CR = Corporate Risk

Risk No.	Risk Description	Triggers	Result	Probability	Impact	Score	Owner	Contact	Key Controls	Probability	Impact	Residual Score	Description	Action Owner	Target Date	Revised Target Date	Action Status	Acronyms
									Details of Risk — **Inherent Risk** — **Residual Risk** — **Actions**								
1 (CR)	Failure of the Council's arrangements for safeguarding vulnerable children and adults	**Children's Social Care:** 1. Children's social care case loads reach unsustainable levels as indicated by the unit case load tool 2. More than 25% of children whose referral to social care occurred within 12 months of a previous referral 3. Serious case review is triggered **Adult Social Care (Inc. OPMH)** 1. Care homes, supported living or home care agency suspended due to a SOVA (safeguarding of vulnerable adults) investigation 2. Serious case review is triggered 3. Outcomes of reported safeguarding concerns reveals negative practice	1. Harm to child or an adult receiving services from the Council 2. Reputational damage to the Council	5	5	25	SD Adult Social Care/ SD Children's Social Care/SD Older People and Mental Health	HoS Safeguarding and Standards / HoS Adult Social Care Practice and Safeguarding	1. Multi-agency Safeguarding Boards provides multi agency focus on safeguarding priorities and provides systematic review of safeguarding activity 2. Skilled and experienced safeguarding leads and their managers. 3. Comprehensive and robust safeguarding training, ongoing development policies and opportunities for CCC staff, and regular supervisions monitor and instil safeguarding procedures and practice. 4. Continuous process of updating practice and procedures, linking to local and national trends, including learning from local and national reviews such as Serious Case Reviews. 5. Multi Agency Safeguarding Hub (MASH) supports timely, effective and comprehensive communication and decisions on how best to approach specific safeguarding situation between partners. 6. Robust process of internal Quality Assurance (QA framework) including case auditing and monitoring of performance 7. Whistleblowing policy, robust Local Authority Designated Officer (LADO) arrangements (including holding information from HR) and complaints process inform practice 8. Regular monitoring of social care providers and information sharing meetings with other local organisations, including the Care Quality Commission 9. Joint protocols, practice standards and QA ensure appropriate joint management and case transfer between Children's Social Care and Enhanced and Preventative Services 10. Coordinated work between Police, County Council and other agencies to identify child sexual exploitation, including supporting children and young people transitions to adulthood, with the oversight of the LSCB 11. Audits, reviews and training provided to school staff, governors and settings. All schools must have child protection training every 3 years. Education CP Service supports schools and settings with safeguarding responsibilities.	3	5	15	1. Investigating referral arrangements from health to ensure most effective arrangements are in place to the MASH - proposals to be reviewed and next steps decided by CFA management team 2. Complete Children's Change Programme to introduce new integrated ways of working between social care and Early Help, and address high demand pressures.	HoS FREDt SD CSC	May-17 Dec-17		G G	
3 (CR)	Insufficient availability of care services at affordable rates	1. Average number of ASC attributable bed-day delays per month is above national average (aged 18+) as identified by CFA performance dashboard 2. Delayed transfers of care from hospital attributable to adult social care as identified by CFA performance dashboard 3. Home care pending list	1. Client dissatisfaction and increased risk of harm and hospital admission 2. Increase in delayed discharges from hospital 3. Reputational damage to the Council	5	4	20	SD Older People and Mental Health	HoS Procurement	1. Data regularly updated and monitored to inform service priorities and planning 2. Maintain an effective range of preventative services across all age groups and service user groups including adults and OP 3. Community resilience strategy details CCC vision for resilient communities 4. Directorate and CFA Performance Board monitors performance of service provision 5. Coordinate procurement with the CCG to better control costs and ensure sufficient capacity in market 6. Take flexible approach to managing costs of care 7. Market shaping strategy in place, including building and maintaining good relationships with providers, so we can support them if necessary	5	3	15	1. Retender the main home care contract to enable new models of care, working with CCG 2. To support home based services, reablement and its relationship with the intermediate tier is being reviewed and refined. To increase efficiency.	HoS Procurement HoS Serv Dev	Oct-17 Apr-17		G G	

