North Herts Council

RISK MANAGEMENT GOVERNANCE (YEAR-END UPDATE)

Progress of risk management activities since the mid-year update reported in January 2026.

1. Introduction

1.1 This year-end update provides an overview of risk management governance arrangements at North Herts Council as of the end of March 2026 and summarises associated activities since the mid-year update, which was reported to relevant committees in January 2026. It provides a wider commentary on risk, a broader understanding of risks faced and associated mitigations, and assurance that risk management processes and governance arrangements are in place and working.

1.2 Following review by the Risk and Performance Management Group (RPMG), the year-end update will be presented to the Finance, Audit and Risk Committee, Cabinet and Council.

2. Executive Summary

2.1 The highest strategic risks are currently Cyber, Financial Sustainability, Local Government Reorganisation and Devolution, and Resourcing, as well as project risks for Churchgate, Decarbonisation of Council Buildings - Phase 2, and Museum Collection Facility.

2.2 Since production of the mid-year update, the risk levels of three Corporate Risks have been reduced - Leisure Centre Decarbonisation, Local Plan Review, and Resident/Public EV Charging in our Car Parks. Risk scores were also reduced for three completed Council Delivery Plan projects - Engaging the Community on our Finances, King George V Skate Park, and Waste and Street Cleansing Contract.

2.3 The new Museum Collection Facility project risk was introduced in January 2026 and was first reported in the Council Delivery Plan 2025/26 (Quarter 3 Update) presented to Cabinet on 14 April 2026.

2.4 All Corporate Risks continue to be reviewed on a quarterly basis, with updates to completed and planned mitigating activities.

3. Background

3.1 As set out in the Constitution, the Finance, Audit and Risk Committee focuses on its role of “monitor[ing] the effective development and operation of risk management”. To enable this, the Committee receives a mid-year (in December/January) and year-end (in June) risk management governance update.

3.2 The Overview and Scrutiny Committee considers the risks to achieving agreed objectives and priorities, as set out in the Council Plan. Quarterly reports detailing key projects and associated risks, key strategic risks that cut across the delivery of all services, and key performance indicators, form part of established Council Delivery Plan monitoring arrangements.

3.3 The above reports are subsequently presented to Cabinet, which has overall responsibility for ensuring the effective management of risk. The Cabinet reports will include any specific recommendations made by the Finance, Audit and Risk Committee and Overview and Scrutiny Committee.

3.4 The Risk and Performance Management Group (RPMG) provides Officer and Member oversight of risk management activities and valuable input to risk-related committee reports. The Director – Resources, the Officer Champion for Risk Management, chairs quarterly RPMG meetings and the Executive Member for Resources, in their role as the Risk Management Member Champion, is a regular attendee. The Chairs of Finance, Audit and Risk Committee and Overview and Scrutiny Committee are invited to attend, with optional invitations extended to members of both committees and Cabinet. The Controls, Risk and Performance team deliver the risk management function, and support the RPMG with the provision of meeting papers and expert advice. Hertfordshire County Council (HCC) delivers the Council's insurance services and their Risk and Insurance Manager attended RPMG meetings during the year, enabling the Council to obtain an insight into emerging risks and issues at both HCC and other Hertfordshire local authorities. The Shared Internal Audit Service (SIAS) Head of Assurance also attends, helping to inform a better understanding of wider risk issues. Officers also attend representing the Resilience (NHC Resilience Manager) and Health and Safety (HCC Health and Safety Manager) functions.

3.5 Each Director provides the RPMG with an informal overview of key projects and risks within their directorate once a year and will have ongoing discussions about these with the relevant Executive Member(s).

3.6 The Controls, Risk and Performance team is responsible for the provision of training and support to Officers and Members.

4. Risk Management Framework

4.1 The Council's Risk Management Framework requires us to:

- Identify and document key risks in all areas of our business, understand them and seek to proactively manage them.
- Assess each risk, identify existing controls, and identify further actions required to reduce the risk.
- Have Business Continuity Plans in place for each of our service areas, which identify the key functions, what the risks are and how they can be mitigated to allow them to continue operating.
- Develop capacity and skills in identifying, understanding, and managing the risks facing the Council.
- Regularly review the Risk Management Framework and update it in line with statutory and best practice requirements.

4.2 The Risk Management Framework is reviewed and updated on an annual basis. Officers undertook the last review towards the end of 2025 and details of proposed changes were included in the risk management governance mid-year update. Cabinet approved the changes to the Risk Management Framework on 20 January 2026.

