

CORPORATE RISK REGISTER

Appendix 3

Version Date: May 2014

Details of Risk			Key Controls/Mitigations	Residual Risk			Actions				
Risk No.	Risk Description	Owner		Probability	Impact	Residual Score *	Description	Action Owner	Target Date	Revised Target Date	Action Status
1a	Failure to effectively plan how the Council will deliver services over the 5 year Business Plan commencing 2015/16	CD CS&T	1. Robust political leadership, strong vision, clear 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. Early engagement with members of CLT, Heads of Service and Councillors to generate further ideas for innovation, transformation and savings. 5. Stronger links with service planning, across the Council, seeking to transform large areas of spend.	3	4	12					
1b	Failure to deliver the 2014/15 Business Plan	CE	1. Robust service planning; priorities cascaded through management teams and through appraisal process 2. Strategy in place to communicate vision and plan throughout the organisation 3. Performance Management 4. 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. Directorates to review and recommend priorities d. Directorate Management Teams/Programme Gvnce Boards ratify decisions 5. Rigorous RM discipline embedded in all transformation programmes/projects, with escalation process to Directorate Management Teams / Programme Boards 6. Integrated performance and resource reporting a. Monthly progress against savings targets b. Corporate Scorecard monitors performance against priorities c. Budget holders monthly meetings with LGSS Finance Partner/External Grants Team, producing BCR d. Regular meetings with Director of Finance/s151 Officer, Committee Chairs and relevant Directors to track exceptions and identify remedial actions 7. Rigorous treasury management system in place plus ongoing tracking of national and international economic factors and Government policy 8. Limited reserves for minor deviations 9. Routine monitoring of savings delivery to identify any required interventions 10. Bi-annual Leaders and Chairs meeting and Cambridgeshire Public Service Board 11. Board Thematic Partnerships including the LEP and the Health and Well Being Board, commissioning task and finish groups 12. LGSS governance arrgts incl representation on SMT	3	4	12					

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2	The quality, responsiveness and standard of LGSS Services fail to meet CCC requirements	CE	1. Joint Committee Structure incl CCC Cllr representation, LGSS Overview and Scrutiny Cttee, Chief Executive sits on LGSS Management Board 2. LGSS director representation on SMT to ensure LGSS meets current and future Council needs 3. LGSS Strategic Plan, Strategy Map and Improvement Activities identified 4. Programme Management arrangements in place to move forward workstreams 5. CCC performance management arrangements 6. LGSS performance management team 7. LGSS SLA's in place	3	3	9					
3	The Council does not have appropriate staff resources with the right skills and experience to deliver the Council's priorities at a time of significant demand pressures	DoPPT	1. Annual business planning process 2. Children and Adults Workforce Strategy and Development plans 3. Robust performance management and development practices in place. 4. Flexible terms and conditions of employment 5. Appropriate employee support mechanisms in place through the health and well being and counselling service agenda. 6. Organisational Workforce Development Programme 7. Use of statistical data to shape activity relating to recruitment and retention	3	4	12	1. Workforce Strategy and Development Plan.	HoWD	Jun 12	Mar-13 Jun-13 Aug-13 Mar 14	G
4	The Council does not achieve best value from its procurement and contracts	DoL&G	1. Contract regulations and Procurement Best Practice Guidance. 2. Contract Review Group (CRG) reviews proposed new contracts over £500k that are not subject to specific Project Board structure 3. Procurement Training 4. Central Contract register	2	3	6					

