

Item: 16

Policy and Resources Committee: 16 June 2026.

Performance Monitoring – Chief Executive’s Service.

Report by Chief Executive.

1. Overview

- 1.1. This report presents performance data for the Chief Executive’s Service for the six-month period 1 October 2025 to 31 March 2026, for members’ information.
- 1.2. The Council Plan 2023-28, approved in March 2023, outlines the Council’s priorities for the five-year period of the plan. It describes what the Council has planned to do to address these priorities, and how success is measured.
- 1.3. The Delivery Plan to support the Council Plan contains a number of priority actions listed to indicate the work which will be undertaken to achieve identified outcomes.
- 1.4. The Council Plan 2023-28 provides that each directorate will have a delivery plan describing the priorities that they will deliver. The Directorate Delivery Plan for Strategy, Performance and Business Solutions was approved in December 2023.
- 1.5. The Council’s Risk Management Policy and Strategy requires that all directorates maintain a register of risks that are inherent in their activities and the services they provide. The risk register in respect of Strategy, Performance and Business Solutions was approved in December 2023.
- 1.6. In terms of the Council’s Strategic Planning and Performance Management Framework, performance in respect of the Directorate Delivery Plan, performance indicators and complaints and compliments are reported to the relevant committee on a six-monthly basis, in June and November.
- 1.7. Annexes 1 and 2 provide the six-monthly updates in respect of the Strategy, Performance and Business Solutions directorate delivery plan which relate to the Chief Executive’s Service, together with relevant performance indicators.
- 1.8. Annex 3 sets out the revised Chief Executive’s Service risk register for consideration.

- 1.9. Section 4 below sets out more detail on complaints and compliments received by the Chief Executive's Service.
- 1.10. Following the restructure approved by the Council on 7 May 2025, this performance report relates to the actions in the Strategy, Performance and Business Solutions Directorate Delivery Plan which pertain to the functional areas within the Chief Executive's Service, until such time as a Chief Executive's Service Delivery Plan is approved.

2. Recommendations

- 2.1. It is recommended that members of the Committee:
 - i. Note the performance of the Chief Executive's Service for the reporting period 1 October 2025 to 31 March 2026, in respect of service priorities and performance indicators, as set out in Annexes 1 and 2 respectively to this report.
 - ii. Agree the amendments proposed to the actions referred to in section 3.2 of this report.
 - iii. Note the complaints and compliments made to the Chief Executive's Service in the 6-month period 1 October 2025 to 31 March 2026, and for the two preceding six-month periods, as set out in section 4 of this report.
 - iv. Approve the Risk Register, attached as Annex 3 to this report.

3. Directorate Delivery Plan Performance Monitoring

- 3.1. The Directorate Delivery Plan progress report, attached as Annex 1 to this report, provides the detail of the agreed directorate priorities, which relate to the Chief Executive's Service, as expressed in the Strategy, Performance and Business Solutions Directorate Delivery Plan 2023 – 2028.
- 3.2. Set out below are those Directorate Delivery Plan actions assessed as Blue within Annex 1, namely those which have been progressed to completion and are now being recommended for removal from the Directorate Delivery Plan.
 - i. SPBS DDP 11b External communication.
 - ii. SPBS DDP 12b Internal communication.
 - iii. SPBS DDP 14b Supporting local business through procurement.

4. Directorate Performance Indicators

- 4.1. Directorate performance indicators provide the mechanism through which the performance of aspects of the services provided year on year are monitored. The monitoring report for the Chief Executive’s Service is attached as Annex 2.
- 4.2. In February 2024, the Corporate Leadership Team agreed to start monitoring the Cross Council Generic Performance Indicators on a quarterly basis but to remain reporting to committee on a six-monthly basis.

5. Directorate Complaints and Compliments

- 5.1. Table 1 below sets out the complaints and compliments made to the Chief Executive’s Service in the 6-month period 1 October 2025 to 31 March 2026, and for the two preceding six-month periods.

Table 1.	Six months ending 31 March 2025.	Six months ending 30 September 2025.	Six months ending 31 March 2026.	Totals.
Complaints.	1	0	0	1
Compliments.	4	0	2	6

- 5.2. When considering the raw data within Table 1 above, it should be noted that the Council has adopted a policy of encouraging staff to record all complaints against the Council through the Complaints Handling Procedure. This includes complaints that are quickly and satisfactorily resolved by the frontline service, thereby enabling the Council to identify any trends that would help to improve the service. As a result, the number of complaints captured by the procedure may increase and that does not necessarily reflect an increase in the number of people contacting the service to express dissatisfaction with the Council.
- 5.3. As the numbers of complaints remain low, no particular trends or common themes have been identified.

For Further Information please contact:

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Implications of Report

1. **Financial:** None arising directly from this report.
2. **Legal:** None arising directly from this report.
3. **Corporate Governance:** Not applicable.
4. **Human Resources:** Not applicable.
5. **Equalities:** An Equality Impact Assessment is not required for performance monitoring.
6. **Island Communities Impact:** An Island Communities Impact Assessment is not required for performance monitoring.
7. **Links to Council Plan:** The proposals in this report support and contribute to improved outcomes for communities as outlined in the following Council Plan strategic priorities:
 - Growing our economy.
 - Strengthening our Communities.
 - Developing our Infrastructure.
 - Transforming our Council.
8. **Links to Local Outcomes Improvement Plan:** The proposals in this report support and contribute to improved outcomes for communities as outlined in the following Local Outcomes Improvement Plan priorities:
 - Cost of Living.
 - Sustainable Development.
 - Local Equality.
 - Improving Population Health.
9. **Environmental and Climate Risk:** Not applicable.
10. **Risk:** Not applicable.
11. **Procurement:** Not applicable.
12. **Health and Safety:** Not applicable.
13. **Property and Assets:** Not applicable.
14. **Information Technology:** Not applicable.
15. **Cost of Living:** Not applicable.

List of Background Papers

Council Plan 2023-28.

Council Delivery Plan 2023-28.

Strategy, Performance and Business Solutions – Directorate Delivery Plan 2023-28.

Annexes

Annex 1 – Directorate Delivery Plan Actions.


Annex 2 – Performance Indicators.


Annex 3 – Risk Register.


Chief Executive's Service Directorate Delivery Plan 2023-28


Progress against SPBS Directorate Delivery Plan 2023-28 actions at 31 March 2026





Title	Description	Intended Outcome	BRAG	Start Date	Target Date
SPBS DDP 02 Alternative models of Governance and constitutional reform.	Progress the constitutional reform project through the approved four stage approach. This will include ensuring we are utilising legislation to its fullest, for example the Islands (Scotland) Act 2018 and exploring the viability of alternative models of governance.	To progress constitutional reform with the leadership and strategic oversight of the Constitutional Reform Consultative Group.	GREEN 	05-Mar-2024	31-Mar-2028
Lead	Comment				
Gavin Mitchell	BRAG status at 30 September 2025: Green The Council is in active dialogue with NHS Orkney, the Integration Joint Board and the Scottish Government on taking forward Public Service Reform in Orkney. Recruitment of a project manager and a project officer to support this work is currently being progressed.				