5. Risk Awareness and Appetite

5.1 The Council is committed to the proactive identification and management of key external and internal risks that may affect the delivery of objectives. This allows us to be risk aware, understanding that risks may increase as services evolve and more commercial opportunities are developed and undertaken.

5.2 The Council's risk appetite is its willingness to accept risks to realise opportunities and achieve objectives. We must take risks and 'be brave' to evolve and to continue to deliver services effectively, deciding what risks we want to take and what ones we want to avoid, whilst acknowledging that we cannot or should not avoid all risks. The Risk Management Framework recognises that risks accompany all new objectives and opportunities, and it provides guidance on managing them appropriately.

5.3 The Council will have a range of different appetites for different risks depending on the circumstances and these will vary over time. The Risk Management Framework specifies that we will actively manage and monitor risks scoring 4 or higher on the risk matrix. This includes monitoring the completion of risk management activities and assessing their effectiveness.

5.4 As reported in the year-end Council Delivery Plan monitoring report, 11 Corporate Risks have a score of 4 or above (see Section 7.).

6. Risk Identification and Assessment

6.1 Leadership Team and Cabinet are responsible for the Corporate Risks, with Cabinet ensuring these risks are managed appropriately and proportionately. They are likely to require a high-level of resources to manage and need to be monitored at a strategic level.

6.2 The reporting of Corporate Risks to Cabinet, via quarterly Council Delivery Plan updates, allows details of the top risks facing the Council to be monitored. The half-yearly reports on risk management governance presented to FAR and Cabinet help to provide assurance over the processes that are in place to support risk management.

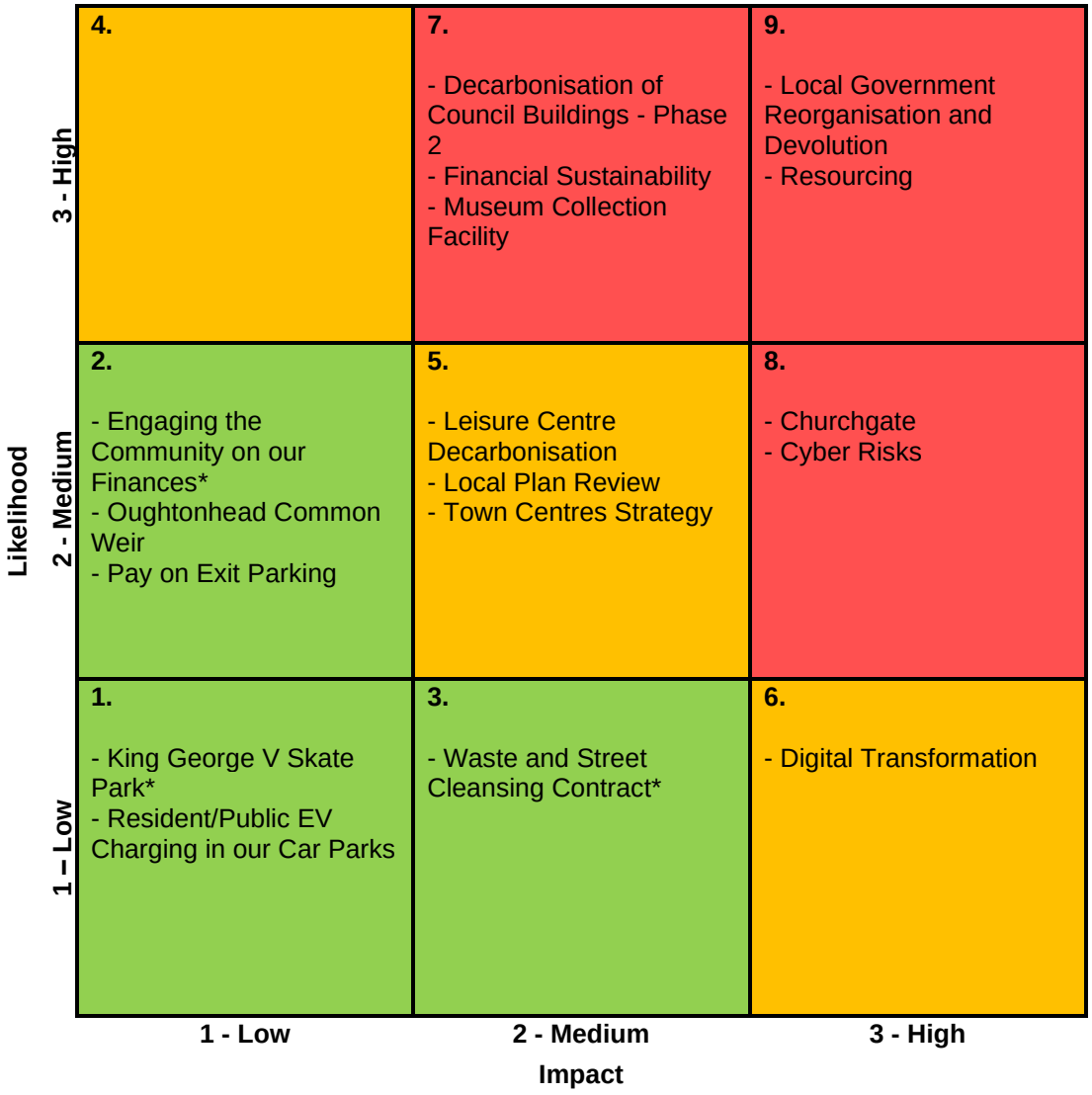
6.3 In June 2025, Cabinet approved the inclusion of 13 projects in the Council Delivery Plan for 2025/26, along with four over-arching Corporate Risks. Each Council Delivery Plan project has a risk assessment in place to determine the major risks to the delivery of the project and the mitigating actions required. The majority of projects and the four Corporate Risks were carried forward from the previous year's Council Delivery Plan. One new project entitled Decarbonisation of Council Buildings - Phase 2 was added in time for the Quarter 1 monitoring report and another new project entitled Museum Collection Facility was added in time for the Q3 2025/26 monitoring report.

