Cambridgeshire County Council CRR

Ris	k	01.	ASC -	Cou	ncil's	arrang	gements for s	afeguar	ding vulnerable adul	ts fail							
	5						Risk Owners	Debbie	McQuade		Current Score	15		Last Review	07/03/2023		
											Target Score	15		Next Review	12/06/2023		
	4						T				Previous Score	15		Deterriel Corre			
poo	3					X/T	Triggers	rooruit troi	n and retain experienced s	off	Likelihood Factors 1. Decrease in government of the control of th	` ,					
Likelihood	2						2. Inherent w	eaknesses	in governance arrangemer e not delivering statutory		2. Failure/handback	from commissioned provations on local governme					
=									npliance with policies & pra	actice	Increased expects Increase in demar	_	iit.				
	1	1	2 Conse	3 quenc	4 e	5	6. Internal org 7. External sy 8. Major incid and/or inabilit	oads/dema ganisationa vstem/regul lent results	nd on service		5. Current Directorat 6. Inflation and cost	e restructure underway of living crisis		statutory duties 4. Requires improvement or inadequate CQC outcome			
	buildings. Controls						Adequacy		cal Success		Assuran						
loca	01. Continuous process of updating practice and procedures, linking to local and national trends, including learning from local and national reviews such as Safeguarding Adult Reviews.							iking to inal	Good	Regu	lar reporting		Adults practice governance board				
02.Comprehensive and robust safeguarding training, ongoing development policies and opportunities for staff, and regular supervisions that monitor and instil safeguarding procedures and practice								pervisions	Good	staff	quality supervision ar are able to continue re ssional bodies	Adults practice governance board					
Adu	03. Clear 'People in Position of Trust' policy and guidance in relation to Adults							ation to	Good				MASH				
	Provide training, SAB																
mul	04. Multi-agency Safeguarding Boards and Executive Boards provides multi agency focus on safeguarding priorities and provides systematic eview of safeguarding activity								Good	Regu	gular reporting		SAB annual reports & report to Adults & Health Committee				
	05. Robust process of internal Quality Assurance (QA framework) including case auditing and monitoring of performance							rk)	Good	Regu	lar auditing and repor	ting	PGB &DI	МТ			

06. Regular monitoring of social care providers and information sharing meetings with other local organisations, including the Care Quality Commission. Implementation of provider of concern process as required.	Good	Regular auditing and reporting	Contracts monitoring team, care home support team & provider of concern process
07. Joint protocols, practice standards and QA ensure appropriate joint management Reviewed in line with new legislation	Good	Regular auditing and reporting	PGB & DMT
08. Coordinated work between multi-agency partners for both Adults and Childrens. In particular Police, County Council and other agencies including supporting young people transitions to adulthood, with the oversight of the Safeguarding Boards	Good	Effective and safe implementation	SAB
09. Continue to work with the CQC to share information	Good	Regular reporting	Contracts monitoring team
10. Oversight & challenge from QA Service and the Local Safeguarding Board	Good		PGB & SAB
11. Regular DMT's to discuss and escalate issues Held weekly	Good		Escalation to CLT as required

Assurance

Risk Path: Cambridgeshire County Council CRR/Cambridgeshire County Council

Risk Category: Linked Objective(s):

Action Plans

Responsibility

Target Date

Ri	Risk 02. CSC - Failure of the council's arrangements									to safeguard vulnera	ble c	hildren & young	g peo	ple						
	5 4											Current Score Target Score Previous Score	15 15 15	·		Last Review Next Review	13/12/2022 13/03/2023			
٠	3						Triggers	5			Likelihood Factors (Vulnerability)			Potential Consequences						
ikelihood	3					X/T	_			dren's Social Care. 1. Children's social care case loads are too hi				_	Harm to child or young person awaitin					
ike	2									es fail to support an accurate ation to child and family	е	some areas due to i retention.	issues	with recruitment and	d	or receiving services from the Council. 2. Reputational damage to the Council.				
ľ							circumst	ances.		·	2. Inaccurate asses	ccurate assessment of risk in relation to children			3. Financial impact.					
	3. Non-compliance wiprocedures. 4. Inability to recruit a Workers. 5. Level of need outst 6. Failure to secure a inspection. 7. Major incident results.							res. ity to red	cruit and	3. Dedicated Schools Grant High Needs Block overspending. 4. Difficulty procuring sufficient capacity for children's					Legal challenge or government intervention.					
	6. Failure to secure a print inspection. 7. Major incident result systems, records or but								t results i s or build egulatory	requirements for children's		 Cost of living cris for services. Uncoupling of Ch joint People director New quality stand for unregulated suppersonance of the contract of the contrac	nildren's rate. dards a ported	s directorate from fo and Ofsted inspectio accommodation for						
Со	Controls							Adequacy	Critic	cal Success			Assuranc	surance						
Pro sys	. Multi-agency Safeguarding Boards and Executive Boards. Provides multi agency focus on safeguarding priorities and provides systematic review of safeguarding activity specific safeguarding situation letween partners.							provide		Good										
						d work b	etween multi	-agency	′	Good										
In p sex tran Reg me	partners, providers, and regulators. In particular 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 Safeguarding Boards. Regular monitoring of social care providers and information sharing meetings with other local organisations, including the Care Quality Commission.							g people ding Boa n sharing	e ards. g											
	Comprehensive and up-to-date Safeguarding Policies, Procedures and ractice Standards.						g Policies, P	es and	Good											
and suc	ontinuous process of updating practice and procedures, linking to loc d national trends, including learning from local and national reviews ch as Serious Case Reviews.																			
	Safeguarding Training & Development									Good										
opp	mprehensive and robust safeguarding training, ongoing developmen portunities for staff, and regular supervisions monitor and instil eguarding procedures and practice.								ment											

5. Quality Assurance Framework.	Good	
Robust process of internal Quality Assurance (QA framework) including case auditing and monitoring of performance.		
Clear processes for reporting concerns.	Good	
Whistleblowing policy, robust Local Authority Designated Officer (LADO) arrangements and complaints process inform practice.		
7. Family Safeguarding Approach	Good	
Family Safeguarding involves multi-disciplinary teams in children's social care, to keep families together and ensure children and adults services work jointly for the best outcome for the family.		
8. Role of Schools Intervention Service & Schools Causing Concern.	Good	
The Council's Schools Intervention Service supports good governance in maintained schools and conducts regular reviews of safeguarding and safe recruitment practice in schools. The Schools Causing Concern process enables concerns about school safeguarding practice to be escalated, monitored and managed by the County.		