Title	Description	Intended Outcome	BRAG		Start Date	Target Date
SPBS DDP 11b External communication	Develop supporting external communications delivery plan	There is effective communication, which the public trust, respect and have confidence in.	BLUE		05-Mar-2024	31-Dec-2025
Lead	Comment					
Gavin Mitchell	BRAG status at 30 September 2025: Green An External Communications Delivery Plan was drafted and presented to Elected Members at the Communications and Engagement Consultative Group in November 2025 and final changes were made based on feedback received from Members. This action is now complete.					

Title	Description	Intended Outcome	BRAG		Start Date	Target Date
SPBS DDP 11c External communication	Implementing the key workstreams over the term of the delivery plan.	There is effective communication, which the public trust, respect and have confidence in.	GREEN		05-Mar-2024	31-Mar-2028
Lead	Comment					
Gavin Mitchell	BRAG status at 30 September 2025: Green Implementation of the key workstreams of the External Communications Delivery Plan has begun and is ongoing in line with agreed timelines within the Delivery Plan. A number of items are already underway and the progress of all actions will be presented to Elected Members in due course.					

Title	Description	Intended Outcome	BRAG	Start Date	Target Date
SPBS DDP 12b Internal communication	Develop supporting internal communications delivery plan.	Staff are informed and engaged by high quality internal communications which they trust, respect and confidence in.	BLUE 	05-Mar-2024	31-Dec-2025
Lead	Comment				
Gavin Mitchell	BRAG status at 30 September 2025: Green An Internal Communications Delivery Plan was drafted and presented to Elected Members at the Communications and Engagement Consultative Group in November 2025 and final changes were made based on feedback received from Members. This action is now complete.				

Title	Description	Intended Outcome	BRAG	Start Date	Target Date
SPBS DDP 12d Internal communication	Implementing the key delivery workstreams over the term of the plan.	Staff are informed and engaged by high quality internal communications which they trust, respect and confidence in.	GREEN 	05-Mar-2024	31-Mar-2028
Lead	Comment				
Gavin Mitchell	BRAG status at 30 September 2025: Green Implementation of the key workstreams of the Internal Communications Delivery Plan has begun and is ongoing in line with agreed timelines within the Delivery Plan. A number of items are already underway and the progress of all actions will be presented to Elected Members in due course.				





Title	Description	Intended Outcome	BRAG	Start Date	Target Date
SPBS DDP 14b Supporting local business through procurement.	Improve publicity of contract opportunities in an open and transparent manner.	Greater engagement by local businesses through effective procurement processes promoting decarbonisation.	BLUE 	05-Mar-2024	31-Mar-2026
Lead	Comment				
Gavin Mitchell	BRAG status at 30 September 2025: Green Procurement now has a front page facing section on the Council website. In addition, the Procurement pages on the website now contain a direct link to the Public Contracts Scotland advertising portal for greater accessibility to contract opportunities via the page. This action is now business as usual for the team and can be considered complete.				

Personnel key

Head of Corporate Governance – Gavin Mitchell

BRAG key

Action BRAG System

-  The agreed action is experiencing significant underperformance, with a medium to high risk of failure to meet its target
-  The agreed action is experiencing minor underperformance, with a low risk of failure to meet its target
-  The agreed action is likely to meet or exceed its target
-  The agreed action has been progressed to completion

Chief Executive's Service Performance Indicator Report

Service Performance Indicators at 31 March 2026

Annex 2



Performance Indicator													
CCG 01 – Sickness absence – The average number of working days per employee lost through sickness absence, expressed as a percentage of the number of working days available.													
Target	Actual	Intervention	RAG										
4%	2.35%	6.1%	GREEN	▶									
Comment													
Sickness absence remains low across the Chief Executive's Service.													
Trend Chart													
<p>The trend chart displays the percentage of sickness absence for two half-years. The y-axis ranges from 0% to 12% in 1% increments. A horizontal blue line represents the target at 4%. Two dark grey bars represent the actual values: 0.78% for H1 2025/26 and 2.35% for H2 2025/26. A legend indicates that dark grey bars represent 'Half Years' and the blue line represents 'Target (Half Years)'.</p> <table border="1"> <thead> <tr> <th>Half Year</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>H1 2025/26</td> <td>0.78%</td> <td>4%</td> </tr> <tr> <td>H2 2025/26</td> <td>2.35%</td> <td>4%</td> </tr> </tbody> </table>					Half Year	Actual	Target	H1 2025/26	0.78%	4%	H2 2025/26	2.35%	4%
Half Year	Actual	Target											
H1 2025/26	0.78%	4%											
H2 2025/26	2.35%	4%											

Performance Indicator

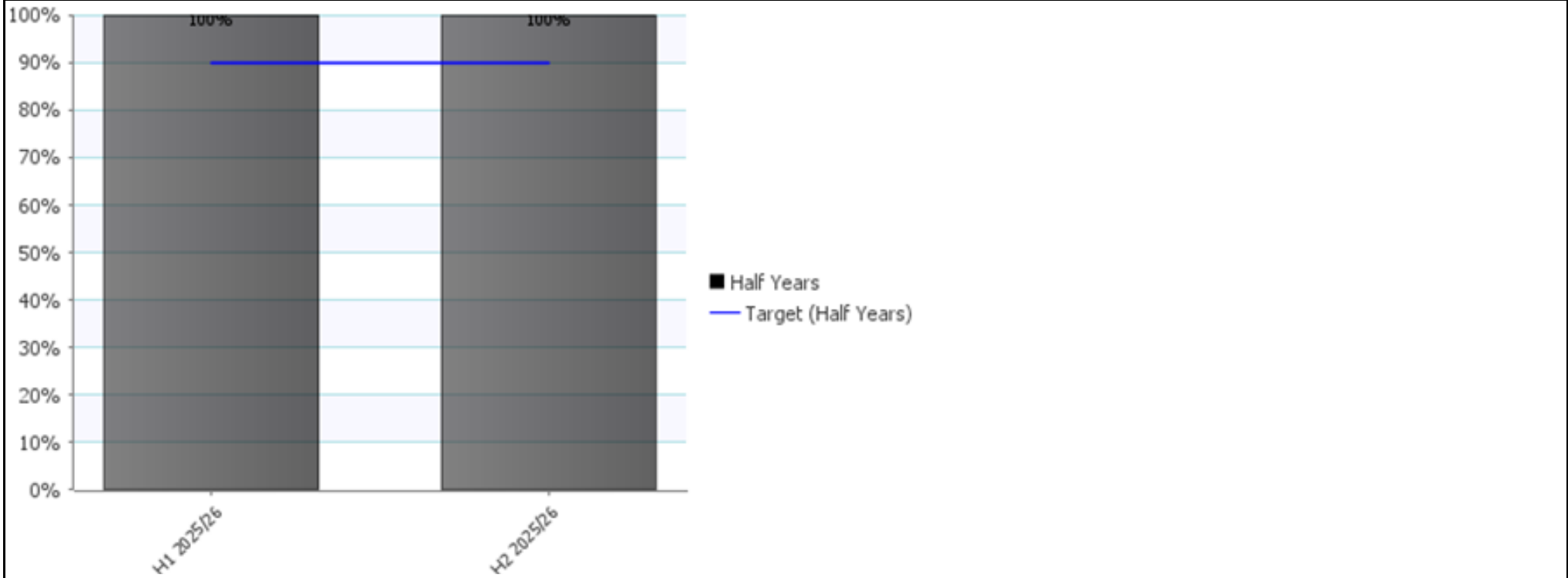
CCG 02 – Sickness absence – Of the staff who had frequent and/or long-term sickness absence (they activated the sickness absence triggers), the proportion of these where there was management intervention.