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9	Failure to secure funding for infrastructure	ED ETE	1. Maximisation of developer contributions through Section 106 negotiations.	4	4	16	1. Assist Cambridge City Council and South Cambridge District Council in implementing the Community Infrastructure Levy (CIL) regime and setting charges	HoTIPF	Apr-14	Early 2015	G
			2. Prudential borrowing strategy is in place.				3. Assist Fenland District Council in implementing the CIL regime.	HoTIPF	Late-2013	Summer 2014	A
			3. Section 106 deferrals policy is in place.				5. Develop transport strategy and investment priorities for Cambridge City and the surrounding area,	HoTIPF	Q4-2013	Mar-14	A
			4. External funding for infrastructure and services is continually sought.				6. City Deal bid for Greater Cambridge	EDETE	Sep-13	Ongoing	G
			5. Implementation of Community Infrastructure Levy				7. Investigate the potential for use of Tax Increment Financing and other innovative forms of funding		Ongoing		G
			6. Strategic development sites dealt with through S106 rather than CIL and S106				9. Assist Hunts DC in implementing the CIL regime	HoTIPF	Ongoing	2014	G
			7. Local plan policies with District Council's				10. Assist East Cambs District Council in implementing the CIL regime	HoTIPF	Ongoing		G
			8. Planning Obligation document in place for district's and CCC use				8. Respond to District Council Local Plans to address infrastructure policy deficit at all stages of the Local Plan process.	HoGE	Ongoing		G
			9. Lobby with LGA				9. Assist service areas define their infrastructure requirements to be pulled together within one policy document for use	HoGE	Yet to commence		G
14	Increased demand for services arising from increased financial and social pressure on individuals, families and communities	ED CFA	1. Community Cohesion Strategy and Action Plan in place. Child Poverty strategy agreed with multi agency commitment	3	3	9	8. Work with LEP to access ESF funds to support projects which support Social Inclusion and combat poverty	SD S&C	Jun-14		A
			2. Monitoring of impact of benefit changes allows increases in need to be better anticipated				9. Develop and action Children's Trust priority to mitigate the impact of poverty on health and learning outcomes	ED CFA	Dec-14		G
			3. Cambs Sub-regional Housing Board planning for future housing needs in the long term.				10. New Child Poverty Strategy to be developed	HoS&P	Sep-14		G
			4. County Homeless Executive working to reduce the impact of homelessness.				11. Revise the CFA Strategic Commissioning Framework to include building community resilience and shape communities	HoS&P	Jul-14		G
			5. Sub-regional Homeless Group working to reduce the incidence of homelessness.				12. Utilise feedback from the Transforming Lives workshops to inform the way we commission and deliver our services	HoS&P	Jul-14		G
			6. Welfare Reform Strategy Group joint planning and monitoring.				12. Utilise feedback from the Transforming Lives workshops to inform the way we commission and deliver our services	HoS&P	Jul-14		G
			7. Quarterly welfare reform impact reports to Public Services Board								
			8. CYP Area partnerships supporting the uptake of FSM								

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			9. Welfare reform communications to families coordinated by the Families Information Service								
15	Failure of the Council's arrangements for safeguarding vulnerable children and adults	ED CFA	1. Multi-agency Safeguarding Boards	3	5	15					
			2. Safeguarding Procedures, monitored during on-going supervision, and via service quality monitoring arrangements including case audits.								
			3. Adults Safeguarding Practice Guidance and Procedures in place for Partners and reviewed regularly				3. Deliver re-prioritised and amended Improvement Plan arising from Improvement Notice re Children's services	ED CFA	Feb-14	Apr-14	G
			4. Regular sharing of information with regulating bodies, including regulator reviews across Social Care Services.								
			5. Skilled and experienced safeguarding leads & their managers.				5. LSCB Annual Plan to improve safeguarding	LSCB	Apr-14		G
			6. Comprehensive and robust recruitment and training and development policies for staff, including safer employment practices and arrangements for induction and ongoing development including case recording.				6. ASB Annual Plan to improve safeguarding	SD ASC	Apr-14		G
			7. Common Assessment Framework to identify children at risk.								
			8. 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.				8. Safeguarding Adults CFA internal audit action plan	SD ASC	Apr-14		G
			10. Health and Wellbeing Strategy includes commitment from partners to safeguarding and a focus on the prevention of domestic violence, raising awareness and providing appropriate support for victims								
			11. Multi Agency Referral Unit supports effective referral of vulnerable people across agencies								
			12. Robust process of internal QA and audit								
			13. Revised Social Work Unit model								
			14. Multi-agency Improvement Board supports and monitors Children's safeguarding improvement								
			15. Mental Capacity Act/Deprivation of Liberty (DoL) Governance group oversees DoLS legislation requirements								
			16. Safeguarding Adults Board includes business plan 2014-17								
			17. Adult Safeguarding training strategy including training for GPs								
			18. Whistleblowing policy								
			19. Complaints process informs practice								
			20. Children's Social Care Performance Board monitors performance and thresholds								
			21. Robust challenge and partnership engagement through the LSCB								
			22. Children's Social Care Recruitment and Retention Strategy								
			23. Systematic review of referrals within the IAT to ensure effective triaging of new referrals								
			24. Early Help QA Framework and Practice Standards								
			25. Early Help Performance Framework								