Action Plans	Assurance	Responsibility	Target Date
Corporate response to Ofsted focused visit.			31/03/2023
Rapid improvement work responding to the Ofsted focused visit will be led by the Director for Children's Services.			
2. Children's Workforce Programme.			30/09/2023
The Children's Workforce Programme is a 12-month programme launched in September 2022 and led by the Chief Executive, to support recruitment and retention of the Children's social care workforce and to create an environment in which social care can flourish.			
. DSG HNB Safety Valve.		Jonathan Lewis	31/03/2023
The Council is working with the Department for Education to seek to agree Safety /alve funding to resolve the current deficit in Dedicated Schools Grant High Needs Block Funding.			
. Children's Safeguarding Rapid Review.			31/03/2023
A rapid review into a serious incident involving a young person will be concluded by 31st January 2023 and the action plan resulting from the review will be implemented by the 31st March 2023.			
5. Children's Placement Sufficiency.			31/12/2023
Work to manage the local market with support from Commissioning services is underway to support placement sufficiency for Cambridgeshire. This action is ikely to remain ongoing.			

Misk I atil. Cambridgeshire County Council City Cambridgeshire County Cou	Risk Path:	Cambridgeshire County C	Council CRR/Cambridgeshire County C	Counc
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Ris	sk	03.	The C	ounc	il doe	s not	have enough b	oudget t	o deliver agreed sho	rt and m	edium term	corporate objective	es			
	5 4						Risk Owners	Tom Ke	lly	Targ	rent Score get Score vious Score	12 15 12		Last Review Next Review	06/03/2023 04/06/2023	
þc	3				х	т	Triggers		Likelihood Factors (Vulnerability) nore resources than it has by the soft not have sufficient reserves to not have sufficient					Potential Cons	equences	
Likelihood						'									ues a s114 notice or sation direction	
Like	2						cover cummula	ative varia						pply of requires capitalisation direction 2. The Council does not deliver its statutory responsibilities		
	for budget setting and mor 3. Non-compliance with co 4. Poor demand managem 5. Inflationary pressures 6. staff without appropriate 7. The Council is a victim of							ing and mance with or dimanage pressures appropriation is a victim come from	conitoring corporate processes ment of services te s/k/e n of major fraud and corrupt n Safety Valve process - Co	fees 4. C 5. Le 6. E incre 7. P puncil 8. In Avai 9. C Sche	/charges or taxa hanges to gove egislative and re conomic conditi eased prices artnership risks ling in collabora dustrial Emissional dustrial Emissional urrent challenge ool Transport m	ation rmment funding egulatory changes ions Inflationary pressures - additional costs or reductions ons Directive and the Best es conclusions (BATc) es in the Waste and Home	ced	Reople do not receive the services to which they are entitled or require, and may be harmed as a result Reputational damage		
Cor	ntrols								Adequacy	Critical S	uccess		Assuran	ce		
01. Robust Business Planning process									Good			CLT to act collectively to swhich meet the financial				
02.Robust service planning, priorities cascaded through management teams and through appraisal process								ment	Good		•	is expected of them and available budget				
03. Integrated resources and performance reporting (accountable quarterly to S&R), tracking budget, savings, activity and performance									Good	Saving pro	oposals delivere	ed				
moi	4.Operational division Finance and Performance Reports (accountable nonthly to Service Committees), tracking budget, savings, activity and eleformance								Good	Saving pro	ng proposals delivered					
05. Scheme of Financial Management, including Budget Control Report for the Council as a whole and operational divisions								Report	Good	Clear budg		ective engagement with it	with it			

06.Procurement processes and controls ensure that best value is	Good				
achieved through procurement					
07.Budget challenge and independent advisory: Finance and budget	Good		Meeting of financial targets and deadlines.		
managers at all levels of the organisation to track exceptions and identify			Political engagement and approval		
remedial actions					
08. Rigorous treasury management system plus tracking of national and	Good				
international economic factors and Government policy					
00 8:	0 1				
09.Rigorous risk management discipline embedded in services and	Good				
projects					
10.Adequate reserves	Good		Reserves held at recommended level as per		
10.Adequate reserves	Good		section 25 statement (4%)		
			·		
11. Integrated Financial Monitoring Report	Good		Received quarterly at S&R		
12. Anti-fraud and corruption policy	Good		Organisational awareness campaigns		
13. whistleblowing policy	Good		Organisational awareness campaigns		
14. Internal control framework	Good		Organisational awareness campaigns		
15. Fraud detection work undertaken by IA, Counter Fraud	Good		Organisational awareness campaigns		
,					
16. Awareness Campaigns	Good		Organisational awareness campaigns		
			, , ,		
17. Anti money laundering policy	Good		Organisational awareness campaigns		
31.3			, , ,		
18. Publication of spend data	Good		Organisational awareness campaigns		
To a substantial of Sporta data	0000		organicanonal analoness sampaigns		
Action Plans		Assurance		Responsibility	Target Date
01. Engagement, development and			-	Tom Kelly	07/10/2022
submission of credible revenue and capital plans into safety valve process	5			Jonathan Lewis	
00 Conital Programma Popul and				Tana Kalla	20/44/2000
02. Capital Programme Board and RIT full scrutiny and supervision of proposal and savings plan developmer	nt I			Tom Kelly	30/11/2022
Tan obrasing and supervision of proposal and savings plan developmen					

Risk Category:

Risk 04. A serious incident occurs, preventing ser									es from operating an	d /or	r requiring a m	ajo	r/critical	incident	respon	se.			
	5 4						Risk Owners	Sue Gra	ice		Current Score 12 Target Score 15 Previous Score 12					Last Review Next Review	27/02/2023 04/06/2023		
ō	3			•	.,	_	Triggers		Likelihood Factors (Vulnerability)					Potential Consequences					
Likelihood	2				Х	Т	Loss of large		of staff or key staff including temporary denial	ncluding temporary denial of flooding and severe weather vuli 2. Pandemic the							Inability to deliver services to /ulnerable people, resulting in harm to hem		
	1	1	2 Conse	3	4	5	financial constra 7. Serious majo	y supplie es or fue esilience aints and r externa	r el in CCC services due to ong cost reduction	3. Cyber Attack / 4. Possible powe 5. Resource issue	ages cause	ed by gas sho	ortages	2. Inability to me statutory require 3. Increase in se 4. Reputational	ervice demand				
	Consequence planning or processes 9. Co-operation and er								agement of partners							<u> </u>			
Coi									Adequacy	Critic	cal Success				Assuran	се			
Corporate and service Business Continuity Plans Up to date business continuity plans available across the Council.						Plans plan majo	ervices have up-to- s which provide a c for how services w r/critical incident to ption.	clear ill res	and compr	ehensive e event of a	The Emergency Planning Team maintains a t of BC plan completion across the Council. Cu the team are working on reviewing BCPs and getting this up to date (see Action Plan).								
The Car inci	2. Corporate communication channels in case of emergency. The Emergency Planning team work with Communications Teams in Cambridgeshire and Peterborough to respond to any emergency incidents. The Council's Emergency Messaging System allows contact with staff via SMS in the event of IT system disruption.						Good	exter					Emergency Planning team maintain a close onship with the Communications team.						
The issu	Cambridgeshire & Peterborough Local Resilience Forum the LRF allows multi-agency collaboration regarding local resilience sues. The LRF follows a clear process to allow agencies across the egion to share information, plan and prepare for major incidents, and naintains a tactical response process.						garding local resiliend low agencies across	the	Good	agen	Council is able to v icies across Cambi sponding to a majo	ridge	shire & Pet	terborough	on the LF	Executive Director of Strategy & Partnerships sits on the LRF Board to represent Cambridgeshire County Council.			
4. ľ	. IT disaster recovery arrangements								Reasonable		downtime and disru	•				•	thoroughly ahead of data		
Up	Up to date IT disaster recovery plans in place.).				nimised in the ever ss of data.	nt of	an IT critic	al incident		ove and then put centre move in N	into action 'live' during ovember 2021.		
5. F	5. Resilient Internet feed								Good						"Conside improve r WFH for	rable work under resilience of netw staff and Membe	taken to strengthen and ork, high proportion of rs can be sustained. ss and escalation"		

Corporate Emergency Plan	Reasonable	Corporate Emergency Plans put into operation
		through recent incidents (2020/21 and 2021/22)
		including Flooding and Severe Weather. The
		Corporate Emergency Plan is currently in the
		process of being updated (see Action Plan).

Action Plans	Assurance	Responsibility	Target Date
Business Continuity Plan Testing		Stewart Thomas	01/04/2024
Once the corporate review of BCPs is complete, the Emergency Planning team vill re-implement a programme of service-level testing of BC plans and a corporate BC testing exercise.			
orporate review of Business Continuity Plans.	The Emergency Planning Team maintain a tracker of corporate and	Stewart Thomas	30/09/2023
mergency Planning Team supporting service Business Continuity leads to review usiness Continuity Plans.	service BCPs and are now reviewing and updating this to understand current completion and quality levels of service BCPs.		
Disaster Recovery Exercise		Sue Grace	31/03/2023
Power Outages Working Group	Final meeting of the Power Outages Working Group is expected to be in	Sue Grace	31/03/2023
The POWG is working to monitor the risk of power outages; identify and manage properties with standby power; and put in actions to address the risk.	late March 2023.		

Ris	sk	05. F	ailure	of co	orpor	ate go	vernance									
	5 4						Risk Owners	Linda W	/alker		Current Score Target Score Previous Score	10 15 10		Last Review Next Review	22/02/2023 04/06/2023	
р	_						Triggers				Likelihood Factors (Vulnerability)			Potential Consequences		
hoo	3					Т	Major busine	ss disrup	tion. 1. Current local financial pressures.				Harm to people as a result of them			
Likelihood	2					Х	 Lack of mana Negative inst 	•	•		 Ongoing national reduction in public sector Changes to statutory/Legislative duties. 			· · ·		
7	1	1	2 Consec	3 quence	4	5	4. Poor financia5. Insufficient fi6. Personal Dat7. Lack of awarchanges.8. Lack of clear	nal manage nance. ta is inappereness of	•	legislative	•	porate restructures and s	ervice	 Criminal or civil action against the Council. Negative impact on Council's reputation. Lack of control over financial or operational delivery. S114 Notice or Public Interest Research 		
Cor	ntrols								Adequacy	Critic	al Success		Assuran	ce		
01.	Monitoring Officer role.								Good		of or reduced risk of enge to decision mak	•	sign-off o	-		
02.	2. Annual Governance Statement (AGS).								Good	effect arran	process ensure that iveness of its corpo gements and its com rate governance fran	pliance with the		overnance State at of Accounts.	ment published as part	
03.	Code o	of Corpo	orate G	overna	nce (C	oCG).			Good	Annu Gove	ual review of the Code of Corporate ernance provides assurance that the Council a robust governance framework in place. Code of Corporate Governance upda on the external website.				nance updated annually	
		ess Pla /regulate				to identify	and address char	nges to	Good							
05. Mar	The Conageme	ouncil's ent, Cor	Constinutract F	tution, i Procedu	includii ıre Rul	ng Schen es, Sche	ne of Financial me of Delegation e	etc.	Good	Office	ers and Members con ations	nply with statutory				
	6. Corporate Complaints procedure and response to Local Governma Social Care Ombudsman reviews.						nse to Local Gove	rnment	Good		Council can identify a hes of legislative or					
07. Service managers kept up to date with changes by Monitoring Offic Pathfinder, Government departments, professional bodies, involvemen regional and national networks						with char profession	nges by Monitoring onal bodies, involve	Officer / ement in	Good		of or reduced risk of enge to decision mak	J				
							in Committee repong Officer.	orts	Good		nittee papers and ke	,	Sign-off b		evidenced in Committe	

	1	•	impact.		
09. Roles of Statutory Officers inc. Head of Paid Service, Section 151 Officer, Director of Adult Social Services, Caldicott Guardian, etc.	Good		Active postholders for all statutory roles for the Council.		1
Action Plans		Assurance		Responsibility	Target Date
01. Corporate Response to the Covid Public Inquiry.					31/03/2023
02. Monitoring Officer review of the Officer Scheme of Delegation.				Linda Walker	31/03/2023

03. Self-Assessment of the effectiveness of the Audit & Accounts Committee.

04. Appointment of independent non-voting Members to the Audit & Accounts

Risk Category: Linked Objective(s):

Committee.