Target	Actual	Intervention	RAG	
90%	100%	79%	GREEN	▶

Comment

Management interventions were carried out in all cases where it was necessary.

Trend Chart



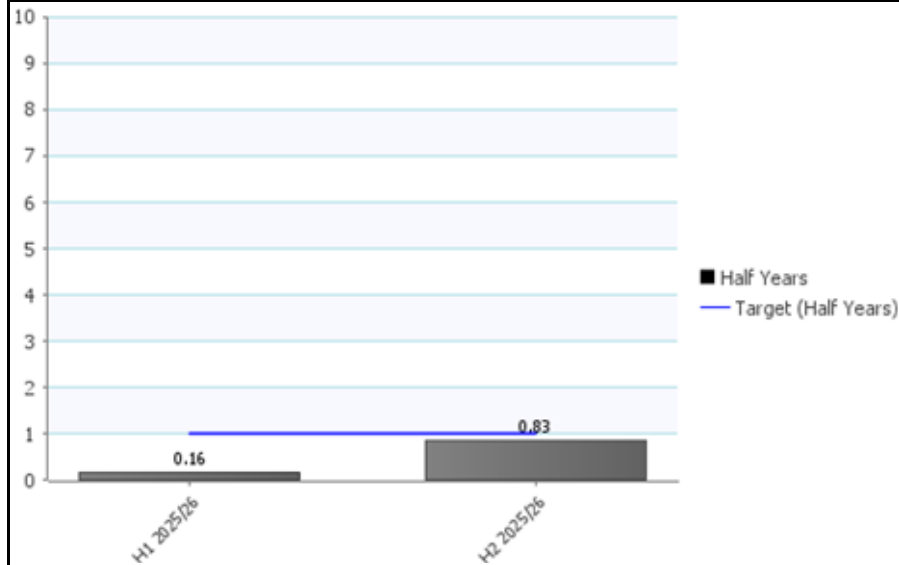
Performance Indicator				
CCG 03 – Staff accidents – The number of staff accidents within the service, per 30 staff per year.				
Target	Actual	Intervention	RAG	
1	0.83	2.1	GREEN	
Comment				
<p>Important context for interpretation of this data</p> <p>The following data relates to the Chief Executive’s Service under the new organisational structure. During the reporting period (April 2025 to March 2026), a significant organisational restructure resulted in substantial shifts in headcount across services. As workforce composition and service configuration have materially changed, reported rates and trends are not directly comparable with previous KPI data. Changes in reported accident rates are therefore not solely reflective of safety performance; workforce increases, reductions, and transfers have had a direct statistical impact. For these reasons, comparison with historic data would be misleading.</p> <p>In addition, previous data sets focused primarily on the most serious and significant accidents and incidents. As outlined in the Annual Health and Safety Report 2024 to 2025, substantial work has been undertaken to support services in understanding the importance of reporting less serious incidents and accidents, as well as near misses. This supports early intervention, learning, and prevention.</p> <p>Therefore the current indicator, “<i>Staff accidents – the number of staff accidents within the service, per 30 staff per year,</i>” is potentially misleading as it assumes that fewer reported accidents represent better safety performance. Under the current, improved reporting culture, this assumption no longer holds true.</p> <p>Safety & Resilience have now adopted a proactive, learning-focused approach, which actively encourages the reporting of near misses and lower-level incidents. Consequently, an increase in reported incidents is expected and should be viewed as evidence of greater transparency and a stronger safety culture, rather than a deterioration in safety performance.</p> <p>Accident numbers in isolation do not provide a meaningful measure of safety. The key indicator of good safety management is how effectively reported issues are investigated, addressed, and used to prevent recurrence.</p> <p>A more appropriate and meaningful safety objective is:</p>				

“No more than one RIDDOR-reportable incident per 30 employees per reporting period”.

This measure focuses on severity, as RIDDOR-reportable incidents meet a defined legal threshold for seriousness, including fractures, specified injuries, dangerous occurrences, and significant lost-time injuries.

For the Chief Executive’s Service, the RIDDOR accident rate per 30 staff for this period is 0, indicating no serious reportable incidents.

Trend Chart



Performance Indicator

CCG 04 – Budget control – The number of significant variances (priority actions) generated at subjective group level, as a proportion of cost centres held.

Target	Actual	Intervention	RAG	
15%	13%	31%	GREEN	▶

Comment

The reconfiguring of budgets to align with the Council's structure has led to an improved reporting position for the Chief Executive's Service.

Trend Chart



Performance Indicator

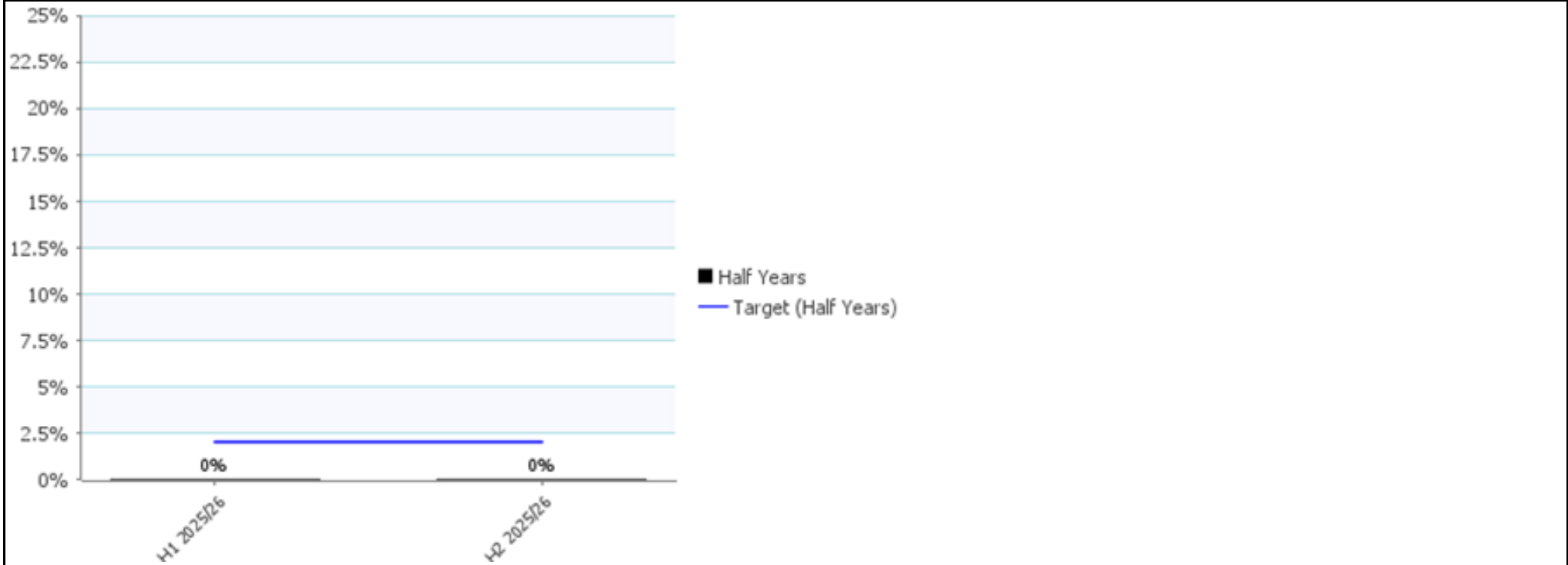
CCG 05 – Recruitment and retention – The number of advertised service staff vacancies still vacant after six months from the time of advert, as a proportion of total staff vacancies.