6.4 The following diagram sets out how overall risk scores are produced, detailing the associated individual likelihood and impact scores and related Risk Management Framework definitions for each score:

4. Likelihood High (3) Impact Low (1) Chance of it happening -More than 60% Consequences - Minor	**7. Likelihood High (3) Impact Medium (2)** Chance of it happening - More than 60% Consequences - Noticeable effect on the Council	**9. Likelihood High (3) Impact High (3)** Chance of it happening - More than 60% Consequences - Significant impact on the Council
2. Likelihood Medium (2) Impact Low (1) Chance of it happening – between 20 – 60% Consequences - Minor	**5. Likelihood Medium (2) Impact Medium (2)** Chance of it happening – between 20 – 60% Consequences – Noticeable effect on the Council	**8. Likelihood Medium (2) Impact High (3)** Chance of it happening – between 20 – 60% Consequences – Significant impact on the Council
1. Likelihood Low (1) Impact Low (1) Chance of it happening – less than 20% Consequences - Minor	**3. Likelihood Low (1) Impact Medium (2)** Chance of it happening – less than 20% Consequences – Noticeable effect on the Council	**6. Likelihood Low (1) Impact High (3)** Chance of it happening – less than 20% Consequences – Significant impact on the Council

7. Corporate Risks

7.1 The Council Delivery Plan contains the following risks, which have been plotted on the Corporate Risk Matrix to show a visual risk profile of the Plan, as reported in the year-end monitoring report:



* Associated Council Delivery Plan project completed.

7.2 The risks can also be assessed in the context of mitigating actions, including those that have been completed. When mitigating actions are completed, there is an expectation that the cumulative effect will have a positive impact on the risk score. Detailed below are completed actions and proposed mitigating actions for each of the Council Delivery Plan high-level risks. Actions completed since the previous Risk Management Governance report are in ***bold italics*** to help show how mitigating activity is progressing. The presented information is in line with a previous request from the Finance, Audit and Risk Committee.