Mairead Claydon

Mairead Claydon

30/09/2023

30/09/2023

	5						Risk Owners J	anet Atkir	1	Current Score	15		Last Review	02/03/2023		
ı	3									Target Score	15		Next Review	04/06/2023		
ı	4									Previous Score	15					
١,	Trig.		Triggers	ggers		Likelihood Factors	Likelihood Factors (Vulnerability)			equences						
2	J					X/T			eas including partners.		Cost of living is increasing at a rate that is causing			is unable to recruit &		
Likelinood	2			Employee retention beneath optimal leading to unhealthy level of turnover.					major concern for many of our workforce. 2. Acute skills shortage in key areas including partners		retain staff with the right skills and					
╵┠								 Low levels of employee engagement. Failure to achieve a healthy organisational culture and environment. Ineffective or inadequate workforce planning. 			EU exit impact on employment market Increased challenges across all areas of the			Failure to deliver effective services or Council objectives.		
ı	1						4. Failure to achi									
ı											in recruiting.		3. Reputational damage to the Council.			
ı		1	2	3	4	5					Changing expectations regarding how and where			4. Low morale and negative impact on		
_									an the Council is not able				staff wellbeing.	41. 1. 4. 1		
							' '				6. The extent and scale of change programmes being			5. Expenditure on costly interims or		
									utation as an employer.		undertaken across the Council in the first part of 2023 including the separation of services across CCC and			agency staff.		
			0		_		8. High absence		and develop staff					6. Workforce lacks relevant skills,		
			Conse	quence)		•				PCC is heightening the likelihood of disruption and challenge with motivation and engagement.			knowledge and training and is not		
							J	U	riles sation/industrial satis	_	7. Significant demand in services.		continually developed.			
							11. Working days	5 1051 10 51	rike action/ industrial action	J	lace expectations of emp	loyees.				
on	trols							Α	dequacy	Critical Success		Assuran	ce			
A. Fair Recruitment Policy. Recruitment and Retention Board meets bi- nonthly, focused on social care.				Good	Staffing levels support service delivery. Outcome Retentio		es of actions from Recruitment and									

Controls	Adequacy	Critical Success	Assurance	
A. Fair Recruitment Policy. Recruitment and Retention Board meets bimonthly, focused on social care.	Good	Staffing levels support service delivery.	Outcomes of actions from Recruitment and Retention Board.	
This meeting continues to focus on key areas of challenge and concern, engaging with our providers of agency workers as well around hard to fill posts to identify opportunities to improve candidate attraction.				
B. Regular Employee Engagement Surveys established to identify and respond quickly to emerging issues and concerns.		Employee Engagement is demonstrated through employees seeing the value of and therefore	CLT see results of engagement surveys and agree action plans to respond to the survey.	
A number of key topics have been covered and going forward will be revisited annually including Wellbeing; Equality, Diversity and Inclusion, and How We Work. The results of these engagement surveys are discussed with CLT for an action plan to be signed off and published on Camweb clearly setting out the organisational commitment to matters raised.		contributing to these opportunities to shape the organisation as an employer.		
C. 5 year People Strategy, endorsed by Members with accompanying action plan to ensure the right focus on recruitment, retention and talent management.	Good	Clear workforce plan in place for the Council.	Success of the People Strategy is measured through employee engagement surveys and feedback from key services/exit interviews.	
Work is underway on the next iteration of the People Strategy which will be presented to Full Council in Spring 2023 and will have a clear focus on the shifting employment market and employment challenges that the Council faces, to establish clear plans for the workforce.			Additionally, an annual report is presented to Staffing and Appeals Committee.	
D. Dedicated Recruitment Team supporting the whole Council. Targeted recruitment campaigns and new e-recruitment system.	Good	The Council is able to recruit staff with the right skills and experience.	Impact of recruitment campaigns is reviewed by the Recruitment Board. Decisions on spending on	

The team engage with services to understand the specific and differing challenges that they face and target recruitment campaigns accordingly, as well as maximising usage of social media channels. A new e-recruitment system has been implemented (in last 12 months).			major recruitment campaigns are approved by the Board. Ongoing recruitment project has an emphasis on recruiting managers acting as Council ambassadors and not just focusing on their own area/vacancy, to improve attractiveness of Council as an employer to
E. Appraisal system linked to performance management	Good	Staff retention is enhanced.	Directorate-level review of outcomes followed by CLT review of appraisal and performance outcomes.
F. Role of HR Business Partners. HR Business Partners work with services to anticipate and meet demands within service areas. BPs attend management meetings and meet Service Directors regularly.		Services are supported in successful recruitment, engagement, development and retention of staff.	Feedback from HR Business Partners regarding organisational engagement.
G. Annual report to Staffing and Appeals Committee Reports are delivered to Staffing and Appeals Committee in February each year setting out a clear review of the workforce profile and activity during the year as well as key policy changes, employee engagement activity and an update around employee wellbeing.	Good	Impact of workforce policies and engagement is measured and evaluated to inform future policy development.	Report is taken to Committee in February.
H. Report on quarterly basis to management teams on workforce and performance. Quarterly dashboard reports on workforce matters including absence and turnover are provided to Directorate Management Teams for them to keep a focus on their workforce profile and any emerging or potential concerns.	Good	Directorate Management teams are able to identify and address any emerging or potential concerns.	Reports are provided to DMTs quarterly.
I. Use of Consultants Policy and Interim & Agency Workers Policy.	Reasonable	Hiring managers use appropriate and compliant routes to market to obtain interim, agency staff and consultants.	Regular reporting on use of consultants, interims and agency staff to CLT and Audit & Accounts Committee. Internal Audit review of Use of Consultants & Interims planned for 2023/24. Consultancy policy ownership has transferred to Procurement. Head of Procurement and Head of HR have ben attending Management Team meets within services to raise awareness of these policies and to discourage any procurement of staff/workers
J. Agency Staff framework with Opus.	Good	Hiring managers use Opus as an accessible and cost-effective route to market for agency staff.	HR team manage Opus contract. Opus reporting has improved significantly with implementation of weekly returns for Social Care, Adults and Children's and monthly returns for other services. HR Advisory have introduced a reconciliation of returns to services to confirm accuracy of reports.
K. Well established consultative framework with trade unions.	Good	Well established and positive relationships enable constructive discussions with trade union colleagues around any challenging workforce related matters, as well as an opportunity to gain valuable insights and contributions to help shape policy development.	