Target	Actual	Intervention	RAG	
2%	0%	4.1%	GREEN	▶

Comment

There were no vacancies remaining unfilled after 6 months of being advertised.

Trend Chart



Performance Indicator

CCG 06 – Recruitment and retention – The number of permanent service staff who leave the employment of Orkney Islands Council – but not through retirement or redundancy – as a proportion of all permanent service staff.

Target	Actual	Intervention	RAG	
5%	0%	10.1%	GREEN	▶

Comment

Turnover of staff within the Chief Executive's Service remains low.

Trend Chart



Performance Indicator

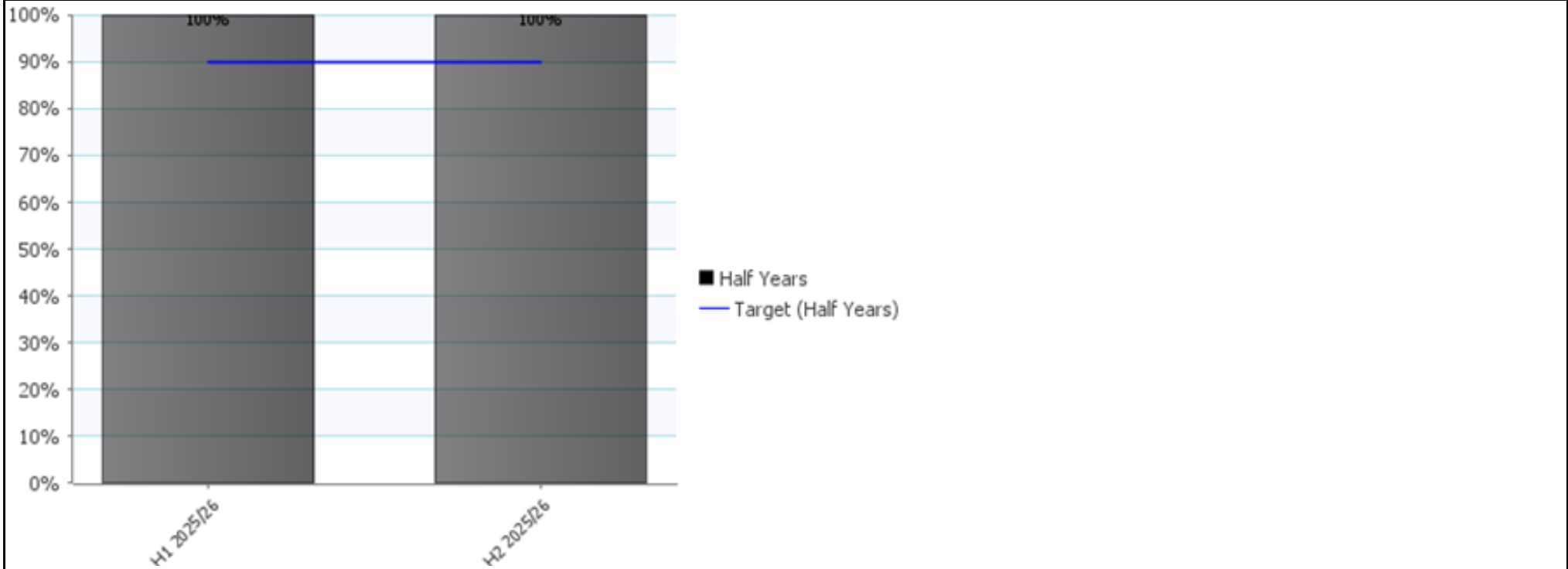
CCG 07 – Good Conversations – The number of staff who receive (at least) an annual face-to-face Good Conversations (GC) meeting, as a proportion of the total number of staff within the service.

Target	Actual	Intervention	RAG	
90%	100%	79%	GREEN	▶

Comment

Line managers continue to prioritise regular completion of annual Good Conversations.

Trend Chart



Performance Indicator

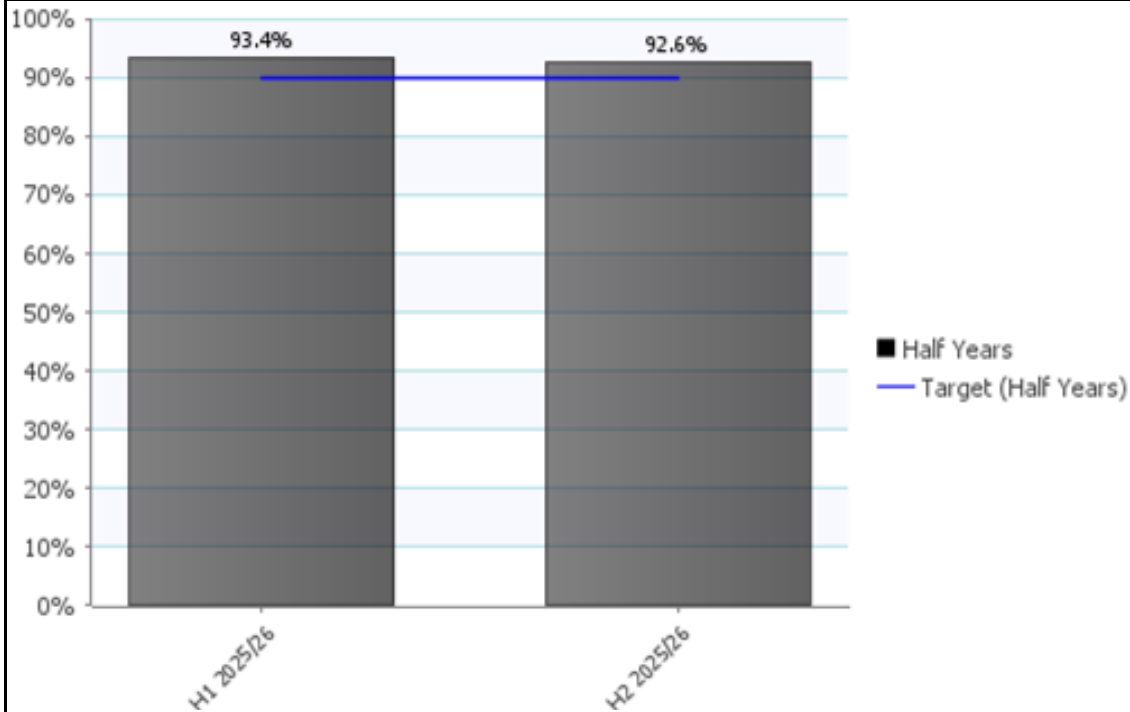
CCG 08 – Invoice payment – The number of invoices that were submitted accurately, and paid within 30 days of invoice date, as a proportion of the total number of invoices paid.

