Asset Compliance Audit & Scrutiny Committee. Standing item on SLT and Managers Forum meetings. Communications plan in place for Tenant and leaseholder communications. All relevant information on the web and reviewed following each Board meeting.	Fully Effective		1	1	1	Regular and frequent reporting to the Asset Compliance Audit & Scrutiny Committee. Standing item on SLT and Managers Forum meetings. Communications plan in place for Tenant and leaseholder communications. All relevant information on the web and reviewed following each Board meeting. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
13C	03/11/2023	Board	Poor risk assessment	The risks associated with the Penningtons report and actions plan are not captured, the captured risks are not complete.	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	3	3	9	A risk register in place reviewed and updated as a standing board item. Significant business risk separated and given a high priority over other risks. Penningtons are asked to review the risk register. Consider engaging an external auditor, independent from Pennington, near to completion of project	Fully Effective		1	1	1	Had a midpoint review and there was acknowledgement from Pennington that good progress has been made. Will still engage Pennington near to completion of project for final review. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
14C	03/11/2023	Board	Poor communication with Tenants	Poor communication with Tenants and Leaseholders	No	Reputational damage.	2	3	6	Letter to T&L setting out position sent on 8.11.23. Communications plan to be drafted and approved by the Board. Updates provided to T&L provided following each Board meeting. Full information disclosed to tenants on the website for transparency	Fully Effective		1	2	2	Communications strategy has been developed. Full infographic will be on the website for transparency. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
15C	03/11/2023	Board	Poor communication.	Reputational Damage or loss of confidence including community concerns	No	Reputational damage	2	3	6	Reputational damage. Overwhelming numbers of enquiries. Significant press interest. Known tenants of concern introduce additional noise into the system	Fully Effective		1	2	2	On going communications strategy being developed. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
16C	03/11/2023	Board	Insufficient resources to deliver the Actions.	Key staff leaving or being absent for a period of time	No	Reputational damage or potential prosecution. Significant harm to tenants / leaseholders and buildings.	3	3	9	Ability to bring in agency or additional staff as necessary although delays still occur. Employee Assistance programme	Partially Effective		2	2	4	Additional resourcing requirements to be put in place. Heads of Service to speak to staff to provide reassurance. Project team to have regular communications and reassurance. Regular and frequent check-ins with key staff to assess wellbeing. Continue to monitor.	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.
17C	03/11/2023	Board	Legal penalties	Increased risk of no win no fee claims	No	Reputational damage and high costs.	4	4	16	Increased costs in damages, legal fees, surveyors and administrators to handle claims. Reputational damage.	Partially Effective		3	3	9	Within the tenant and leaseholder communication plan, develop approaches to guide tenants to contact the Council if they have concerns with their property. Continue to monitor	Negative	Legislative	Monthly	Reduce	Open	06.01.2025: no change to risk.