New Learning & Development platform and work of the Learning & Development team.	Staff are able to access targeted learning and development opportunities and the Council can monitor training undertaken.	Rates of training completion.
M. Equality Diversity & Inclusion Working Group. EDI Working Group meets fortnightly to tackle EDI issues and engage staff across the organisation.	. , , ,	Staff feedback in EDI engagement surveys and exit interviews.
N. Employee Wellbeing offer and new Employee Engagement & Wellbeing Manager post.	Staff are supported to maintain wellbeing, reducing staff absence and supporting employee engagement and retention.	Staff feedback in Engagement Surveys and exit interviews.

Action Plans	Assurance	Responsibility	Target Date
Children's Workforce Improvement Programme.		Janet Atkin	30/03/2024
Programme to address challenges in children's workforce retention and recruitment, launched in September 2022 and led by Chief Executive. This piece of work has broadened in scope. Target date revised to reflect this - March 24.			
Creation of new People Strategy to reflect wider Corporate Strategy.		Janet Atkin	31/05/2023
On-track.			
The values and behaviours framework will be reviewed in line with the next iteration of the People Strategy. This now du		Janet Atkin	31/10/2023
Work with the service directors to create a comprehensive L&D framework to support the wider People Strategy.		Janet Atkin	31/10/2023
Can only be completed once People strategy in place and agreed therefore target date to be aligned – October 23.			

Risk Category:

Risk	07. Insufficient infrastructure to deliver the Council's services								
Action Pla	ns	Assurance	Responsibility	Target Date					
Risk F	Risk Path: Cambridgeshire County Council CRR/Cambridgeshire County Council								

Ris	k	08. F	ailure	to D	elive	r Key (Council Service	es							
	5 4						Risk Owners	Stephen Moir		Current Score Target Score Previous Score	10 15 10		ast Review Next Review	22/02/2023 04/06/2023	
٦	3						Triggers			Likelihood Factors	(Vulnerability)	P	Potential Cons	equences	
9	3					Т		ay be triggered by the realisati		01. Changes to local	authority finance and funding		01. Harm or risk to vulnerable people		
Likelihood				on the Corporate Risk Registe safeguarding arrangements (F		regime.		02. Statutory penalties.03. Reputational damage to the Council							
7	- Failure of saregual				salegualuling allangements (i		02. High levels of growth in Cambridgeshire outstripping predictions and creating increased			04. Government					
	1	1	2 Consec	quence	4	5	- Impact of attack (Risk 9) - Failure of contracts (Risk working (Risk 1 - Insufficien (Risks 6 and 7) - Failure to legislation (Risk 02. Changing c growth create p increase the rist this may also b management p 03. Failure to icinability to respous 194. Failure to dimplement clean including the But 05. Insufficient 06. Non-compli	t workforce or infrastructure recomply with Information Gove (10) county demography and high learns on Council resources that funding does not matche exacerbated by weak demanders within the Council. Identify changing policy or legisted to changes in policy or legisted to change the policy or leg	4), cyber 5), key crative esources ernance evels of and ademand; and slation, or an gislation. ate and ce plans, anance.		of organisational change ts, Children's and Strateg	0 and	ntervention. 05. Financial co	nsequences.	
							procedures. 07. Failure of a	rrangements for health and sa	afety.						
	trols							Adequacy	Critic	al Success		Assurance			
 Role of the Corporate Leadership Team (CLT) CLT have a leading role in ensuring that the Council delivers key and legislative requirements. Individual directors have performand setting out required service delivery in their areas. 				S: pr cc		Statements providing as compliance	nuncil Directors complete Directors Assurance atements for the Annual Governance Statement oviding assurance over the control of risk and ampliance with corporate governance quirements in their area.								
A cle	ear cor	porate		y and s	strategi		work feeding down i	Reasonable nto	the Co		mework should clarify ards to service delivery				
3. R	ole of	Counci	Comm	ittees				Good							

Cross-party decision-making in Council Committees provide oversight and challenge to decision-making, policy-making and performance of Council services.			
 Systems providing oversight of Council performance and service delivery. 	Reasonable	Senior management and Members have accurate and timely overview of Council performance.	
The Council's Performance Framework and Key Performance Indicators, along with associated systems for identifying performance issues such as the Complaints Procedure and Feedback Policy, provide corporate oversight of performance and delivery of key services.			
5. Demand forecasting.	Good	The Council has an accurate view of likely demand	
The Council operates forecasting mechanisms to inform budget setting and long-term planning. This includes placement sufficiency processes to inform provision of school and early years places.		for services in the short and long term.	