Risk Title/ Risk Score	Completed Mitigating Actions	Ongoing Controls and Mitigating Actions
Churchgate Current: 8 Target: 6	- Secured both freehold and leasehold ownership. - Project Board appointed (November 2022). - Lead consultant (Lambert Smith Hampton) appointed (June 2023). LSH supported by design and transport consultants. - Appointed communications agency support (PLMR). - Detailed project risk log created. Issues log also created. - SIAS audit of Churchgate - Ongoing Project Assurance (reported May 2024). Recommendations implemented. - Engagement plan developed and approved by Project Board (July 2024). - Formal engagement process commenced September 2024 and ended November 2024. - Further SIAS audit of Churchgate - Project Assurance (reported May 2025) provided a reasonable level of assurance. Recommendations implemented. - LSH undertook preliminary exercise to identify key risks and appropriate ways to manage these. Details presented in Appendix M (Risk Assessment) of the Viability and Strategy Report. - Council decision (10 July 2025) to develop a proposal based on the preferred option, endorse the five 'Development Principles', and approve additional 12-month funding for a specialist regeneration project manager. ***- Successful 2026/27 growth bid to extend the employment of the regeneration specialist Project Manager***.	Controls: - Communications and consultation plan in place and evolving, which is kept updated. - Decisions explained, including that there will need to be compromises. - Financial and expert consultancy support is in place to provide expert advice and help us to move the project forward. - Cost effectiveness/value for money is a key part of assessing and developing options. - Committee reports to highlight significant risks associated with recommended decisions under Risk Implications. Project Management Controls: - Regular Project Board meetings. - Project risk log and issues log regularly updated and reported to Project Board. - Weekly Project Team meetings with LSH. Actions: - Further work required to explore risks identified in the Viability and Strategy Report in greater detail and to develop appropriate mitigation strategies. - Progressing a number of work packages (e.g., car park survey analysis and future proofing) to support fully informed decision making on options/viability.
Decarbonisation of Council Buildings - Phase 2 Current: 7 Target: 5	- Project budget contingency in place. - Allocated internal resource for project management and delivery of project programme. - Allowed for comprehensive planning in year one, with no requirement to drawdown any Salix funding. - Project Risk Log in place. - Informal engagement with Planning prior to funding application, to have confidence that proposed interventions are likely to align with planning guidance. - Project plan allows for a significant period of time to undertake planning process, DNO upgrades and procurement of MEP. - Funding for a Principal Designer and a Quantity Surveyor approved by Cabinet via the Q1 2025/26 Capital Budget Monitoring Review report (23 September 2025). - Reviewed the three audit reports and recommendations relating to 'Leisure Centre Decarbonisation Project (Salix Grant) Embedded Programme Assurance'. ***- Decision on preferred project delivery route (13 November 2025).*** ***- Decarbonisation of the DCO removed from Salix funding, with revised works now due to be undertaken via a different delivery route.***	Actions - Apply for planning permission as early as possible (due April 2026). - Engage with DNO regarding upgrade requirements as early as possible. - Undertake asbestos surveys across identified sites (timings to be confirmed, although likely to be undertaken around date works due to commence). Controls - Regular Project Board meetings. - Regular dialogue with Salix relationship manager. - Monitoring reports submitted to Salix (quarterly for 2025/26 and monthly for 2026/27 and 2027/28). - Monthly Executive Member briefings. - SIAS attendance at Project Board meetings.

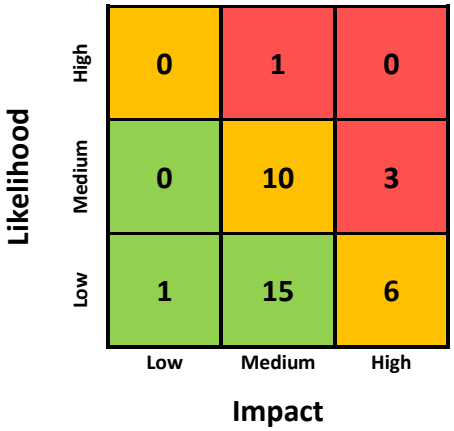
Risk Title/ Risk Score	Completed Mitigating Actions	Ongoing Controls and Mitigating Actions
	- Appointment of project management support (Varsity) to support full project, as well as appointment of MEP consultants and architects to support continuity across project.	
Financial Sustainability Current: 7 Target: 5	- MTFS for 2025-30 agreed by Council in September 2024. - Set budget for 2025/26, which identified additional pressures and incorporated revised funding assumptions. - Government confirmation of three-year settlement from 2026/27 onwards. - Responded to consultation on new funding formula. - Budget consultation carried out. ***- Revised funding projections as a result of formula changes and insight of future direction.*** ***- Medium Term Financial Strategy 2026-30 approved on 4 December 2025. MTFS sets out a strategy for addressing funding gaps, including how difficult service funding decisions may have to be made.*** ***- Reviewed results from budget consultation and fed this into 2026/27 budget planning.*** ***- 2026/27 budget approved at the Full Council meeting held on 26 February 2026.***	- Regular budget monitoring to highlight any issues. - Monitor inflation forecasts and impacts.
Museum Collection Facility Current: 7 Target: 3	***- Detailed Project Risk Log in place, recording relevant mitigations agreed with Project Board and the actions required to implement them.*** ***- Approved Capital budget in place, with additional contingency.*** ***- Indicative project expenditure based on consultancy costing exercise, which was reviewed by appropriate officers.*** ***- Project plan adjusted to account for known delays to Stage 1 design and extension of existing tenancy***.	- Project Manager updates to Project Risk Log throughout project lifecycle. - Implementation of agreed mitigating actions to planned timescales. - Regular Project Board meetings provide the opportunity for identified risks to be reported and discussed, and for any additional actions to be agreed. - Project Team and Project Board to scrutinise project expenditure and act diligently when authorising spend. - Tolerances on spend for individual work packages to be agreed with Project Board. - Internal promotion of the project to NHC staff and councillors, including progress made and timescales. - Professional Services Team and any grant funded roles to be brought on board at the earliest opportunity. - Submit grant funding applications at the earliest opportunity.
Resourcing Current: 9 Target: 8	- Carry-forward of staffing underspend to help deliver some priorities. - Work on Baldock Fire recovery has subsided. - Council Delivery Plan reviewed for 2024/25 with a reduction in number of projects. - Recruitment website updated to make it more attractive to applicants. - Some success in recruiting to previously hard to fill roles, although still some continuing issues in certain areas. - Pressures identified in the budget setting process for 2025/26 for additional staffing, including training posts.	- Consider getting in additional staffing resource (especially where New Burdens funding available). - Signposting to external resources and support. - Process automation. - Continue HR projects to help make the Council a more attractive place to work and make the recruitment process easier. - Continue to review the Council Delivery Plan to ensure resources are targeted at those projects that are the highest priority and stop/delay work on those that are a low priority.