Target	Actual	Intervention	RAG	
90%	92.6%	79%	GREEN	▶

Comment

Payment of invoices is carried out timeously for the Chief Executive's Service.

Trend Chart



Performance Indicator

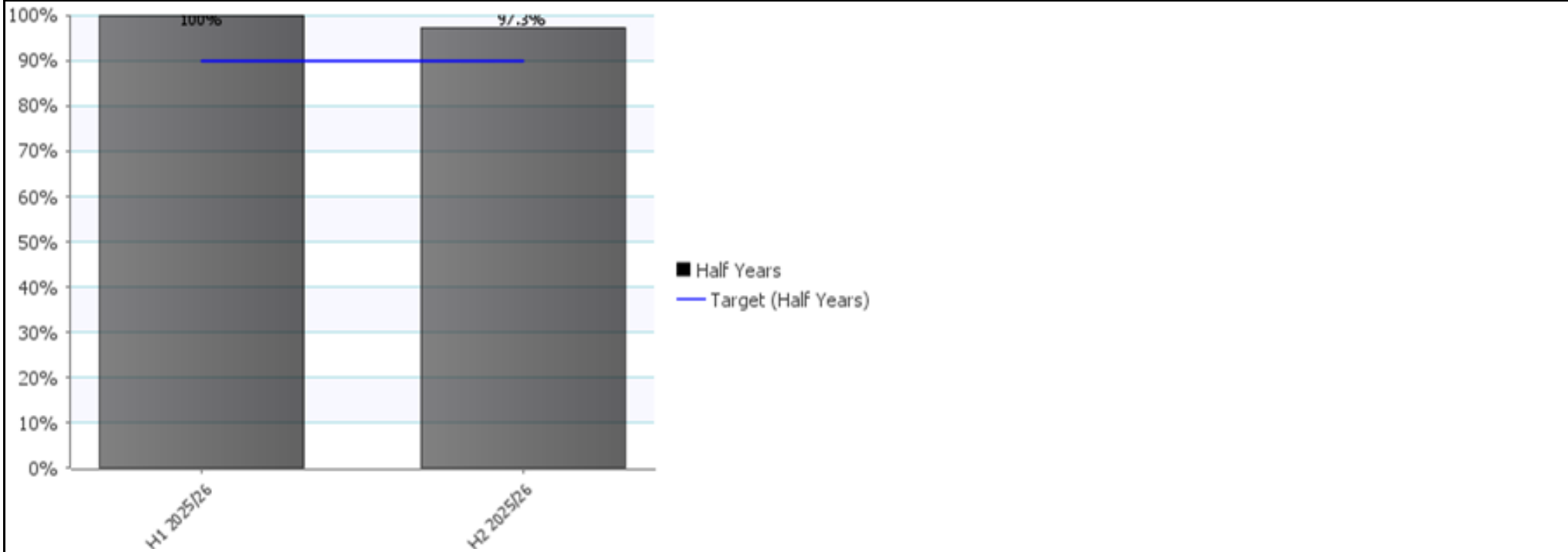
CCG 09 – Mandatory training – The number of staff who have completed all mandatory training courses, as a percentage of the total number of staff in the service.

Target	Actual	Intervention	RAG	
90%	97.3%	79%	GREEN	▶

Comment

Staff within the Chief Executive's Service continue to prioritise completion and refreshers of mandatory training.

Trend Chart



Performance Indicator																			
CE_PI_02 Percentage of surveys with a score of 8 or more (Internal Audit)																			
Target	Actual	Intervention	RAG																
90%	100%	75%	GREEN	▶															
Comment																			
All surveys returned had a score of 8 or over.																			
Trend Chart																			
<p>The trend chart displays performance data for four fiscal years: 2022/23, 2023/24, 2024/25, and 2025/26. The vertical axis represents the percentage of surveys with a score of 8 or more, ranging from 50% to 100% in 5% increments. The horizontal axis lists the fiscal years. A blue horizontal line indicates the target performance level at 90%. The actual performance for each year is represented by dark grey bars, all of which reach the 100% mark. A legend identifies the dark grey bars as 'Years' and the blue line as 'Target (Years)'.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Actual Performance (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2022/23</td> <td>100%</td> <td>90%</td> </tr> <tr> <td>2023/24</td> <td>100%</td> <td>90%</td> </tr> <tr> <td>2024/25</td> <td>100%</td> <td>90%</td> </tr> <tr> <td>2025/26</td> <td>100%</td> <td>90%</td> </tr> </tbody> </table>					Year	Actual Performance (%)	Target (%)	2022/23	100%	90%	2023/24	100%	90%	2024/25	100%	90%	2025/26	100%	90%
Year	Actual Performance (%)	Target (%)																	
2022/23	100%	90%																	
2023/24	100%	90%																	
2024/25	100%	90%																	
2025/26	100%	90%																	

Performance Indicator

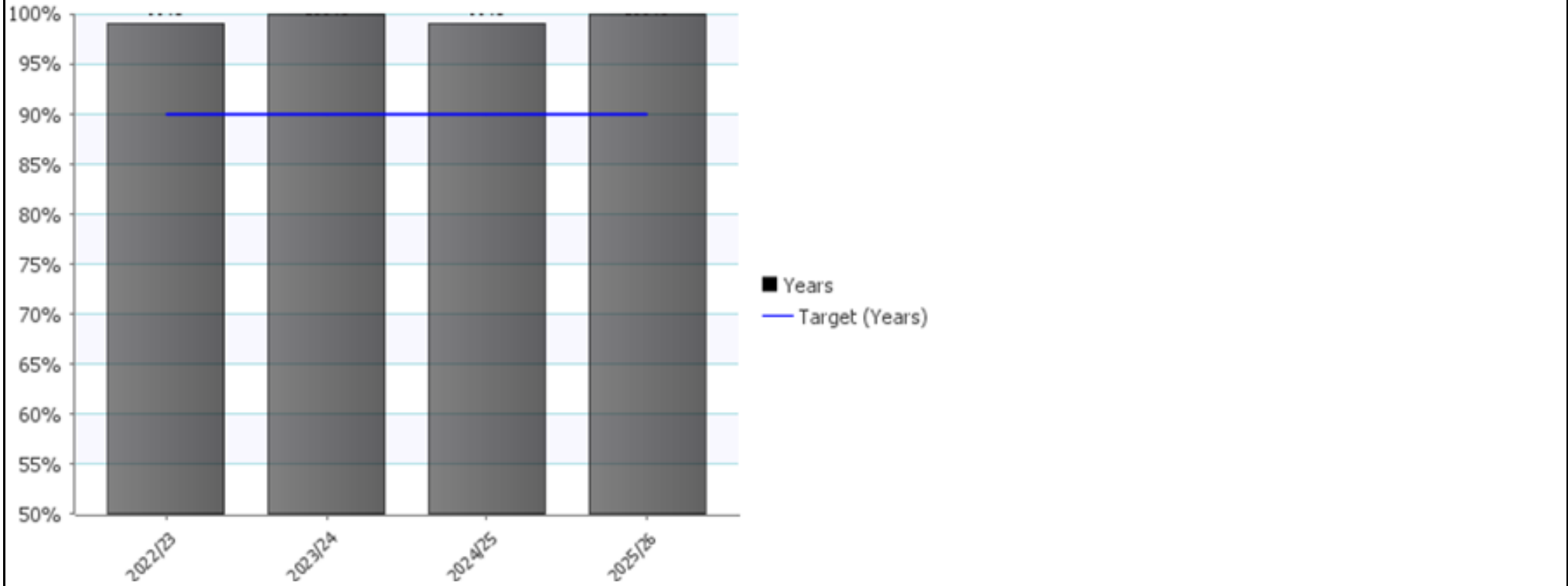
CE_PI_03 Percentage of recommendations accepted