#	Risk	Cause	Consequence	L	I	Score	Risk Owner		Controls / Mitigations	L	I	Score	Actions	Action Owner	Date		RAG
									8. Capacity Overview Dashboard in place to understand market position 9. Residential and Nursing Care Project has been established as part of the wider Older People's Accommodation Programme looking to increase the number of affordable care homes beds at scale and pace.								
4	Failure of provider organisations to attract or retain a sufficient workforce	1. Provider organisation report not having capacity to deliver services when we need them 2. Length of time services users wait for appropriate services 3. Care home providers reduce the numbers of nursing beds (due to difficulty recruiting qualified nurses) 4. Schools are unable to recruit sufficient high quality staff	1. Outcomes for children, families and adults are worse 2. Reputational damage to the Council 3. Reduction in quality of services 4. Reduced choice of provision close to peoples local community	5	4	20	SD Adult Social Care/SD Older People and Mental Health	HoS Procurement/ HoS Commissioning Enhanced Services	1. Support Home Care providers to develop recruitment and retention strategies 2. Workforce offer to the provider organisations based on the Skills for Care Learning and Development matrix. This includes Care Certificate, vocational qualifications (Level 2 - 5) and Social Care Commitment. 3. Assess impacts and risks to recruitment associated with managing down costs 4. Regular monitoring of provider staff members and vacancy levels of LD and LAC placements by Access to Resources Team 5. Home Care Development Manager in post who works with Homecare providers to develop workforce. 6. Access to Resources Team consider and challenge staff pay in tendering process 7. Regularly engage with commissioners and providers to put action plans in place to resolve workforce issues 8. Traded offer to schools to support with teacher recruitment	5	3	15	1. Agree areas of strategic development from Commissioned Provider Workforce Strategy being undertaken by Workforce Development 2. CCC, providers and the wider health system working with local colleges to develop skills for working in the adult care system 3. Discussing future role of LA in supporting education and schools with Members	HoS Procurement HoS WFD Director, Learning	Oct-17 Apr-17		G G
13	Insufficient capacity to manage organisational change	1. More than half the projects on the CFA portfolio are RAG rated red 2. Staffing restructures result in loss of project and support staff	1. Low morale and demotivated staff delivering poorer outcomes. 2. Poorer services 3. Savings targets not delivered. 4. Transformative change not delivered 5. Inefficient services	4	5	20	SD Strategy and Commissioning		1. Resource focussed appropriately where needed to deliver savings. 2. CFA Management Team review business plans and check that capacity is aligned correctly. 3. Programme and project boards provide governance arrangements and escalation processes for any issues 4. Transformation work plans regularly reviewed by management team 5. CFA Management Team monitors achievement of savings on a monthly basis - including ensuring capacity is provided 6. Train managers in change and managing continuity whilst changing	3	4	12	1. Participate in Corporate Capacity Review, to include reviewing controls to ensure appropriate capacity, and agreeing approach with new corporate services	SD S&C	Mar-17		G
11	Failure to effectively plan how the Council will deliver services over the 5 year Business Plan	1. Lack of clear political direction and priorities 2. Unexpected increase in demand on services, as measured by CFA Metrics and service monitoring 3.Legislative changes that add unforeseen pressures to Council savings targets	1. The Council lacks clear direction for resource use and over-spends 2. Requiring the need for reactive savings during the life of the plan 3. Spends limited resources unwisely, to the detriment of local communities.	5	5	25	Executive Director CFA		1. Political leadership, organisational priorities and policies developed through councillor engagement 2. Robust engagement with members of CLT and Councillors through the Business Planning process timetable, to ensure greater cross-organisational challenge and development of options. 3. Full consultation with public, partners and businesses during planning process, including thorough use of data research and business intelligence to inform the planning process 4. Stronger links with service planning across the Council seeking to transform large areas of spend. 5. Business Planning process requires early identification of possible impacts of legislative changes, as details emerge 6. Manage activity to deliver savings in OP and ASC on a prudent and flexible basis 7. Governance and monitoring arrangements of CFA savings delivery established and in place (savings tracker)	3	4	12					
12	Failure to deliver the current Business Plan	1. Forecast out-turn for CFA looking negative 2. Unexpected increase in numbers of service users in the year. 3. Decline in service performance as measured by CFA Performance Dashboard	1. The Council is unable to achieve required savings and fails to meet statutory responsibilities or budget targets 2. Need for reactive in-year savings 3. Adverse effect on delivery of outcomes for communities	5	5	25	Executive Director CFA		1. Robust service planning; priorities cascaded through management teams and through appraisal process 2. SMT review savings tracker and finance and performance report monthly 3. CFA Performance Board review savings tracker and finance and performance reports monthly 4. Weekly sub-group of CFA Performance Board reviews savings and addresses areas that are not on track 5. Robust governance framework to manage transformation agenda: a. Integrated portfolio of programmes and projects b. Routine portfolio review to identify and address dependencies, cross cutting opportunities and overlaps c. Rigorous risk and performance management discipline embedded in all transformation programmes/projects, with escalation process to Directorate Management Teams / Programme Boards 6. Budget holders have monthly meetings with LGSS Finance Partner/External Grants Team, to monitor spend and produce BCR	3	4	12					

