All Fund Risk Heat Map and Summary of Governance Risks

			Governar	nce Risks			Impact	Funding & Investment Risks (includes accounting and audit)										
		7 4 S		2			Negligible					7						
		2	6 1				Marginal					5 8						
					5		Critical		6	2 3 4	1							
							Catastrophic											
Likelihood	Unlikely	Very Low	Low	Significant	Very High	Extremely High		Extremely High	Very High	Significant	Low	Very Low	Unlikely	Likelihood				
				5			Catastrophic	Key	Each risk is represented in the chart by a number in a square.									
					3 2		Critical	1	- The location	The number denotes the risk number on the risk register. The location of the square denotes the current risk exposure. The background colour within the square denotes the target risk exposure.								
			5 6				Marginal	New risks since the last reporting date are denoted with a blue and white border.										
							Negligible		An arrow denotes a change in the risk exposure since the previous reporting date, with the arrow coming from the previous risk exposure.									
		Admini	stration & Co	ommunicatio	on Risks		Impact											

Clwyd Pension Fund - Control Risk Register

Governance Risks

- Objectives extracted from Governance Policy (03/2017), Training Policy (11/2015) and Procedures for Reporting Breaches of the Law (11/2015)

 1. Act in the best interests of the Fund's members and employers

 2. Have robust governance arrangements in place, to facilitate informed decision making, supported by appropriate advice, policies and strategies

 3. Ensure the Pension Fund is amaged and its services delivered by people who have the appropriate knowledge and expertise

 4. Act with integrity and be accountable to our stakeholders for our decisions, ensuring they are robust and well based

 5. Short the centure compliance with the appropriate legislations and statutory guidance, and to act in the spirit of other relevant guidelines and best practice guidance

 6. Short the centure compliance with the appropriate plassations and that all the services are delivered by people who have the part of the propriate plassation and that its services are delivered by people who have the three Chypt Dension Fund is appropriately managed and that its services are delivered by people who have the three Chypt Dension Fund have sufficient expertise to be able to evaluate and challenge the advice they receive, ensure their decisions are robust and well based, and manage any potential conflicts of interest.

 5. Assist in providing an early warning of possible malpractice and reduce risk.

Risk	Risk Overview (this will happen)	Risk Description (if this happens)	Strategic objectives at risk	Current Impact	Current Curr Likelihood Ris	nt Internal controls in place	Target Impact	Target Likelihood	Target Risk	Meets target?	Date Not Met Target	Expected Back on	Further Action and Owner	Risk Manager	Next review	Last Updated
1	Losses or other determintal impact on the Fund or its stakeholders	Risk is not identified and/or appropriately considered (recognishing that many risks can be identified but not managed to any degree of certainty)	(see key)	(see key) Marginal	(see key) Stat	1 - Risk policy in place 2 - Risk register in place and key risks/movements considered quarterly and reported to each PFC 3 - Advisory panel meets at least quarterly discussing changing environment etc 4 - Fundamental review of risk register annually 5 - TPR Code Compliance review completed annually 6 - Annual internal and external audit reviews 7 - Breaches procedure lable assessits in item!fvin key risks	(see key)	(see key)	Status	©	From	Target	None	CPFM	28/02/2020	
2	Inappropriate or no decisions are made	Governance (particularly at PFC) is poor including due to: is poor including due to: short appointments - poor knowledge and advice - poor engagement /preparation / - poor oversight	G1/G2/G3/ G4/G5/G6/ G7	Negligible	Significant	1 - Independent advisor focussing on governance including annual report considering structure, behaviour and knowledge 2 - Oversight by Local Pension Board 3 - Annual check against TPR Code 4 - Training Pelois, Pikan and monitoring in place for PC and PB 5 - Training Needs self assessment carried out (January 2018) and training programme reviewed based on results 5 - There is a range of professional advisors covering all Fund responsibilities guiding the PC, PB and officers in their responsibilities 6 - Induction training programme in place for new Committee members which covers CIPFA Knowledge and Skills requirements and can be delivered quickly. 7 - Terms of reference for the Committee in the Constitution allows for members to be on the Committee for between 4-6 years but they can be responsible.	Negligible	Low		Current likelihood 1 too high	03/06/2019	Mar 2020	Training plan for new committee members to be delivered (in progress) (PL) 2 - Further self assessment of training needs to be carried out (PL)	СРҒМ	28/02/2020	06/11/2019
3	Our legal fiduciary responsibilities are not met	Decisions, particularly at PFC level, are influenced by conflicts of interest and herefore may not be in the best interest of fund members and employers	G1/G2/G4/ G6/T2	Negligible	Very Low	1 - Conflicts of Interest policy focused on fiduciary responsibility required for advisor focusion of a reviewed control and soft of consisting on government including annual report of control and proper control and prope	Negligible	Very Low		©				СРҒМ	28/02/2020	06/11/2019
4	Appropriate objectives are not agreed or monitored - internal factors	Policies not in place or not being monitored	G2 / G7	Negligible	Very Low	1- Range of policies in place and all reviewed at least every three years 2 - Review of policy dates included in business plan 3 - Monitoring of all objectives at least annually (work in progress) 4 - Policies strulate how monitoring is carried out and frequency 5 - Business plan in place and regularly monitored	Negligible	Unlikely		Current likelihood 1 too high	01/07/2016	Jan 2020	1- Ensure work relating to annual monitoring is completed and included in PFC papers (PL)	Dep. Head of CPF	28/02/2020	06/11/2019
5	The Fund's objectives/legal responsibilities are not met or are compromised - external factors	Externally led influence and change such scheme change, national reorganisation and asset pooling	G1/G4/G6/ G7	Critical	Very High	1 - Continued discussions at AP, PFC and PB regarding this risk 2 - Involvement of CEO / links to WLGA and WG 3 - Fund's consultants involved at national level/regularly reporting by the consultants involved at national level/regularly reporting 4 - Key areas of potentiads change and expected is identified as part of business plan (ensuring origing monitoring) 6 - Officers on Wales Pool OWG 7 - Ongoing monitoring of cybercrime risk by AP	: Marginal	Low		Current impact 1 too high Current likelihood 2 too high	28/02/2017	Mar 2020	Regular ongoing monitoring by AP to consider if any action is necessary around asset pooling, cost cap and McCloud judgement (PL) Samure Board requests to JGC/OWG are responded to (PL) Samure Board responded to (PL) Samure Board responded to (PL) Samure Board responded to (PL)	СРҒМ	28/02/2020	06/11/2019
6	Services are not being delivered to meet legal and policy objectives	Insufficient staff numbers (e.g., sickness, resignation, retirement, unable to recruit) - current issues include age profile, implementation of asset pools and local authority pay grades.	T1	Marginal	Low	1 - 2018/19 business plan includes workforce matters 2 - Review of admin structure in 2015/16 3 - Finance team restrouture commenced (2017/18) 4 - Quarterly update reports consider resourcing matters 5 - Advison/ Panel provide back up when required 6 - Additional resources, such as outsourcing, considered as part of business plan 7 - Staff reviews implemented and micrat vacant positions now recruited to (admin and finance)	Negligible	Very Low		Current impact 1 too high Current likelihood 1 too high	01/07/2016	Feb 2020	1 - Recruit to vacant governance and business role (PL) 2 - Ongoing consideration of succession planning (PL) 3 - Continue training of new and newly promoted staff (PL)	СРҒМ	28/02/2020	06/11/2019
7	Legal requirements and/or guidance are not complied with	Those tasked with managing the Fund are not appropriately trained or do not understand their responsibilities (including recording and reporting breaches)	G3/G6/T1/ T2/B1/B2	Negligible	Very Low	1 - TPR Code Compliance review completed annually 2 - Annual internal and external audit reviews 3 - Breaches procedure also assists in identifying non-compliance areas (relevant individuals provided with a copy and training provided) 4 - Training policy in pixee (trudiamental to understanding legal) 5 - Use of nationally developed administration system 6 - Documented processes and procedures 7 - Strategies and policies often included statements or measures around legal requirements/guidenee 8 - Wide range of advisers and AP in place 9 - Independent adviser in place including annual report which will highlight concerns 10 - Outstanding actions relating to TPR Code reviewed regularly	Negligible	Very Low		©			1 - Further documented processes (as part of TPR compliance) e.g. contribution payment failure (DF)	СРҒМ	28/02/2020	06/11/2019