Target	Actual	Intervention	RAG	
90%	100%	75%	GREEN	▶

Comment

All audit recommendations accepted by clients.

Trend Chart



Performance Indicator

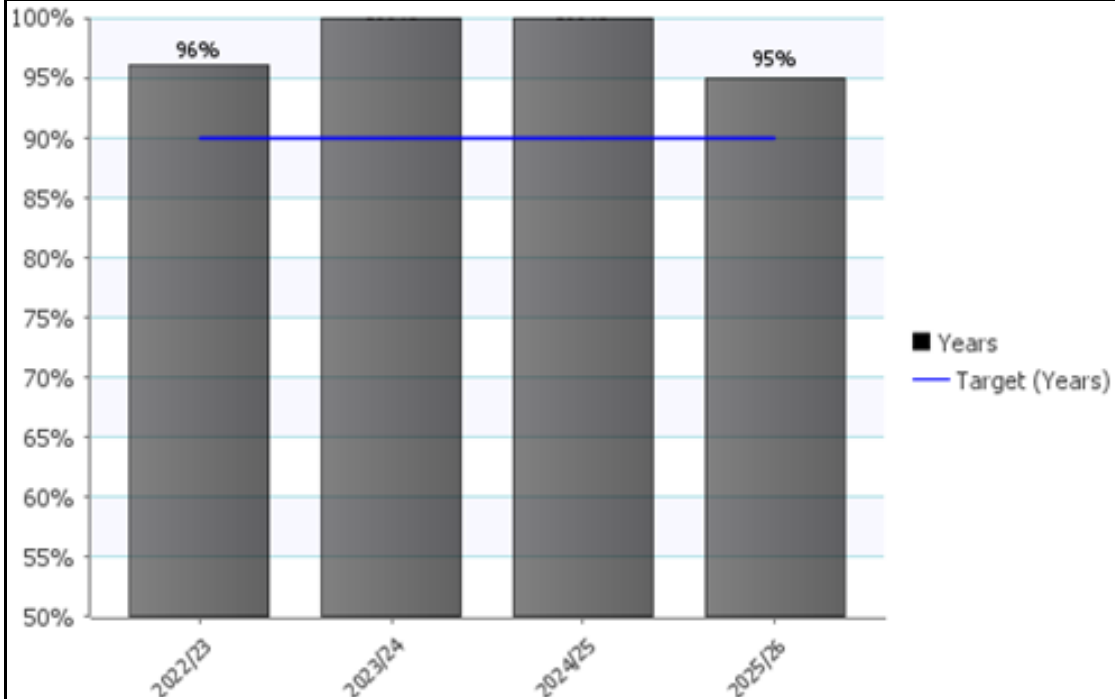
CE_PI_04 Percentage of draft reports issued within 10 days of fieldwork completion. (Internal Audit)

Target	Actual	Intervention	RAG	
90%	95%	75%	GREEN	▶

Comment

One of 20 draft reports was issued outwith 10 days.

Trend Chart



Performance Indicator

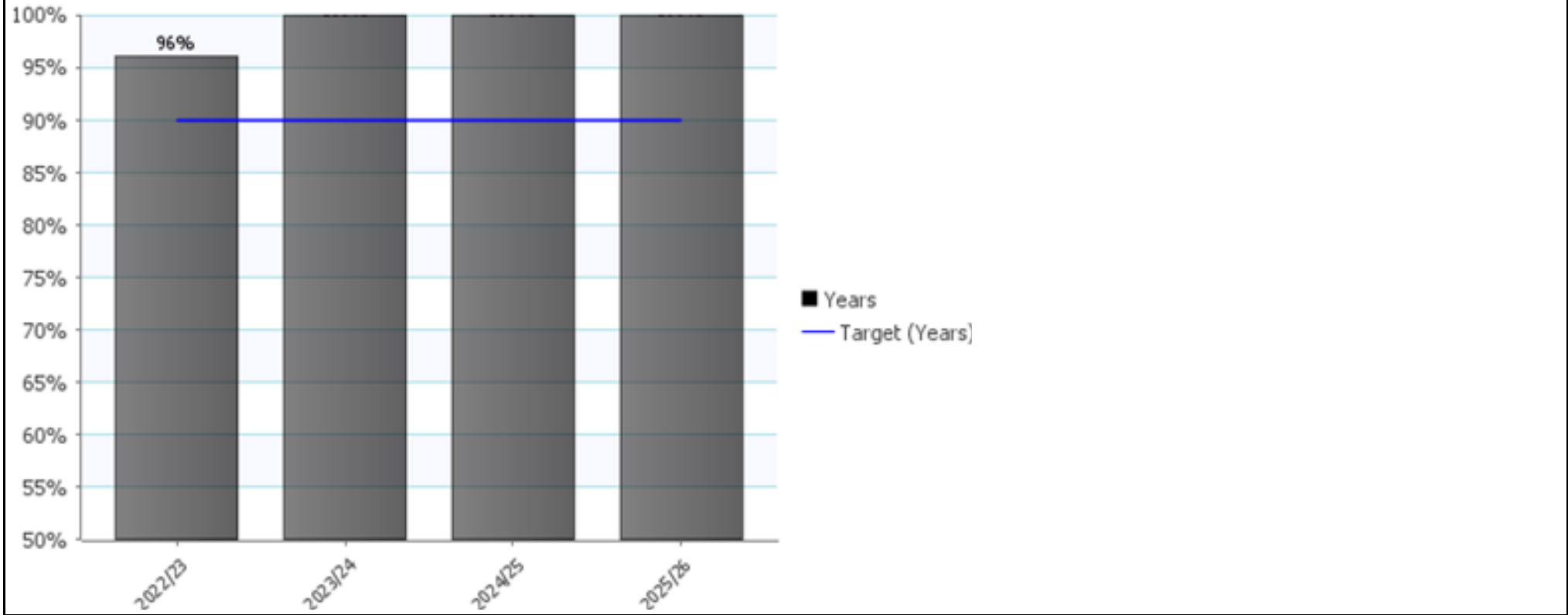
CE_PI_05 Percentage of final reports issued within 5 days of final comments received. (Internal Audit)

Target	Actual	Intervention	RAG	
90%	100%	75%	GREEN	▶

Comment


All final reports issued within 5 days.