Action Plans	Assurance	Responsibility	Target Date
Consultation and restructure within Strategy & Partnerships directorate.		Sue Grace	30/06/2023
Key outcomes from the restructure will include the review of responsibilities for Business Planning and Performance.			
Consultation and restructure within People's Services.		Elaine Redding	30/06/2023
Redevelopment of the Council's Performance Framework.		Sue Grace	31/12/2023
 Review of corporate approach to Business Planning and budget planning, Strategic Framework and service planning. 		Sue Grace	31/12/2023

Ris	sk	09. T	he C	ounci	l is a	victim	of Cyber crime								
	5			Х			Risk Owners Sue	e Grace		Current Score Target Score	15 15		Last Review Next Review	06/03/2023 04/06/2023	
	4									Previous Score	15		Next Neview	0 1/00/2020	
ō	3						Triggers			Likelihood Factor	s (Vulnerability)		Potential Cons	equences	
Likelihood	3					Т	01. Data loss			•	cious attempts from vari	ous	01. Regulatory breach subject to ICO		
ike	2						02. Denial of IT ser	rices		sources 02. Malicious Emails to staff increasing			, ,	onal harm to the Council of private information.	
_							04. Phishing attack						02. Inability or c	egradation in the ability o	
	1						05. Ransomware at							access any computer	
	06. Telephone Toll Frauc 07. Major vulnerability									based service hosted outside of the Council network. It will most likely also					
	08. DR for IT Services Consequence						08. DR for IT Service	es						ices that the council hosts	
			Conse	quenc	# 								, , , , , , , , , , , , , , , , , , ,	e public. Finally it would	
	ntrols						ing and actions to be ta	Adequacy ken Good	Critic	cal Success		Assura	nce		
are Mul exp 02. with sys con vulr othe	also m tifactor loiting l ldentify 14 day tem. Fi trols wi nerabilid er third- n as po	arked a auther Phished and p ys for v rewall, ill be us ties frou -part in ossible.	as such ntication d crede atch vu ulneral Email, sed to e m being telligen	n as the n is use entials. ulnerabi bilities i Websit eliminat g exploi	ed to re lities in rated ca te acce te or re ited. No rce will	ain a high duce the n a timely ritical or less and e duce the CSC Ear be used	riate. External message her risk of Phishing. I likelihood of successfurmanner, which should high on the CVSS scoriend-device technical risk on known\unknown ly Warning, WARP and I to identify vulnerabilitie	be Good ng s as							
env DR will	ironme test is	nt has to be p	not bee lanned	en teste in for 2	ed to er 2022/23	nsure all 3 as the i	functionality is available impact of the SAN proje and how the environment	e. ct							
04.	Robus	t policie	es and	proced	ures			Good				1			
tecl	05. Staff training on the correct handling of private data, and to use technical controls available to the Council to limit the likelihood of this happening.							Good							

Action Plans	Accurance	Docnoncibility	Torget Date
08. Use the automated denial of service mitigation service provided by our wide area network provider MLL. This will inform us of any denial of service attempts and mitigation activities.	Good		
the UK only. Normal usage is monitored by the provider and Council staff so that any deviation from normal use patterns can be identified and alerted upon.	Good		
06. Use multiple layer of anti-malware protection on Firewalls, email and end-points to prevent malware with frequent signature updates.	Good		

Action Plans Assurance Responsibility Target Date

Risk Path:

Cambridgeshire County Council CRR/Cambridgeshire County Council

Risk Category:

Ris	k	10. T	he Co	ounci	l fails	to cor	nply with Infor	mation Governance le	gislation a	and industry sta	ndards					
	5 4						Risk Owners	Linda Walker		Current Score Target Score Previous Score	12 15 12		Last Review Next Review	06/03/2023 04/06/2023		
٥	3				v	_	Triggers			Likelihood Factors	(Vulnerability)		Potential Cons	equences		
Likelihood					Х	Т		nover and use of agency and			nked to Risk 09, 'the Cour			nat a lack of oversight a		
ike	2						Out of date II patches.	systems or staff failure to ins	stall		e', and IT security vulnerab od of a breach of Informat			ation management lea eing mis-handled, whic		
-								nd phishing attacks.		Governance legislat	ion.		would expose th	e organisation to:		
	4. Lack of training/aware 5. Insufficient physical set 6. Staff removing physical set 6.									* Legal action/In Officer involvem	formation Commission					
					g physical records from the o	ffice.					reputation of the cour					
								and adverse pub	olicity.							
	Consequence												* Complaints. * Data subjects	suffer loss, detriment a		
														It of poor managemen		
													data. This will include records management			
Con	trols							Adequacy	Critic	cal Success		Assuranc		Tecordo management,		
)1. I	Manda	torv da	ta prote	ection a	and sec	curity trai	ning for all staff	Good	95%	of staff have undergo	one online training or face	Quarterly	reports on trainir	ng completion rates.		
		,				,	3			ce training dependen						
				on Impa	act Ass	sessmen	ts (DPIAs) in all pro	jects Good	Regis	ster of DPIAs identifie	es which have seen a	Ongoing r	review and creati	on of register.		
and	procu	rements	8							DPIA completed, signed off and managed. Ongoing review of DPIAs so it is not a one off						
									_	assessment.						
)3. I	Regula	ar comn	nunicat	ions to	all sta	ff and at	key locations (e.g. ¡	orinters) Good					port to Joint Info	mation Management		
										structured and engaging way each quarter. IG attend DMTs on a quarterly basis to hear of			Board.			
										tend DMTs on a qua s and resolve proble						
							red by senior info ris				y quarter and led by CLT	Quarterly	meetings and IM	Board reporting.		
	,		, .				Il directorates along rsees IG and cyber		mem	bers.						
activ		DOIN Ca	iiuicott	Guarui	ai 15. Di	oaiu ove	isees io and cyber	security								
	-															
05. /	A com	prehen	sive se	t of info	ormatio	n and se	curity policies.	Good		ies reviewed and refr	•	Annual re	port to Joint IM E	soard.		
									redur	ndant documents rem	noved.					
		ished p	rocedu	re for n	otifying	g, handlir	ng and managing da	ta Good		pliance with policy ar	d clear reporting on	Report to CLT on a six-monthly basis on breache				
orea	ches								bread	ches.		and impac		n a quarterly basis.		
														n a quarterry basis. tified of high-risk		
												breaches.		•		
77 (Subjec	ct Acces	ss Req	uests re	espond	ded to wit	hin the statutory tim	eframe. IGood	Targe	eting compliance rate	of 90% SARs	Quarterly	report of progres	s towards 90% within		

	4		Committee and Joint IIVI Board. Six monthly report to CLT.
FOI responses issued within the statutory timeframe.	Good	Targeting compliance rate of 90% FOIs completed	Quarterly report of progress towards 90% within
		within statutory timeframe.	statutory timeframe to both Strategy & Resources
	⊣		Committee and Joint IM Board.
			Six monthly report to CLT.