Ref	Risk	Causes	Consequences	L	I	Score	Directorate	Lead	Controls	L	I	Score	Actions	Action Owner	Date	RAG
2 (CR)	Insufficient availability of affordable Looked After Children (LAC) placements	1. The number of children who are looked after is above the number identified in the LAC strategy action plan 2015-2017 2. % LAC placed out of county and more than 20 miles from home as identified in CFA performance dashboard 3. The unit cost of placements for children in care is above targets identified in the LAC strategy action plan 2015 to 2017	1. Client dissatisfaction and increased risk of harm 2. Reputational damage to the Council 3. Failure to meet statutory requirements 4. Regulatory criticism 5. Civil or criminal action against the council	4	5	20	SD Strategy and Commissioning	HoS Commissioning Enhanced Services	1. Regular monitoring of numbers, placements and length of time in placement by CFA management team and services to inform service priorities and planning 2. Maintain an effective range of preventative services across all age groups and service user groups 3. Looked After Children Strategy provides agreed outcomes and describes how CCC will support families to stay together and provide cost effective care when children cannot live safely with their families. 4. Community resilience strategy details CCC vision for resilient communities 5. CFA management team assess impacts and risks associated with managing down costs 6. Edge of care services work with families in crisis to enable children and young people to remain in their family unit	3	4	12	1. Deliver actions in LAC Action Plan to manage demand and costs	SD CSC / SD S&C / SD E&P	Mar-17	G
5	Cessation of delivery, loss in quality and/or failure of adult social care providers	1. Care homes, supported living or home care agency are suspended 2. Major providers goes out of business and/or withdraws from the market 3. Provider services are in special measures or require improvement as result of an inspection 4. In-House Services need to close.	1. Loss of service provision, impact on service users 2. Financial risk to the Council 3. Increased pressure on Council Services 4. Delays in service provision 5. Reputational risk to the council	4	5	20	SD Adult Social Care/SD Older People and Mental Health	HoS Procurement / HoS Learning Disability Partnership / HoS Older People's Services	1. Robust contracting and monitoring procedures 2. Effective use of PQQs (pre-qualifier questionnaires) 3. Active involvement by commissioners in articulating strategic needs to the market 4. Risk-based approach to in-contract financial monitoring 5. New specifications for Voluntary and Community Sector (VCS) infrastructure support contract focuses on business development activity, consortia working, commissioning and procurement activity. 6. Closer working between compliance agencies, & CCC (E.G. Env Health, H & S, Police, Fire service, CQC, Safeguarding etc.) 7. Provide support to failing care homes to improve standards 8. Robust performance management and processes to manage providers 9. Managing Provider Failure Process in place to ensure care and support needs of those receiving services continue to be met if an provider fails 10. Early Warning Dashboard in place, to alert to likelihood of provider failure, reported to CFA Performance Board and Mgt Team 11. Management oversight of our own in house provision.	3	4	12				
6	Children and young people do not reach their potential (educational attainment)	1. The attainment gap between vulnerable groups of CYP and their peers of school age are below targets identified in CFA performance dashboard 2. End of key stage 2 and 4 attainment targets are below those identified in the CFA performance dashboard 3.Percentage of 16-19 years old who are NEET increases as identified in CFA performance board)	1. LA school improvement inspection triggered - failure would result in DFE intervention 2. Life chances of children and young people reduce 3. An increase in forced academies	4	4	16	SD Learning	HoS School Intervention	1. Good governance of Accelerating Achievement and School Improvement strategies and action plans, checking progress and challenging performance, involving executive and service management 2. Cambridgeshire School Improvement Board improves educational outcomes in schools by all parts of the school improvement system working together. 3. Effective monitoring, challenge, intervention and support of school and setting 4. Develop all children's services to include educational achievement as a key outcome 5. 18-25 team supports care leavers to remain in education or helps them find employment or training 6. A joint approach to support and promote good mental health for CYP has been developed with and for schools and a programme is in place which is supported by Learning, E&P, Public Health and voluntary partners 7.Provides support and guidance to schools to support the stability of educational placements and transition to post 16 for LAC 8. Residual Information, Advice and Guidance function overseen by the local authority focuses on the most vulnerable 9. Identify and track children who are missing education, understand reasons and provide support to attend school, access suitable provision, or confirm as electively home educated.	3	4	12	1. Pilot targeted action at raising attainment of children with SEND who are also FSM at Early Years and School age. View to roll out wider in the following academic year after review of pilot	HoS SEND Specialist Services	Oct-16	G
		1. Spend on agency staff within social care workforce is above target as identified by Strategic Recruitment and Workforce Development Board 2. High turnover of social care staff as identified by Strategic Recruitment and Workforce Development Board	1. Outcomes for children, families and adults are poorer 2. Reputational damage to the Council						1. Extensive range of qualifications and training available to staff to enhance capability and aid retention 2. Increased use of statistical data to shape activity relating to recruitment and retention				1. Deliver Recruitment and Retention Action Plan, overseen by Recruitment and Retention Task and Finish Group	SD OPMH	Mar-17	G