Risk Title/ Risk Score	Completed Mitigating Actions	Ongoing Controls and Mitigating Actions
	- Joined in with the national recruitment campaign for councils led by the LGA. ***- Launched new job application system to make it easier to apply for jobs, and easier for recruiting managers.*** ***- Budget allocated for back-filling/additional work linked to LGR.***	- People Strategy being developed with agreed themes, including retention and development of staff. - Tracking the resource impacts of LGR.
Cyber Risks Current: 8 Target: 8	- In-house fully functional Disaster Recovery solution. - SLA from broadband provider in place (although loss of broadband service is out of our control). - 2022/23 SIAS audits of IT Hardware (Reasonable assurance), Phishing (Reasonable assurance) and Cyber Risk (Reasonable assurance). - V3 laptop rollout completed for staff. - Implemented IT Hardware audit recommendations. - Test Immutable Cloud Back-up - Phase 1. - Implemented Immutable Cloud Back-up - Phase 2. - IT Information Team Leader and Technical Operations Manager completed the Certified Information Security Manager course. - Implemented Phishing audit recommendations. - Implemented Cyber Risk audit recommendations. - New email monitoring system Mimecast implemented and live. Backup server for mail routing in the event of attack on Microsoft 365 in place. - Windows 11 operating system with Microsoft Defender now deployed. - Mimecast system now used to conduct more sophisticated Phishing Simulations. - Website Access Control and Monitoring upgrade completed. - 2024/25 SIAS audits: Cyber Security Supply Chain Management (Reasonable assurance), Cyber Governance and Culture (Reasonable assurance). - The Council has introduced a Cyber Resilience Board, which includes key officers and elected Members, and meets quarterly. - The Council will not now appoint a Chief Information Security Officer. IT Manager to undertake the role of principal security officer as Cyber Security Lead. ***- Implemented 2024/25 SIAS audit recommendation management responses.*** ***- Cyber Awareness training for all staff, including a requirement for an annual refresh.*** ***- Technology in place to cover systems being interrupted or damaged, and data being corrupted or erased: Computer virus (Realtime Virus Protection/Defender updated), Malware (Realtime Monitoring), Computer hacking (Firewalls/Admin restrictions).*** ***- Financial Risk identified for 2026/27 to fund services to aid recovery,*** ***"Ransomware attack results in the write-***	<u>Key Controls/Mitigations</u> - Continual evaluation and development of cyber policies and threat analysis. <u>Response Options</u> - Successful cyber-attack would be managed by a complete disconnect, with no/limited service available until the breach is fixed. IT would have responsibility for initiating this. - Power failure would be managed by the generator/UPS, with a limited service available. - For Ransomware, go to backup and rebuild all devices. Ransomware policy discussed by February 2025 Cyber Board. In line with Government recommendations, no ransom will be paid.