Trend Chart



Performance Indicator

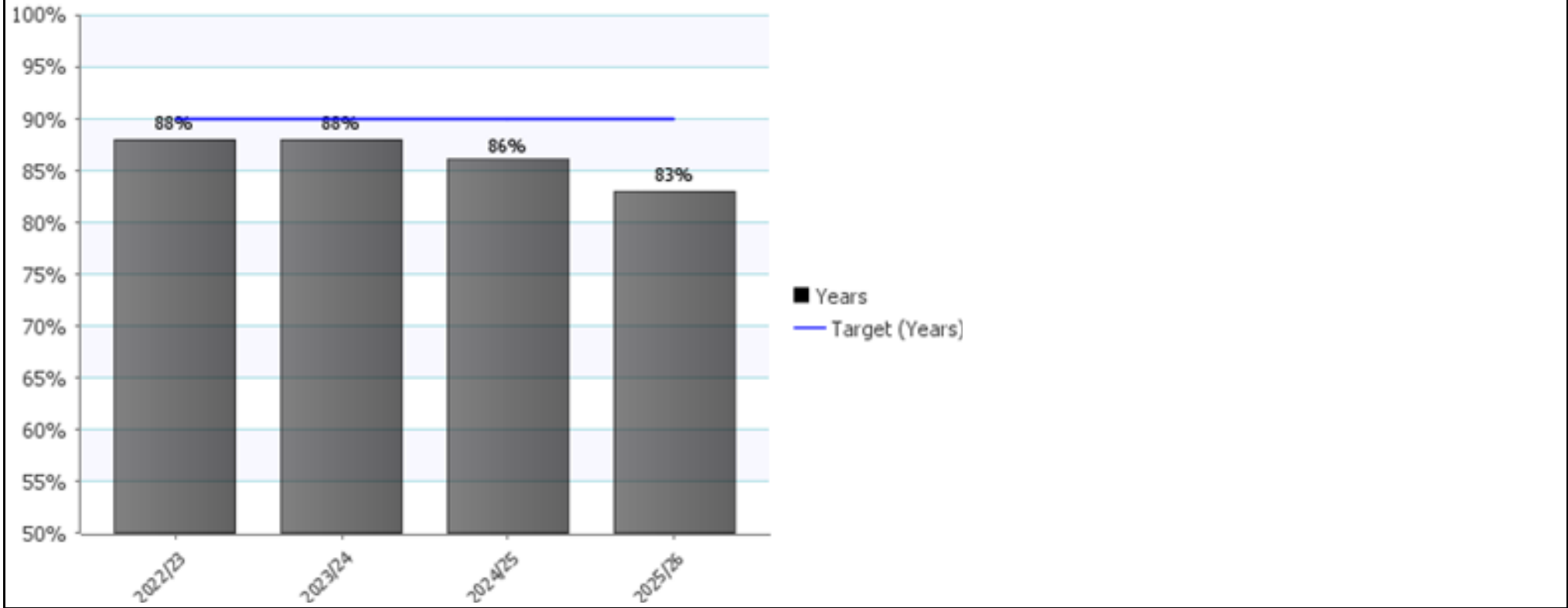
CE_PI_06 Percentage of audits completed in year compared to plan.

Target	Actual	Intervention	RAG	
90%	83%	75%	AMBER	

Comment

Five audits from the plan were carried forward to 2026/27 at the request of Directors or Heads of Service.

Trend Chart



Performance Indicator RAG System



The performance indicator is experiencing significant underperformance, with a medium to high risk of failure to meet its target



The performance indicator is experiencing minor underperformance, with a low risk of failure to meet its target



The performance indicator is likely to meet or exceed its target

Chief Executive's Service Risk Register – December 2025

Strategic Risks

Cluster.	Risk Number.	Owner.
Financial.	1.	Head of Corporate Governance.
Governance.	5, 7.	Head of Corporate Governance.
Legislation.	6.	Head of Corporate Governance.
Communication.	2.	Head of Corporate Governance.
Reputational.	3.	Head of Corporate Governance.
Reputational / Physical.	8.	Head of Corporate Governance.
Legislative / Governance.	4.	Head of Corporate Governance.

Risk by Rating

Risk Rating.	Risk.	Owner.	Cluster.	Risk number.
20.	Finance and budget cuts.	Head of Corporate Governance.	Financial.	1.
12.	Business continuity.	Head of Corporate Governance.	Governance.	5.
12.	Climate change.	Head of Corporate Governance.	Reputational / Physical.	8.
9.	Internal and external Communications.	Head of Corporate Governance.	Communication.	2.
9.	Failure to comply with statutory timings.	Head of Corporate Governance.	Legislative / Governance.	4.
9.	Procurement.	Head of Corporate Governance.	Governance.	7.
9.	Breach of GDPR.	Head of Corporate Governance.	Legislation.	6.
9.	Failure to meet customer and stakeholder expectations.	Head of Corporate Governance.	Reputational.	3.

Risk Matrix

			IMPACT				
			1.	2.	3.	4.	5.
			Insignificant	Minor	Moderate	Major	Severe
LIKELIHOOD	5.	Almost Certain.	Medium	Medium	High	High	Extreme
	4.	Likely.	Medium	Medium	Medium	High	Extreme
	3.	Possible.	Low	Medium	Medium	High	High
	2.	Unlikely.	Low	Low	Medium	Medium	High
	1.	Rare.	Low	Low	Low	Medium	High

Risk Title: 01 – Finance and Budget Cuts

Likelihood.	5	Impact.	4	RAG.	High	Current Risk Score.	20	Target Risk Score.	9
Owner	Head of Corporate Governance					Cluster	Financial		

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Small size of teams means a budget cut could have a high impact as budgets are mainly staff costs.</p> <p>Services may have to be cut to meet budget.</p> <p>Core back-office functions may have to be cut to protect front line services.</p>	<p>Government cuts in budgets reducing Council budget and subsequently team budgets.</p>	<p>Failure to deliver core and statutory services of the Chief Executive's Service.</p> <p>Failure to support service areas to deliver core statutory services.</p>	<p>Tolerate.</p>	<p>01.01 - Review of overheads although this is limited due to low level of costs relating to overheads.</p> <p>01.02 – Service analysis to identify areas for efficiencies and a review of services to ensure staff resource is focussed on essential functions.</p>

Risk Title:02 – Internal and External Communication

Likelihood.	3	Impact.	3	RAG.	Medium	Current Risk Score.	9	Target Risk Score.	4
Owner	Head of Corporate Governance						Cluster	Communication	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Poor communication leads to an unawareness of Council priorities and intended outcomes.</p> <p>Staff, customers, and stakeholders must be appropriately engaged about efficiency measures and service changes and proactively informed, so expectations are realistic.</p> <p>We fail to manage how we respond to social media and to take advantage of potential benefits.</p>	<p>Staff, customers, and stakeholders do not understand the reasons for the changes.</p> <p>Good ideas are not collected from effective communication and engagement.</p> <p>Staff are not given the opportunity to contribute to corporate organisational development and become disengaged.</p> <p>There is not an effective management of social media or use of it as an effective engagement tool.</p>	<p>Poor morale, staff disengagement.</p> <p>Higher turnover of staff.</p> <p>Reputational risk – increase in complaints and adverse publicity.</p> <p>Misplaced criticism.</p> <p>Lack of understanding of what the Service / Council wants to achieve.</p> <p>Increased cost to the Council if work has to be reformed.</p> <p>Good ideas, lost.</p>	Treat.	<p>02.01 – Leadership development and staff training.</p> <p>02.02 – Internal and External Communications delivery plans developed and implemented.</p> <p>02.03 – Regular communication with customers and stakeholders.</p> <p>02.04 - Actively seek customer / stakeholder feedback.</p>

Risk Title: 03 – Failure to Meet Customer and Stakeholder Requirements

Likelihood.	3	Impact.	3	RAG.	Medium	Current Risk Score.	9	Target Risk Score.	4
Owner	Head of Corporate Governance						Cluster	Reputational	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Customer and stakeholders' expectations not clearly defined or agreed.	Service delivery standards not met. Customer / stakeholder complaints.	Reputational risk – increase in complaints and adverse publicity. Increased cost to the Council if work has to be reformed.	Treat.	03.01 – Ensure appropriate staff training is in place and undertaken. 03.02 - Regular communication with customers and stakeholders to articulate and manage expectations. 03.03 – Actively seek customer / stakeholder feedback and identify any improvements required. 03.04 - Agreed brief / terms of reference / service standards with full understanding of customer and stakeholder requirements. 03.05 – Fill vacant posts timeously where appropriate to ensure where possible services are operating at optimum staff complement.

Risk Title: 04 – Failure to Comply with Statutory Timings / Agreed Timescales

Likelihood.	3	Impact.	3	RAG.	Medium	Current Risk Score.	9	Target Risk Score.	9
Owner	Head of Corporate Governance						Cluster	Legislative / Governance	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Volume of work, competing priorities, lack of staffing could lead to not adhering to Service Level Agreements, service standards or statutory timings and not adhering to agreed timescales for specific service processes.</p> <p>This may additionally lead to poor assessment / audits.</p>	<p>Failure to meet statutory timings and requirements of legislation.</p> <p>Failure to adhere to agreed timings for staffing policies – e.g., disciplinary etc.</p> <p>Failure to adhere to timings for court cases, employment tribunals, social work orders etc.</p> <p>Failure to meet deadlines for support to services including project delivery.</p>	<p>Reputational risk.</p> <p>Lost opportunities.</p> <p>Possible financial implications.</p>	Treat.	<p>04.01 - Ensuring staff are familiar with and adhere to the requirements and relevant standards / timescales.</p> <p>04.02 - Staff awareness of critical timings across service and wider Council services.</p> <p>04.03 - Managers supporting staff to prioritise and diarise timings to ensure adherence.</p>

Risk Title: 05 – Business Continuity

Likelihood.	3	Impact.	4	RAG.	High	Current Risk Score.	12	Target Risk Score.	9
Owner	Head of Corporate Governance						Cluster	Governance	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
An event or incident leads to the inability of teams to carry out their core functions.	Pandemic, IT incident, power outage, fire, flood, act of aggression etc.	Backlog of work and failing to meet deadlines. Loss of critical documents.	Treat.	05.01 – Service ensures that service business continuity plans are in place. 05.02 - Remote working possible at home on laptops. 05.03 - Ensuring documents are stored in the cloud using the Microsoft 365 stack (OneDrive, Teams, and SharePoint).

Risk Title: 06 – Breach of General Data Protection Regulation (GDPR)

Likelihood.	3	Impact.	3	RAG.	Medium	Current Risk Score.	9	Target Risk Score.	9
Owner	Head of Corporate Governance						Cluster	Legislation	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Personal information could be processed for Planning Committee, Local Review Body, staff and education appeals, Licensing, Complaints, Freedom of Information requests.	Sensitive information is leaked or goes to wrong recipients.	Monetary penalty from the Information Commissioner's Office. Reputational Risk to Council.	Treat.	06.01 - Training and awareness of General Data Protection Regulation. 06.02 - Handling as little personal information as required. 06.03 - Secure disposal of personal information in accordance with policy. 06.04 - Strong IT and document security. 06.05 - Redacting of personal info. 06.06 – Use of Electronic Document and Records Management System (EDRMS) to support secure and effective handling of information.

Risk Title: 07 – Procurement

Likelihood.	3	Impact.	3	RAG.	Medium	Current Risk Score.	9	Target Risk Score.	8
Owner	Head of Corporate Governance						Cluster	Governance	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
Procurement Legislation, Policy and Procedures not adhered.	Unsuccessful bidders lodging a legal challenge.	Reputational damage. Interruption of Council service delivery. Financial awards where a contract award is overturned. Staff resources. Low staff morale. Increased scrutiny and pressure on staff.	Treat.	07.01 - Training and awareness raising. 07.02 - Procurement team suitably resourced including additional resource to accompany significant capital projects where applicable. 07.03 – Contract Standing Orders updated in March 2026.

Risk Title: 08 – Climate Change

Likelihood.	3	Impact.	4	RAG.	High	Current Risk Score.	12	Target Risk Score.	8
Owner	Head of Corporate Governance						Cluster	Reputational / Physical	

Vulnerability.	Trigger.	Consequences.	Options.	Mitigating Actions.
<p>Council services disrupted due to infrastructure or travel impacted by extreme and unpredictable weather.</p> <p>Communities facing increased frequency of coastal flooding and increased volumes of surface water.</p> <p>Local economic production affected by climate impacts.</p> <p>Transition to support climate response initiatives require significant capital investment.</p>	<p>Extreme and unpredictable weather (lightning, winds, tides) causes increased damage or wear & tear to Council infrastructure disrupting service delivery.</p> <p>Increased severity of coastal flooding leads to damage of property in coastal communities, while surface water levels impact transport routes and agricultural activities in the community.</p> <p>Surface water and other climate impacts affect normal activity cycles impacting food production including agriculture.</p> <p>Move to Net Zero requires capital funding and resourcing beyond Council capacity.</p>	<p>Weakened or disrupted delivery of Council services.</p> <p>Reduced economic output in Orkney requires increased Council interventions.</p> <p>Failure to meet targets or reductions in funding of other Council priorities to support initiatives.</p>	Treat.	<p>08.01 – Business continuity plans in place.</p> <p>08.02 – Staff awareness of Council Plan priorities, targets, and milestones.</p> <p>08.03 – Staff awareness of appropriate plans for example Flood Risk Management Plan, Coastal Change Adaption Plan.</p> <p>08.04 – Staff participation in resilience reviews and response to incidents through Incident Management process.</p> <p>08.05 – Staff participation in cross-council Officer Working Group and recognition that Climate Change impacts all Directorates and Services.</p> <p>08.06 – Exploration of potential sources of external funding for responding to climate change.</p>