Ref	Risk	Causes	Consequences	L	I	Score	Risk Owner	Responsible Officer	Controls	L	I	Score	Further Actions	Action Owner	Date				RAG	Notes
14	Failure to attract or retain a sufficient (social care) workforce	3.High vacancy rates of identified key social care roles as identified by Strategic Recruitment and Workforce Development Board	3. Demotivated staff lacking the skills to deliver future challenges 4. Increased absence levels 5. Disproportionate level of agency staff	4	5	9	SD Learning	HoS Work Force Development	3. ASYE programme ensures new social workers continue to develop their skills, knowledge and confidence. 4. Frontline managers support their own professional development through planning regular visits with frontline services 5. Cross directorate Social Care Strategic Recruitment and Workforce Development Board and Social Work Recruitment and Retention Task and Finish Group proactively address the issue of social care recruitment and retention. 6. Improved benefits and recognition schemes in place 7. Development of Partners in Practice proposal to embrace innovative new ways of working	3	3	9								
8	Failure of key partnership agreements	1. Section 75 agreements not adhered to 2. Joint commissioning arrangements break down 3. Break down of key partnership groups (e.g. LSCB or Public Services Board)	1. Safeguarding risks to vulnerable children and adults. 2. Duplication of services 3. Disjointed service commissioning 4. Poorer outcomes for service users 5. Increased costs 6. Reduction in services	4	5	20	SD Strategy and Commissioning	SD Strategy and Commissioning	1. Local Safeguarding Children's Board (LSCB) and Adult Safeguarding Board have oversight of multi agency safeguarding arrangements 2. Data sharing protocol agreed through Public Service Board 3. Cambridgeshire Executive Partnership Board oversees joint working between adults social care and health and monitors Better Care Fund 4. Joint commissioning unit monitors and oversees joint commissioning of child health service 5. School Improvement Board improves educational outcomes in schools by all parts of the school improvement system working together. 6. MASH brings together children's social care, the Police, Probation, the Fire Service, NHS organisations, key voluntary sector organisations, Peterborough City Council and adult social care providing multi agency focus on safeguarding priorities and provides systematic review of safeguarding activity 7. Clear communication strategies in place 8. Monitoring and performance management of contracts 9 Children's Trust Board and Area Partnerships bring together organisations that work with children, young people and families to enable organisations, including voluntary sector, to work collaboratively and collectively to identify and develop shared priorities and commission local services to achieve improvements. They are closely linked with the LSCB 10. Effective governance and monitoring of Section 75 agreements, joint commissioning arrangements, and other partnership arrangements through Monitoring and Governance Groups and Committees.	3	3	9	2. Work is ongoing on resolving issues with CCG over jointly funded packages of support (CHC, section 41 and section 117). Action plan agreed with CCG on CHC assessments, in other areas we are seeking legal opinion.	SD OPMH	Apr-17				G	
9	Failure to work within regulation and/or regulatory frameworks	1. Poor inspection and/or ombudsman results 2. Higher number of successful legal challenges to our actions/decisions 3. Low assurance from internal audit	1. Financial impact 2. Increase attention from regulators 3. Failure to meet needs of service users	3	4	12	Executive Director CFA		1. LGSS legal team robust and up to date with appropriate legislation. 2. Service managers share information on changes in legislation by the Monitoring Officer, Government departments and professional bodies through Performance Boards 3. Inspection information and advice handbook available which is continually updated. 4. Code of Corporate Governance 5. Community impact assessments required for key decisions 6. Programme Boards for legislative change (e.g. Care Act Programme Board) 7. Training for frontline staff on new legislation 8. Involvement in regional and national networks in children's and adults services to ensure consistent practice where appropriate 9. Services actively prepare for inspection 10. Programme of self-evaluation across all areas	2	4	8	1. Annual refresh of school improvement self-evaluation	SD L	Mar-17				G	
7	Failure of information and data systems	1. Amount of time CFA Business Systems (Social Care, LEA, Case Management) are working and available (uptime) is below Service Level Agreement (SLA) levels 2 System availability due to infrastructure issues (network, end-user devices, SAN etc.) is below SLA levels. 3 Amount of time data-sharing with partners is impossible as a result of system failure.	1. Inspection failure. 2. Increased risk of harm to children and adults. 3. Less than optimum efficiency. 4. Reliance by staff on IT support 5. Inability to share information and/or inappropriate sharing of information	5	4	20	SD Strategy and Commissioning		1. Individual Services Business Continuity Plans. 2. LGSS IT Disaster Recovery Plan 3. LGSS IT service resilience measures (backup data centre, network re-routing). 4. Version upgrades to incorporate latest product functionality 5. Training for CFA Business systems prior to use 6. Information sharing agreement 7. Backup systems for mobile working	2	4	8	1. Implementation of CFA social care Business Systems on new rationalized platform (Project Mosaic)	HOS IM	Apr-18				G	Currently project managed by HoS Information management (until end of phase 2 CCR) project sponsor Service director Strategy and Commissioning.

| 10 | Inability to maintain sustainable traded learning services | 1. Services do not get enough business to meet income targets

2. Unexpected increase in cost implications of traded services

3. Services are unviable and stop trading | 1. Loss of service provision.

2. Reputational damage.

3. Poorer education outcomes for children and young people | 4 | 4 | 16 | SD Learning | 8. Back up systems for CFA Business Systems
9. Corporate (Information Governance Team) monitor data handling and security position and improvements
1. Cross directorate leadership to support traded activity, including engagement of senior leaders, a strong vision and clarity on what products and services CCC wishes to retain/ what we will fail.
2. Robust systems and process for target setting, monitoring and forecasting of traded income.
3. Services are re-modelled and/or restructured to better organise for a commercial trading model, maximising cross directorate trading opportunities.
4. Staff in teams with income targets have a well developed and broad range of commercial skills.
5. Partners and service users are involved in the design of services and products.
6. Cost of trading is well understood and appropriately managed through traded activity. | 2 | 3 | 6 | | | | | |

IMPACT		VERY RARE	UNLIKELY	POSSIBLE	LIKELY	VERY LIKELY
VERY HIGH (V)		5	10	15	20	25
HIGH (H)		4	8	12	16	20
MEDIUM (M)		3	6	9	12	15
LOW (L)		2	4	6	8	10
NEGLIGIBLE		1	2	3	4	5
	LIKELIHOOD					