Action Plans	Assurance	Responsibility	Target Date
Awareness and communications	Visibility on Cambweb	Ben Stevenson	31/03/2023
regular updates via Cambweb, DMTs and conversations to keep awareness levels up			
Completion of NHS DSP Toolkit	Publication of toolkit and any audits	Ben Stevenson	30/06/2023
Ensures areas of compliance considered and how met for Public Health and Adult			
mplement learning from incidents	Lack of repeat incidents in service areas where processes are reviewed	Ben Stevenson	31/03/2023
Ensure that processes are reviewed and trends analysed	and changed		
Mandatory training	BI reports to identify non completers	Ben Stevenson	30/06/2023
Fraining to be delivered annually to all staff, relevant to services anf councils	Raised with directors and CLT to ensure completion Annual training		
Review of IG policies	Published policies approved by IM board	Ben Stevenson	31/03/2023
Annual review of policies and updating to ensure best practice shared			

Ris	k	11. Failure of key contracts						
	5		Risk Owners Tom	Kelly	Current Score Target Score	12 15	Last Review _Next Review	06/03/2023 04/06/2023
	4				Previous Score	12	Next Review	04/00/2023
٥			Triggers		Likelihood Factors	(Vulnerability)	Potential Cons	sequences
Likelihood	3 2 1	1 5	have conflicting aims of 02. Large scale handb economic/profitability r 03. Supply chain or CPI. 04. The Council fails to contracts. 05. Lack of robust, for set deliverables, performarrangements for all ke 06. Failure to compliar legal challenge. 07. Contracts lack cleatowners have a conflict and external interests. 08. Contracts fail to drithrough appropriate performation of the contract of inchouse contracts. 11. Relationship break potentially leading to a 12. Heavy reliance on diversified supply chain 13. Policy or leadershifully land acquire assumptions and expenses and programments.	ack / collapse of major supplier reasons e and/or significant cost increated and/or significant cost increated increated and and governance and governance and governance and governance and governance are corporate owners; or contract of interest between their CCC and desired deliverables/outcomenalties/rewards. Contract management expertise. Committed by or against supplier corruption in collusion with addwn with key contractors, a legal dispute. Single suppliers leading to lack on. p changes in central government of adhere to business plan: cramme slippage, assumptions unsition & promotion	Planning delays to d improved cashflows 02. Uncertainty and underway within the 03. Significant econo 04. Industrial Emissi Available Technique ts to to irrole nes of a	s length/commercial risk. ate. Loan to value depleting major change programmes Council. omic and inflationary volatilit ons Directive and the Best s conclusions (BATc).	g but default on mon 02. Revenue in reduced incom 03. Interruption delivery. 04. Construction safety matters. 05. Reputations	npact of increased costs or e returns. to outcomes and service in quality and health &
	trols			' '	Critical Success	Α	ssurance	
01.	01. Contract Procedure Rules and associated guidance and training.			Good				
02.	Grants	to Voluntary Organisations Policy.		Good				
03.	Contra	cts Register.		Good				

04. Procurement Governance Board.	Reasonable	
05. Head of Diligence & Best Value role.	Reasonable	
06. Business Continuity Planning processes.	Poor	
07. Corporate due diligence processes.	Good	
08. Declarations of Interest processes within the Codes of Conduct for officers and members	Reasonable	
09. Corporate process for identifying key partnerships and contracts.	Reasonable	
10. Budget monitoring and forecasting processes.	Good	

Action Plans	Assurance	Responsibility	Target Date
01. This Land next steps.		Tom Kelly	31/05/2023
Receipt and review of monitoring surveyor reports, scrutiny of / challenge to next iteration of business plan & programme progress, confirmation of completion of enhancements to financial model functions.			
02. Implement the new Sustainable Procurement Strategy		Clare Ellis	31/03/2023

Ris	sk	12. C	lima	te Ch	ange														
g	5 4				Х		Risk Owners Triggers	Target Score 6 Previous Score 16		Last Review Next Review Potential Cons	06/03/2023 04/06/2023 equences								
00	3						Anticipated an	nual carbon reductions are not r	ealised	Increased demand	d on services side-lines c	limate	1. Failure to del	iver statutory functions					
Likelihood	,			т			· ·	cil and Cambridgeshire		and environmental a			and legislative r	equirements					
Ė	2. Internal skills, knot pace with CCES del			knowledge and resource do not	keep		es with short-term acute			iver the CCES and targe									
	1	1	2 Conse	guenc	e e	5	3. Local strategicalign and deliver 4. Government of strategy is delayed to the strategy is delivered. Projects to desting the strategy is deliversity enhayed to the strategy is delivery mechanyone to the Companyone to	e partnerships disintegrate and/o strategic coordinated action limate and environmental regulared and or weak overnment funding is piecemeal, not secured for Cambridgeshire r CCES action plan liver carbon reductions and/or not not not supported or all ion and biodiversity enhancement bedded into the organisation's sisms and local partners make decision CES position insufficiently developed to deliver and/or biodiversity enhancement price to deliver the CCES in change required in communities	not e/the opproved nt is not ervice s r low ts at	challenges prioritised over CCES delivery 3. Revised legislation/regulation 4. Supply chain immaturity – increases costs and risks for the Council. 5. Global competition for resources, drives significant macro- economic changes to markets e.g Ukraine war Covid 6. New technologies and innovations are complex to implement in current economic environment 7. Existing culture – internal and external – regarding behaviours and views on climate issues 8. Political will/change negatively influencing partnerships and collaborations 9. Inflationary pressures 10. Changes to government funding regimes and/or approaches			declared 4. Significant longer-term risks and costs						
Cor	ntrols							Adequacy	Criti	cal Success		Assuran	ce						
01.	Counc					action pl	an in place to guide	Good		S approved and first r	mobilisation plan in			an and CCES targets					
							nabling Programme source Capacity	Good	Corp Recr Phas	orporate Leadership Team. emitting ecruitment underway to increase capacity. Improved annual c			arbonisation plans in place for high carbon ting areas. oved data integration for dynamic reporting o aal carbon budgets				g areas. ed data integration for dynamic reporting on		
						al Carbor targets	n Footprint Report a	nd Reasonable	· · · · · · · · · · · · · · · · · · ·			nnual carbon footprint published. ajectory to net Zero by 2030 reviewed							
				o CLT (e & Sus			the CCES by the	Reasonable		orting template to be a ber 2022	agreed and started from								