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			26. Joint protocols for case transfer E&P to Children's Social Care 27 Effective step down protocols								
16	Lack of capacity to resource future demand for services in respect of children and adults	ED CFA	1. Regular audits of assessment processes and the use of trend data to identify children's needs at the earliest stage.	3	4	12	7. Phase 2 of transfer of Older People's Services from CCS to CCC to review workforce needs	ED CFA	Dec-13	May-14	G
			2. Multi-agency panels enable commissioners of services to consider and plan to meet needs jointly and agree funding				8. Work to deliver savings proposals which manage rising demand within a reduced budget	ED CFA	Mar-14	Mar-15	A
			3. Joint Strategic Needs Assessment (JSNA) provides population information, which is used to target services in Adult Social Care and CYPs				9. Work collectively with CCG and Public health to align commissioning priorities	ED CFA	Jun-14		G
			4. Other safeguarding measures in place to identify service users and close liaison between multi agency partners to help manage any unanticipated increase in need				10. New CFA strategic commissioning framework priorities focus on managing demand for services within the available resources	ED CFA	Jul-14		G
			5. Linkage with Business Planning process								
			7. Special Educational Needs (SEN) Strategy								
			8. Placements Strategy								
			12. Strategic commissioning framework priorities								
			13. New Communities Service ensures awareness of what will be required to resource service provision in new communities								
20	Non compliance with legislative and regulatory requirements	CE	1. LGSS legal team robust and up to date with appropriate legislation.	2	4	8					
			2. LGSS legal team brief Corporate Leadership Team on legislative changes								
			3. Service managers kept abreast of changes in legislation by the Monitoring Officer, Gov departments and professional bodies								
			4. Monitoring Officer role								
			5. Code of Corporate Governance								
			6. Community impact assessments required for key decisions								
			7. Business Planning process used to identify and address changes to legislative/regulatory requirements								
			8. Constitutional delegation to SMT, Cabinet and Scrutiny								
			9. H&S policy and processes								
21	Business Disruption	CD CST	1. Corporate and service business continuity plans	3	4	12	3. Project to establish 2nd LGSS data centre for resilience/backup of all systems, in addition to Scott House facility.	DoIT	Mar-13	Dec-15	G
			2. Relationships with the Unions including agreed exemptions				4. Plan and Implement Phase 3 of IT Resilience programme – duplication of key systems - in progress	DoIT	Mar-13	01/09/2013 Nov-13 Mar 14	G
			3. Corporate communication channels								
			4. Multi-agency collaboration through the Cambridgeshire & Peterborough Local Resilience Forum (CPLRF)								
			5. First phase of IT resilience project including the increased alternative power/environment conditions in major machine rooms								

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			6. Operational controls				10. Issues from test of secondary Data Centre to be addressed	DoIT	Feb-14		G
			7. Resilient Internet feed								
			8. Business continuity testing								
			9. CCC corporate BCP Group incl LGSS BC leads								
22	The Cambridgeshire Future Transport programme fails to meet its objectives within the available budget	DoSD	1. A Governance group is in place to oversee the programme. The group includes member representation from each of the districts, the county, NHS and Cambridgeshire ACRE. 2. The Cambridgeshire Future Transport programme board consisting of representatives from ETE, CFA and Comms 3. Strategic business case, Risks and Issues Log and programme is in place. 4. Communications strategy 5. Engagement strategy including stakeholder mapping 6. Bi-weekly project team meetings. 7. Bi-weekly meetings with the portfolio holder for CFT. 8. 3 year programme approved by Governance Group.	3	3	9	1. Identify suitable delivery models for areas C and D 3. Identify suitable alternative delivery models for areas E, F and G	SDS&D SDS&D	May-14 Mar-14	 Jun-14	G G G
23	Major Fraud or Corruption	CE	1. Financial Procedure rules 2. Anti Fraud and Corruption Strategy incl Fraud Response Plan 3. Whistle blowing policy 4. Codes of conduct 5. Internal control framework 6. Fraud detection work undertaken by Internal Audit 7. Awareness campaigns 8. Anti Money Laundering policy 9. Monitoring Officer/Democratic Services role 10. Publication of spend data in accordance with Transparency Agenda	2	3	6	3. Implement anti bribery policy	HIARM	Mar-14	Jul-14	A
			1. Governance; SIRO, CIO, Corporate Information Management Team encompassing Information Management, Information Governance, Records Management, policies confirming responsibilities (see below) Data protection registration requirements 2. Policies: Data Protection, Freedom of Information, Information Security Incidents, Mobile Devices, Code of conduct, Retention schedules, IT security related policies (computer use, email), Information Management Strategy 3. Procedures: FOI, Subject Access Request Handling, Records Management, service level operational procedures,								

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24	A lack of Information Management and Data Accuracy and the risk of non compliance with the Data Protection Act	CD CST	4. Tools: Encrypted laptops and USB sticks, secure email and file transfer solutions, asset registers (USB sticks, encrypted laptops)	3	3	9	6. Roll out of EDM to manage the information lifecycle (including information standards). Task and finish group established to drive forward greater awareness raising and training	IM	Mar-13	Dec-13 Dec 14	G
			5. Training and awareness: Data Protection, information security, information sharing, Freedom of Information and Environmental Information Requests								
			6. Advice: Information Management advice service (IM, IG, RM, security), Information Management addressed via the Gateway project				8. Review e-safety policy		Nov-13	Dec-14	A
			7. Information asset catalogue								
			8. Information sharing protocols embedded internally and with partners								
			9. Audit/QA of accountabilities process								
25	Failure to effectively transfer to the Council's new governance arrangements	CE	1. Formal project to manage the creation of and transition to Committee system	2	4	8	3. Internal communications to raise awareness of committee system workings	P&PM	Jul-14		G
			2. New model tested with directorates and s151 Officer								
			3. Executive directors consulted								
			4. Presentation to councillors and key officers								
			5. External scrutiny of proposals								
			6. Peer review by a Council which recently changed to committee governance								
			7. Training for committee groups								
			8. Group leaders meet monthly with Chief Executive								

SCORING MATRIX (see Risk Scoring worksheet for descriptors)

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
IMPACT LIKELIHOOD	VERY RARE	UNLIKELY	POSSIBLE	LIKELY	VERY LIKELY

* RAG RATING

RED rated risk
AMBER rated risk
GREEN rated risk

RISK SCORES

16 - 25
5 - 15
1 - 4

RISK R

[illegible]

REGISTER VERSION HISTORY

[illegible]

RISK SCORING MATRIX

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
NEGLECTIBLE	1	2	3	4	5
IMPACT LIKELIHOOD	VERY RARE	UNLIKELY	POSSIBLE	LIKELY	VERY LIKELY

Red scores - excess of Council's risk appetite – action needed to redress, quarterly monitoring

Amber scores – likely to cause the Council some difficulties – quarterly monitoring

Green scores – monitor as necessary

Descriptors to assist in the scoring of risk impact are detailed below

Likelihood scoring is left to the discretion of managers as it is very subjective

IMPACT DESCRIPTORS

The following descriptors are designed to assist the scoring of the impact of a risk:

	Negligible (1)	Low (2)	Medium (3)	High (4)	Very High (5)
Legal and Regulatory	Minor civil litigation or regulatory criticism	Minor regulatory enforcement	Major civil litigation and/or local public enquiry	Major civil litigation setting precedent and/or national public enquiry	Section 151 or government intervention or criminal charges
Financial	<£0.5m	<£1.0m	<£5m	<£10m	>£10m
Service provision	(a) Insignificant disruption to service delivery	(a) Minor disruption to service delivery	(a) Moderate direct effect on service delivery	(a) Major disruption to service delivery	(a) Critical long term disruption to service delivery
People and Safeguarding	No injuries	Low level of minor injuries	Significant level of minor injuries and/or instances of mistreatment or abuse of an individual for whom the Council has a responsibility	Serious injury and/or serious mistreatment or abuse of an individual for whom the Council has a responsibility	Death of an employee or individual for whom the Council has a responsibility or serious mistreatment or abuse resulting in criminal charges
Reputation	No reputational impact	Minimal negative local media reporting	Significant negative front page reports/editorial comment in the	Sustained negative coverage in local media or negative	Significant and sustained local opposition to the Council's policies

			comment in the local media	negative reporting in the national media	policies
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