Risk Title/ Risk Score	Completed Mitigating Actions	Ongoing Controls and Mitigating Actions
	off of some IT hardware and infrastructure" (Low Risk/£200K). - Data at Rest Encryption purchased ***and now in place.*** ***- 2026 PSN evaluation undertaken and submitted.*** ***- VPN moved from in-house to industry standard***.	
Local Government Reorganisation and Devolution Current: 9 Target: 5	- The Council was part of the county-wide White Paper Working Group, which was working on the initial submission in March 2025. - Staff have been provided with regular updates and chances to ask questions, this has included reassurance that services will still need to be delivered under any structure. - Feedback received from central government on the interim proposal for Hertfordshire (May 2025). - Consultants appointed to support Programme Management Office deliver the agreed work programme to November 2025 submission. ***- Stakeholder consultation exercise carried out, and feedback included in the submission.*** ***- County-wide submission deadline met at the end of November 2025.*** ***- New structure for the next phase of work is in place. Officers from North Herts are providing input into those arrangements.*** ***- Reserve allocation of £2m agreed as part of budget setting***.	Controls and Further Mitigating Activities: - Continued support for staff. - Maintain processes for decision making and ensure decisions are taken in the best interests of North Herts (irrespective of future structure). - Input in to work to support transition, both before and after new structures are known.

8. Service Risks

8.1 As of 31 March 2026, the Risk Register contained 36 service risks. A summary of the assessed risk scores is detailed below:



8.2 The four high-risk assessments related to:

- Careline - Field Visits to Service Users' Homes
- Meeting the Needs of Homeless People
- Open Space in Major New Developments
- Renters' Rights Act

9. Review of Risks

9.1 Risk reviews are scheduled within Ideagen (our performance and risk software), with automated reminders sent to assigned officers when risks are due to be reviewed. In line with Risk Management Framework (RMF) requirements, high risks should be reviewed every 3 months, medium risks every 6 months and low risks at least once a year. The Performance and Risk Officer assists assigned officers to ensure that information is captured in line with RMF requirements.

9.2 As of 31 March 2026, there was a total of 53 risks recorded on the risk register – 17 included in the Council Delivery Plan and 36 service risks. All of these had risk reviews scheduled in accordance with the RMF. During the six-month period 30 September 2025 (when the figures for the mid-year Risk Management Governance update were produced) to 31 March 2026, 79 risk reviews took place. 71 (90%) of these took place in line with strict RMF requirements. Of the eight reviews that were late, two were up to one week late and six were more than one week late, ranging from 9 to 54 days late. For most, the reason for delay was due to lack of officer availability (e.g., due to higher priority commitments or leave) and review meetings having to be scheduled after the Next Review Date. Of the eight late reviews, three related to Corporate Risks, with all of these being reviewed in time to be included in the relevant quarterly Council Delivery Plan monitoring report.

10. New Risks

10.1 Between 1 October 2025 and 31 March 2026, two new risks were entered on the Risk Register. These were:

- **Museum Collection Facility:** New Corporate Risk (included in the Council Delivery Plan) describing key risks to successfully delivering the associated project and setting out key activities to control/mitigate these.
- **Renters' Rights Act:** New Service Risk relating to the risk of NHC not being in a position to effectively implement new Renters' Rights Act legislation from the practical implementation date of 01 May 2026.

Both risks were reviewed by the RPMG on 25 February 2026.

11. Archived Risks

11.1 Between 1 October 2025 and 31 March 2026, five risks were archived. These were:

- **Estates Management Information and Reporting:** A new master spreadsheet is now operating adequately to ensure all lease events, such as rent reviews and lease renewals, are actioned and that Estates records align with finance records. As part of a corporate review of Uniform modules across the Council, a decision was taken to cease use of the Estates module, which was signed off by the Director - Enterprise. All data sets have been extracted from Uniform. In view of the significant improvements linked to the new master spreadsheet, implementation of related audit recommendations, and the cessation of the Estates Uniform module, the described risks associated with the Uniform database are no longer relevant. Until LGR, we will continue to use the new master spreadsheet to manage the Estates portfolio, with a further review being undertaken post LGR when portfolios will be merged and other authorities existing property management systems could be potentially utilised. In the interim period, this is assessed as a low risk area for NHC.

- **Land Adjacent to Radburn Way, LGC:** In June 2025, Cabinet approved that the land should no longer be declared surplus and development of the site should not be pursued, and that plans should be progressed to improve management of the land with the intention to provide a habitat bank, or similar, with improved public access as appropriate. Following the Cabinet decision, Green Space are now leading on the new project. As we are no longer looking to dispose of this site, the previously identified risks to disposal are no longer relevant.
- **Museum Storage:** Existing risk entry superseded by the new 'Museum Collection Facility' Council Delivery Plan item, which relates to the adaptation of Unit 1 City Park to meet current and future museum storage requirements. Associated risks to the project and museum collection are now managed/monitored via the Project Risk Log and Council Delivery Plan item.
- **Virgin O2 2G Network Shutdown:** All known Virgin O2 2G Careline clients in affected postcodes were transitioned and Careium (our supplier) successfully removed Virgin O2 2G profiles from their SIM estate in controlled batches. Following the shutdown date (1 October 2025), performance was stable across the network, and at the time of archiving, no service disruptions had been reported. Careium continue to monitor performance and will alert us if any anomalies do occur. All mitigation measures have been completed, the shutdown passed without disruption, and ongoing work has been absorbed into standard operational monitoring.
- **Waste Depots:** This risk entry was originally created for (and was subsequently removed from) the Council Delivery Plan, with described risks specifically relating to the waste depots and the start of the new waste contract. These risks were successfully managed for example, Veolia carried out timely dilapidation repairs, Veolia is now the sole leaseholder (removing risks associated with them having to share the Buntingford depot site), and Veolia replaced the existing depot fuel tank (removing risks associated with it not being fit for purpose). Ongoing risks relating to permitting requirements are managed by Veolia (the permit holder), and we are not aware of any current permitting issues. Broad discussions on waste depots and related infrastructure will need to take place in preparation for LGR and we have a separate risk entry on the Risk Register relating to wider waste transfer infrastructure.

12. Training

12.1 A Risk Management e-learning module is available on GROW Zone and is mandatory training for all managers. As of 31 March 2026, 94% of managers had completed the training – 82 out of 87. This has subsequently increased to 97% - 84 out of 87. For the three still outstanding, the system sends automatic reminders to the managers encouraging completion of the module at the earliest opportunity. The module is also available to all other staff and councillors via the general Courses Library on GROW Zone.

13. Insurance Review

13.1 Hertfordshire County Council continued to handle the Council’s insurance arrangements under a shared service arrangement. The Council’s insurance policies were renewed from 1 April 2026. Unfortunately, rates were increased by the motor insurers due to the claims history in 2025/26. The liability insurance arrangements were tendered in 2025/26 and a new insurer appointed from 1 April 2026 with significant savings for the Council.

13.2 The Council transfers some financial risks to its insurers. Public liability insurance provides the Council with insurance cover for claims made by the public for personal injury and/or property damage. These types of claims are subject to a £10,000 excess that is charged to the responsible service area. Areas that have been subject to a claim are identified and wherever possible, action is taken to prevent future damage to property or personal injury. As of 31 March 2026, there was only one outstanding public liability claim against the Council.

13.3 The Municipal Mutual Insurance (MMI) Scheme of Arrangement was triggered in 2013, and the Council now pays 25% of any new claims dating back to the period that MMI was the Council's insurer (1974 to 1993). The Council's Financial Risks make provision for any new claims and any further levy demands relating to the period that MMI were the Council's insurers. As of 31 March 2026, there were no outstanding claims with MMI.

13.4 The Council is uninsured for public liability claims for asbestos exposure, following the introduction of this as an exclusion in policy wordings from around 2003. Following the court case Bolton – v – MMI it is deemed that injury does not occur at the time of exposure but when the tumour begins to develop. This led to injury in mesothelioma claims being deemed to occur 10 years before diagnosis. As it is now 22 years since the exclusion wording was introduced, any new cases will not have cover. In contrast, employers' liability insurance covers the date the exposure happened so the insurer on cover in the 1970/80's will respond (as any claims are likely to be from this period before stricter health and safety controls were introduced). In North Herts Council's case, and as referenced above in 13.3, this is Municipal Mutual Insurance.

14. Resilience Planning

14.1 The Resilience Plan, Recovery Plan, Pandemic Disease Plan and Resilience Communications Support Plan have been updated with formal approval and sign-off to be completed by the end of May 2026. Due to limited staff availability and the prioritisation of other resilience work, the majority of business continuity work was put on hold during the year. Expect to be able to start to catch-up on outstanding tasks during 2026/27.

14.2 The NHC Flood Plan and Kimpton Groundwater Guidance document are being updated. A Kimpton Multi-Agency Action Plan is in place produced by HCC. A multi-agency debrief was facilitated by HCC Flood Risk Management in July 2025.

14.3 The Local Resilience Forum (LRF) has produced a new LRF Training and Exercising Plan which has been distributed to NHC volunteers.

14.4 Minor updates were made to the Cyber Incident Business Continuity Response Plan in January 2026 and a Cyber Incident Exercise based on a phishing email scenario was facilitated in March 2026. The learning outcomes from the exercise will be incorporated into a review of the plan and procedures including promotion of the 'TextAnywhere Alert system' to staff.

14.5 Ongoing areas of focus include the development of a Widespread Power Outage Business Continuity Plan and an Adverse Weather Business Continuity Plan.

15. Health and Safety

15.1 As noted in the mid-year review, the Council entered into a service level agreement with Hertfordshire County Council's (HCC) Health and Safety team from October 2025 to fulfil the statutory requirement to have access to competent health and safety advice, as well as conduct a limited number of H&S services on request.

15.2 The Buildings & Facilities team are managing general H&S queries via the health and safety mailbox and administering the DSE system (Cardinus), with assistance from the Management Support Unit. Work is ongoing with the suppliers of this software to further streamline our process. Where required due to the level of risk indicated on the self-assessment, DSE referrals have been passed to HCC, with four such interventions being undertaken to date. A project has also commenced to increase the provision of sit/stand desks within the DCO, further supporting the proactive management of DSE risks and staff wellbeing.

15.3 Fire risk assessment reviews across NHC's portfolio have commenced via HCC's Health and Safety team, with 10 undertaken as at the end of March 2026 and any identified actions raised via the Safety Culture system.

15.4 To assist service managers, a suite of generic risk assessments has been drafted and reviewed by HCC's Health and Safety team. This will enable service managers to select the risk assessments relevant to job role or task. However, there may still be bespoke or non-generic risk assessments that managers will need to create.

15.5 Accident and incident reporting remains low, with one accident and six incidents or threats recorded during the reporting period.

15.6 Looking ahead, priorities for 2026/27 include an audit of health and safety management systems, reviewing corporate training requirements, and improving systems for reporting and managing accidents and incidents.

16. Actions for 2025/26

16.1 The 2024/25 Risk Management Governance (Year-End Update) report detailed the following key actions for 2025/26 to enhance our risk management processes. An update on the progress made during the year is provided.

Action	Due Date	Progress
Undertake the annual review of Risk Management Framework documentation.	31/12/25	Officers undertook the review, and Cabinet approved the recommended changes to the Risk Management Framework on 20 January 2026.
Training exercise linked to the Cyber Incident Business Continuity Response Plan.	31/12/25	A cyber incident tabletop exercise was held on 9 March 2026 to test the Cyber Incident BCP, which was attended by all of Leadership Team, and officers from Communications, IT, and Resilience.
Senior Managers Group (SMG) review of emerging risks and opportunities.	31/03/26	The revised plan is for this to be undertaken by SMG in Summer 2026.

Action	Due Date	Progress
Updates to Emergency and Business Continuity plans.	31/03/26	The Resilience Plan, Recovery Plan, and Pandemic Disease Plan have been updated. Formal approval and sign-off is ongoing and expected to be completed by the end of May 2026. Due to limited staff availability and the prioritisation of other resilience work, the majority of business continuity work was put on hold during the year. Expect to be able to start to catch-up on outstanding tasks during 2026/27.

17. Actions for 2026/27

17.1 The following key actions for 2026/27 aim to further enhance our risk management processes:

Action	Due Date	Progress
Undertake the annual review of Risk Management Framework documentation.	31/01/27	This is scheduled to take place in September/October 2026. Review outcomes should be reported to the RPMG in November 2026 and to relevant committees in January 2027.
Senior Managers Group (SMG) review of emerging risks and opportunities.	30/09/26	This will be undertaken in Summer 2026.

18. Conclusion

18.1 The Council continued to implement the Risk Management Framework throughout 2025/26, including reviewing and reporting key strategic risks. Related processes and practices aim to ensure a comprehensive understanding of the risks faced. This allows us to be risk aware and to determine the most cost-effective way to manage risks and exploit opportunities.