05. Delivery and Programme Management of the CPCA Climate Change Action Plan	Reasonable	CCC puts in place a delivery programme and CPCA resources in place to deliver the action plan	Reporting to the CPCA Climate Working group and the Independent Commission for Climate
06. Continued involvement in various strategic partnerships/collaborative spaces to feedback information and establish collaborative working approaches. E.g. Local Climate Change Officers Group, UK100, ADEPT, UKPN Innovation Teams, Biodiversity Officers group, Fenland SOIL etc	Reasonable	Sharing Best Practice for policy and delivery improvements.	To be discussed
07. Climate and Environment Training Programme to all staff, consisting of e-learning module(s) and Carbon Literacy Training for all senior staff (& members)	Good	20 Members and 50 Officers trained, including majority of corporate Leadership Team.	Achieving equivalent of Gold CLT standard All Senior Managers to P4 to attend training Aspire towards 80% of Members trained
08. Maintaining a watching brief on governmental policy, legislative and funding positions to enable pro-active responses to emerging changes	Good	Increase external funding success for decarbonisation projects	£X of external funding to deliver CCES
09. Corporate Performance Outcome agreed to cover Climate Change and Sustainability. All staff will have a corporate outcome regarding Climate Change and Sustainability included in their outcomes and impacts targets as part of the corporate Our Conversations process.	Good	Services, teams and individual staff consistently work towards achieving the Council's Climate Change strategy and aims.	

Action Plans	Assurance	Responsibility	Target Date
01. Delivery of the Climate Change & Environment Action Plan		Sheryl French	31/03/2023
02. Delivery of the Enabling Net Zero Programme of work	Programme monitoring via the Net Zero Programme board	Steve Cox	31/03/2023
03. Delivery of CPCA Action Plan areas led by CCC		Sheryl French	31/03/2023
04. Integration of climate and environment into procurement strategy and rameworks		Clare Ellis	31/03/2023
.g. Climate Change Charter, implementation of the Social Value toolkit, training nd support for commissioning officers			
5. Corporate Asset Management Strategy		Tony Cooper	31/03/2023
ncorporation (and delivery) of carbon reduction and biodiversity improvements into CCC management approaches and to use CCC assets to drive net zero system change			
06. Climate / environment integrated into CCC operations and systems	Monitoring of capital programme board papers to ensure papers include	Sarah Wilkinson	31/03/2023
ncluding Carbon Valuation; Net Zero by Design; Triple bottom Line	carbon valuation		
7. Identification of annual targets to report progress and risk position against		Tom Barden	31/03/2023

Including carbon budgets under development by CUSPE		
08. Engagement and awareness campaign	Christine Birchall	31/03/2023
To deliver behavioural change and empower individuals, communities and businesses to act independently of the Council: a) internal and b) external		
09. Market development/skills/Cleantech – Net Zero Hub??		31/03/2023
10. Performance management – New data to fill known data provision gaps		31/03/2023
11. Funding & financing for net zero		31/03/2023

	_						Risk Owners	Sue Grace		Current Score	12	La	st Review		
- 1	5									Target Score		Ne	ext Review	21/05/2023	
ı	4									Previous Score				21/05/2025	
╗╏							Triggers			Likelihood Factors	(Vulnerability)	Po	tential Conse	quences	
Likelihood	3 2 1	1	2 Conse	3 quence	4	5	aims or prioritie 02. The Council critical partnersl 03. Lack of robu agreements or o governance arra 04. Partnership partnership owr their CCC role a 05. Partnership deliverables/out 06. Relationship leading to a leg 07. Policy or lea local partnershi	fails to identify and hips. Ist, formally agreed equivalent to set soon and the second agreements for all ke is lack clear corporaters have a conflict and external interest agreements fail to comes. In breakdown with ke all dispute. Idership changes in the organisations.	partnership ope, deliverables and ey partnerships. te owners; or of interest between	underway within CC 2. Restricted budget significant economic	najor change programmes C and partner organisatior s across sector, coupled v and inflationary volatility. Ins regarding LD pooled by	ns. pa vith 02 red udgets. 03 de 04	Potential Consequences 01. Financial impact of partnership failu particularly where budgets are pooled. 02. Revenue impact of increased costs reduced income returns. 03. Interruption to outcomes and service delivery. 04. Reputational damage. 05. Failure to fulfil statutory duties.		
on	trols						Adequacy			al Success	Assurance				
)1. F	Partne	rships	Advice	& Guid	ance D	ocument	i.	Poor	oor Clear guidance is available to Council officers and			The Council's Partnerships Advice & Guidance Document is due for a full review (see Action Plan			
2. (Grants	to Vol	untary (Organis	ations	Policy.		Good						ernal Audit compliance on Plan).	
)3. <i>F</i>	3. Appointments to Outside Bodies Process					rocess		Good	Office aroun Servi	ers and Members hav	d of Member		Democratic Services produce an Annual Report of Member Representation on Outside Bodies.		
04. Role of the new Director of Policy & Communities. Poor			The new Director of Policy & Communities will			The new Director will be joining the Council in March 2023.									
Actio	on Pla	ans						Α	ssurance			Responsi	ibility	Target Date	
			•	Partners Bodie	•		Guidance documer	-	his action will be owned	by the new Director	of Policy & Communities	Sue Grace	е	30/06/2023	

02. Conduct a fact-finding exercise to map our key partnerships, engagements and collaborative work.	This action will be owned by the new Director of Policy & Communities once in post.	Sue Grace	30/06/2023
03. Develop a Collaborative Working Strategy.	This action will follow on from the fact-finding exercise at Action 02.	Sue Grace	31/12/2023

Risk Category: