Agenda Item No: 8

PEOPLE & COMMUNITIES RISK REGISTER

То:	Children and Youn	g People Committee	
Meeting Date:	15 September 2020		
From:	Wendi Ogle-Welbourn, Executive Director		
Electoral division(s):	All		
Forward Plan ref:	n/a	Key decision: No	
Outcome:	Committee membe People & Commun	ers are briefed on the risks in relation to ities.	
Recommendation:	The Committee is a Communities risk	asked to note the People & register	

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1. BACKGROUND

1.1 It is a requirement to present an annual Risk report to Committee every year. This year, this report captures the COVID risks in relation to operations, which has been integrated with the People & Communities Risk Register.

2. MAIN ISSUES

2.1 The People and Communities Risk Register contains the main strategic risks from across the whole Directorate which are reported to each of the relevant Committee's (Children and Young People, Adults and Communities & Partnership) on an annual basis and can be seen in Appendix 1.

The P&C Risk Register is regularly reviewed on a 6-weekly basis by People & Communities Senior Management and discussed bi-monthly at their Management Team meetings.

However, the departmental risk registers were difficult to measure from March onwards, as all parts of the service were impacted and affected by COVID. Therefore normal business as usual activities could not be monitored in the same way, as to be expected.

- 2.2 The Council initially created a separate COVID Risk register for Cambridgeshire which monitored these risks daily and weekly in light of Government changes. The COVID risk register was separated out into key themes:
 - People
 - Operations
 - Infrastructure
 - Finance

Each theme had a number of triggers (which defined key areas of risks) and these were monitored. All services within People and Communities adapted their Business Continuity Plans (BCP's) which helped highlight the key areas of risks and the mitigating actions.

At the start and as expected, all COVID risks were rated red as they met or went over the Council's tolerable level of risk, however, in these extreme circumstances this was expected. Over the period of 8 weeks, the risks were amended as government guidance changes and as mitigating actions were being applied, which in the main brought the risks down to a much more tolerable level.

In mid-July it was agreed that COVID risks should now be amalgamated into departmental risk reports alongside the recovery phases and business as usual. Therefore, the rag rating of risks have increased slightly to reflect the period of responding to COVID, as well as recovery phases. These were all generally within the Council's tolerable levels, with a small number being reported as RED rated. The risk register is reported in Appendix 1, and outlined below is a summary of the key changes.

2.3 Summary of People & Communities Risk Register

No	Risk	Details	RISK RATING
1.	Demand on Coroners	Prior to Covid this was added as an additional risk due to a number of inquests due to take place and due to Covid remains a high risk.	16
2.	Financial pressures on service providers	Risk has increased due to the impact of Covid on providers, including our care providers, Early Years providers. The risk raises concerns around the financial operability and some having to cease to operate. The government financial support will end in late September and the Council is developing a plan to support and maintain market capacity.	16
3.	Financial pressures in People & Communities	Covid risks have been integrated with this risk. It raises concerns of the impact of Covid costs on services and also the viability to deliver savings identified for this financial year 2020/21. Risk remains High.	16
4.	Failure of the Council's arrangements for safeguarding vulnerable Children and Adults	Covid risks have been integrated with this risk. The use of Business Continuity Plans, were able to identify the most vulnerable cohort of service users and adequate arrangements were put in place to ensure the most serious concerns could be monitored (i.e. virtual meetings, visiting the most at risk etc). Face-to-face contact is now starting and therefore risk remains stable as recovery phases have now began. This includes a dedicated team set up to visit care homes during Covid period.	15
5.	Lack of frontline capacity and skills shortages in People & Communities	Recruitment situation has improved. Risk renamed slightly to reflect concerns of Covid in terms of self- isolation and increased potential sickness. Mitigation actions are in place in terms of PPE and only essential staff returning to office bases where needed. In addition, winter pressures on the horizon coupled with Covid might become an issue depending on the workforce. In addition ensuring frontline staff have access to flu jabs. Risk reviewed and increased slightly.	15
6.	Failure to attract or retain a sufficient People & Communities workforce	Risk reviewed and recognised the government campaigns for 'key worker' roles to be recruited to. Joint Management Team agreement to 'over-recruit' to reablement roles to ensure this essential service continues under winter pressures.	12
7.	Failure to adequately deliver the financial assessment service	Financial assessment service will be moving back into direct management by People & Communities by October 2020. A management position has been recruited to and more staff are being appointed to manage the implementation of the changes in the contributions policy.	12

8.	Children and young people do not reach their potential (educational attainment)	Risk revised slightly to take into account the period of 5 months out of school for the majority of Children. Unable to assess the gap currently until children are back at school. The Council have continued to support schools and settings for those children prior to the Summer break and continues to support the reopening of schools in September 2020.	12
9.	Think Communities – failure to deliver a transformed community resilience service	During the Covid period, a more community approach has been adopted and working more closely with partners to ensure communities and the most vulnerable are supported. A new unified approach operating model and business case has been developed and awaiting approval.	12
10.	Insufficient availability and capacity of services at affordable rates	Risk reviewed and increased contact with providers to ensure they are supported.	12
11.	Insufficient availability of affordable Children in Care (CIC) Placements	Still remains a risk, however due to Covid it created an issue around capacity in general, and this remains an issue, but the service is managing this sufficiently.	12
12.	Insufficient capacity to manage organisational change	Due to Covid the organisation has been forced to manage change during a critical incident which has presented with challenges and also opportunities which will be further explored in recovery plans.	12
13.	Insufficient preventative procedures and equipment (I.E. PPE) for staff to continue to work to government guidance stipulates PPE requirements	New risk added to reflect the risk of staff returning to work with sufficient Covid preventative measures in place and the requirement for PPE for key services requiring it. The PPE admin cell has been in operation since the end of March and will continue into the Autumn to supply PPE to staff. The LRF PPE will end on 31 st July 2020, and the Council will filter any enquiries from providers to Public Health and where needed to support those with emergency supplies for the most vulnerable.	12
14.	Achieving the new Libraries Transformation Vision	Continues to be monitored.	12
15.	Failure to make an informed and timely decision on the	Pending a decision on the Roger Ascham site currently.	12

	Registration Service in		
	Cambridge		
16.	Libraries budget risk	Revenue impact of Covid-19 has been captured in business cases. Proactive management brought Registration Services back form lockdown ahead of many other councils, enabling revenue to be maximised.	12
17.	Increase in Homelessness across CCC	Risk monitored throughout Covid and measures put in place during the critical incident to find housing. Work continues with key partners.	12
18.	Increased prevalence of adolescent young people entering the criminal justice system.	Risk monitored throughout Covid	9
19.	Partnership agreements with NHS are not agreed between partners or do not deliver what the Council needs	In relation to LDP Pooled budget initially, but expanded to reflect pressures around decisions and funding held by the CCG related to Covid.	9
20	MOSAIC Finance module – ensuring the embedding of the system	Risk reduced at the beginning of the year and remains as a monitoring risk currently. Covid has placed additional pressures on the adults finance system as adjustments needed to reflect Covid funding.	9
21.	Failure of information and data systems, particularly with the implementation of MOSAIC in Adults and LiquidLogic in children's.	Mosaic system has been implemented and is now being used as business as usual but there are remaining risks associated with responsiveness of Servelec to requests for changes.	8
22.	Failure to with within regulation and/or regulatory frameworks	Remains a risk in terms of Covid and not being able to meet statutory requirements due to Government guidance being inconsistent at times and changes being made with little or no notice. This has been managed well by the Authority and with Public Health colleagues.	8

23.	Meeting demand for school place and settings	The risk is reduced as all school places have been accommodated and is not currently a high risk.	8

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 A good quality of life for everyone

There are no significant implications for this priority.

3.2 Thriving places for people to live

There are no significant implications for this priority

3.3 **The best start for Cambridgeshire's Children**

There are no significant implications for this priority

3.4 Net zero carbon emissions for Cambridgeshire by 2050

There are no significant implications for this priority

4. SIGNIFICANT IMPLICATIONS

4.1 **Resource Implications**

The report above sets out details of significant implications in the risk register in Appendix 1.

4.2 **Procurement/Contractual/Council Contract Procedure Rules Implications**

There are no significant implications.

4.3 **Statutory, Legal and Risk Implications**

There are no significant implications.

4.4 Equality and Diversity Implications

There are no significant implications.

4.5 **Engagement and Communications Implications**

There are no significant implications.

4.6 Localism and Local Member Involvement

There are no significant implications

4.7 **Public Health Implications**

There are no significant implications

Source Documents	Location
None	

Appendix 1 – People & Communities Risk Register – August 2020

The risks were reviewed throughout August 2020.



Risk #	Risk	Triggers	Control	Residual Risk Level
1	Demand on Coroners	Caseloads increases and complexity expected	New risk - an increase in caseloads is expected	16
2	Financial Pressures on	COVID RELATED: A) An increased in financial pressures for providers	COVID RELATED: A) Although additional national covid monies made available to mitigate, it not enough to cover the costs	16

Risk #	Risk	Triggers	Control	Residual Risk Level
	service providers	(i.e. PPE, Workforce and managing preventative controls	and short-term measure - the LA are working up support plans for the Autumn for Providers	
		 B) Providers unable to continue to operate, due to the increase costs to meet Covid measures: EARLY YEARS - Insufficient early years places available to meet demand CARE PROVIDERS - Reduction in the number of providers able to provide care; Care costs increase as demand exceeds providers available; Financial warnings from providers 	COVID RELATED: B) Commissioning teams in place to retain a close contact with key providers Local Authority to maintain a close contact with providers (i.e. fortnightly forums, weekly sessions with providers where needed etc) Continuity planning to ensure the LA can support appropriately, subject to the options paper above Regular contact with settings Reviewing financial standings of settings Sustainability grant established to allocate when necessary to settings Looking the DSG to check to frontload payments	
		 C) Provider funding and support is due to end in September - Level of demand increases for providers and unable to meet demand. Winter pressures and potential wave 2 will increase the spike in demand on key providers BAU RISK: There is a risk that changes to legislation such as the sleep-in ruling, pension obligations and rises in minimum wage, combined with rates the Local Authority are able to afford will result in providers withdrawing from the market. 	COVID RELATED: C) Options paper being developed to reflect continued support to providers - Market sustainability for consideration (i.e. uplifts opportunities with different parts of care sector) to sustain the market Working with Providers to develop action plans	

Risk #	Risk	Triggers	Control	Residual Risk Level
3	Financial Pressures in People & Communities	 COVID RELATED: A) COVID will impact on the forecast savings anticipated for 2020/21 BAU RISKS: There is a risk across the whole P&C, including Childrens, Adults, Mental Health, Public Health to deliver and manage budgets and make savings. It is recognized that key partners are also under significant financial strain, which may impact on P&C if demand management is not managed or increases. High Needs Block - demand continuing to exceed funding 	 COVID RELATED: A) Business Planning has been started to assess the potential impact on finances in related to P&C savings 1. Review of SEND Provision and government's funding is being reviewed 2. Recruit alternatively qualified staff to support social workers, improved retention package 3. Delivery of the demand management programmes 4. Continue to raise with Central Government regarding additional funding required in Adults Services 5. SEND recovery plan is developed as pressures on home/school transport budget. Action plan developed on reducing demand 6. Jointly funded packages of support 7. Early Help services are operating more effectively to meet demand 8. LGSS IT Disaster Recovery Plan 9. LGSS IT service resilience measures (backup data centre, network re-routing). 10. Version upgrades to incorporate latest product functionality 11. Training for P&C Business systems prior to use 12. Information sharing agreement 13. Backup systems for mobile working 14. Back-up systems for P&C Business Systems 	16

Risk #	Risk	Triggers	Control	Residual Risk Level
			 15. Corporate (Information Governance Team) monitor data handling and security position and improvements 16. Robust MOSAIC programme has been established and a clear plan for implementation is in place 17. Robust implementation programme for LL includes risk control. 	
4	Failure of the Council's arrangements for safeguarding vulnerable children and adults	 COVID Related: a) Lack of staff in safeguarding - due to an increase of those self-isolating or sickness increase b) Reduction in referrals to safeguarding due to lack of visibility of children, families and adults due to the social distancing mandate which could lead to individuals to emotional and physical harm - Adults 	COVID RELATED: A) To source redeployed staff from the county hub to redeploy SW staff across the service and seek agency SW cover as a last resort COVID RELATED: B) * Safeguarding board regularly flooding social media with communications urging the public to report any safeguarding concerns and individuals suffering harm to make direct contact with Social care * Adults and children's social care regularly reviewing	15
		health and Social Work professionals don't have the opportunities to identify safeguarding issues as they are not going into care settings as frequently	 Addits and children's social care regularly reviewing whether face to face contact can be resumed * Developing a proposal regarding a care home support team * Making sure providers are briefed about Safeguarding issues * Liaising with CQC regarding any providers of need 	

Risk #	Risk	Triggers	Control	Residual Risk Level
		c) Adults & Children's Care providers (i.e. children's residential homes, care homes, domiciliary care etc) impacted by Covid due to the inability to apply infection control - turnover of staff; physical environment doesn't enable individual isolation; lack of PPE or appropriate use of PPE; Lack of staff due to self-isolation / sickness	COVID RELATED: C) County Hub redeploying Council staff / reablement staff and volunteers and commissioning St John's Ambulance for volunteering service, CCG Adults social care staff going into care homes to support good infection control Additional government funding made available to support to support infection control measures Health and Social care Multi-disciplinary teams are	
		d) The ability to implement the effective control measures for children with disabilities to have respite care	established to support each care providers Alternative online resources to maintain contact with service users COVID RELATED: D) Reduced the number of children accessing the residential respite provision Created bubbles of individual children and staff to reduce the spread of infection	
		e) Lack of Children in care placements due to Covid	Provided outreach support staff into the homes of children with disabilities where they are unable to access the respite provision	
		F) Our ability to continue to deliver business as usual services while diverting resources to support care providers	COVID RELATED: E) Developing alternative placement provision in case this is needed COVID RELATED: F) Business cases to increase reablement capacity / social work capacity being applied for	
		BAU RISKS: Children's Social Care: 1. Children's social care case loads are too high in some areas	Recruitment campaign on reablement and could over- recruit if required 1. Multi-agency Safeguarding Boards and Executive Boards provides multi agency focus on safeguarding priorities and provides systematic review of	

Risk #	Risk	Triggers	Control	Residual Risk Level
		 2.Some over optimism in relation to risk period posed by Parents 3. Serious case review is triggered Adult Social Care (Inc. OPMH) 1. Care homes, supported living or home care agency suspended due to (safeguarding investigation 2. Outcomes of reported safeguarding concerns reveals negative practice 3. Increase in a notification of a concern 4. Decreased resource within adults MASH and/or Locality Teams 5. Lack of Resource in Contracts 6. Safeguarding Adult review 	 safeguarding activity specific safeguarding situation between partners. 2. Move to non-caseloading team Managers has increased oversight and challenge. Skilled and experienced safeguarding leads and their managers. 3. Comprehensive and robust safeguarding training, ongoing development policies and opportunities for 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 and safeguarding Adult Reviews 5. Robust process of internal Quality Assurance (QA framework) including case auditing and monitoring of performance 6. 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 7. Whistleblowing policy, robust Local Authority Designated Officer (LADO) arrangements and complaints process inform practice. 7a Clear 'People in Position of Trust' policy and guidance in relation to Adults 8. Regular monitoring of social care providers and information sharing meetings with other local organisations, including the Care Quality Commission 	

Risk #	Risk	Triggers	Control	Residual Risk Level
			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 multi-agency partners for both Adults and Childrens. 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	
			11. Caseloads are reducing as the move away from the Unit model to specialist teams becomes embedded. Oversight & challenge from QA Service and the Local Safeguarding Board	
			12. Adults regular meeting to monitor progress and risks with CQC regulator	
			13. Family Safeguarding to keep families together and ensure children and adults services work jointly for the best outcome for the family	
			14. Managing demand and ensuring right children receive right intervention at the right time	
5	Lack of frontline capacity and skills	COVID RELATED: A) Lack of Frontline capacity to meet the demand of winter planning pressures alongside the impact of COVID19 coinciding at the same time	COVID RELATED: A) Update BCP's to include a contingency Increase contact with agencies for workforce to step in as required	15
	shortages in People & Communities	B) Increase risk that "Test, Track and trace" may	Increase recruitment to ensure appropriate cover is available Agreement at JMT in place to over-recruit to ensure we have additional capacity as necessary	

Risk #	Risk	Triggers	Control	Residual Risk Level
		affect the frontline workers (including care providers) the most, who are unable to do their work from home, needing to self-isolate - leading to capacity issues to deliver critical services	COVID RELATED: B) Pre-determined bubbles (squads) of staff so limiting the number of staff needing to self-isolate Update BCP's to include a contingency Increase contact with agencies for workforce to step in as required Increase recruitment to ensure appropriate cover is available Ensuring appropriate PPE is provided and worn	
		C) Increase risk to staff contracting Covid with services reopeningD) Spike in demand for children's services after school return towards the end September (Early Help & Social Work)	COVID RELATED: C) Appropriate risk assessments are completed and in place Appropriate PPE is identified and accessible COVID RELATED: D) Redeployment and/or recruitment of additional staff to meet demand	
		BAU RISKS: There is a risk that the progress that has been made in relation to the recruitment of qualified social workers, team managers and senior officers slows down and the authority experiences a severe skill shortages again.	Recruitment & Retention campaign Apprenticeships for Social Care has been launched	
		Key NHS staff employed by CCC as part of the Learning Disability Partnership are in short supply (i.e.OT's, LD Nurses) The east of England memorandum on agency social worker charge rates is vulnerable at present as a number of authorities are seeking permission to exceed payment rates. Failure of this would increase likelihood of higher turnover among our employed staff		

Risk #	Risk	Triggers	Control	Residual Risk Level
		BREXIT implications		
6	Failure to attract or retain a sufficient People and Communities workforce	 Spend on agency staff within social care workforce is above target as identified by Strategic Recruitment and Workforce Development Board High turnover of social care staff as identified by Strategic Recruitment and Workforce Development Board High vacancy rates of identified key social care roles as identified by Strategic Recruitment and Workforce Development Board Cost of living in Cambridge City is high leading to issues for recruitment and retention 	 COVID RELATED: National Recruitment campaigns has been prevalent for those in key worker industries Recruitment campaigns are ongoing in Cambridgeshire Over-recruited has had agreement in key adult services 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 3. ASYE programme ensures new social workers continue to develop their skills, knowledge and confidence. 4. Review potential recruitment and retention approaches in hard to recruit to parts of Children's 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. Recruitment and retention programme has been agreed 	12

Risk #	Risk	Triggers	Control	Residual Risk Level
			8. Launching a new children's campaign 2020	
			9. Agreement to over-recruit in Reablement to ensure sufficient staff	
7	Failure to adequately deliver the financial assessment service	 The number of complaints increase Continually incorrect invoicing inaccurate data and information Failure to implement the CCC Charing policy 	Transferring the management from LGSS to Adults Social CARE by sept 2020 planning is underway. Management position has been recruited too. Charging policy implementation plan is developed and recruitment of more staff to complete face-face financial assessment due to started in May 20. Slight impact with face to face due to Covid, but work ongoing now. Delay implementation to September - slow transition to moving the financial team function back in-house Increase Adults Finance Team staffing on a temporary basis to become part of MOSAIC project team Preparing a contingency plan MOSAIC has its own Risk & Issue Log Bridging of reablement in certain areas and monitoring demand management A review of streamlining workflows and processes is underway Relocation of staff in Scott house has been completed and has helped to improve	12
8	Children and young people do not reach their potential (educational attainment)	 COVID RELATED: A) Education attainment is affected by non- attendance at school due to Covid B) Outbreaks and local lockdowns for schools may lead to children not attend school 	COVID RELATED: A) The LA is supporting schools to prepare for September opening COVID RELATED: B) Awaiting government guidance on local outbreaks and lockdowns	12

Risk #	Risk	Triggers	Control	Residual Risk Level
		BAU RISKS: 1. The attainment gap between vulnerable groups of CYP and their peers of school age are below targets identified in P&C performance dashboard 2. End of key stage 2 and 4 attainment targets are below those identified in the P&C performance dashboard 3.Percentage of 16-19 years old who are NEET increases as identified in P&C performance board)	 Good governance of Accelerating Achievement and School Improvement strategies and action plans, checking progress and challenging performance, involving executive and service management Cambridgeshire School Improvement Board focused on securing improvements in educational outcomes in schools by ensuring all parts of the school system working together Effective monitoring, challenge, intervention and support of school and setting Develop all children's services to include educational achievement as a key outcome 18-25 team supports care leavers to remain in education or helps them find employment or training 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 Public Health and voluntary partners Provides support and guidance to schools to support the stability of educational placements and transition to post 16 for LAC Cambridgeshire School Improvement Board improves educational outcomes in schools by all parts of the school improvement system working together. Residual Information, Advice and Guidance function overseen by the local authority focuses on the most vulnerable In Cambridgeshire, we have developed a Care Leaver NEET Reduction Action Plan which looks at 6 strategic objectives to help overcome these barriers and to improve outcomes for care leavers in 	

Risk #	Risk	Triggers	Control	Residual Risk Level
			successfully securing education, employment and training opportunities."	
9	Think Communities - Failure to deliver a transformed	There is a risk that failure to deliver a transformed community resilience service that directly impacts on demand management costs and service pressures.	New unified Approach operating Model and business case developed, awaiting approval Demand Management Hub work being developed	12
	community resilience service		Establishment and development of an integrated 'Think Communities' Strategy and plan Think Communities approach being developed and implemented at pace, to create a new collaborative operating model that is place-based, enabling savings and demand management to be achieved across the system	
10	Insufficient availability and capacity of services at affordable rates	 Average number of ASC attributable bed-day delays per month is above national average (aged 18+) as identified by P&C performance dashboard Delayed transfers of care from hospital attributable to adult social care as identified by P&C performance dashboard Home care pending list Gap in alternative to care services The BREXIT negotiations may impact on the care industry in terms of the workforce Provider organisation report not having capacity to deliver services when we need them Length of time services users wait for appropriate services Care home providers reduce the numbers of nursing beds (due to difficulty recruiting qualified 	 Data regularly updated and monitored to inform service priorities and planning Maintain an effective range of preventative services across all age groups and service user groups including adults and OP Community resilience strategy details CCC vision for resilient communities Directorate and P&C Performance Board monitors performance of service provision Coordinate procurement with the CCG to better control costs and ensure sufficient capacity in market Take flexible approach to managing costs of care Market shaping activity, including building and maintaining good relationships with providers, so we can support them if necessary 	12

Risk #	Risk	Triggers	Control	Residual Risk Level
		nurses) 9. Increase in demand for interim beds for domiciliary care 10. Reablement capacity cannot be deployed for preventative place based work due to need to cover gaps or bridging for home care 11. Shortage of operators at reasonable rates	 8. Capacity Overview Dashboard in place to capture 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. 10. Development of a Home Care Action Plan 11. Regular engage with commissioners and providers to put action plans in place to resolve workforce issues 12. Robust Controlling and monitoring procedures 13. Active involvement by commissioners in articulating strategic needs to the market 14. Risk-based approach to in-contract financial monitoring 15. Continued work with VCS for preventative actions 	
11	Insufficient availability of affordable Children in Care (CIC) placements	 COVID RELATED: A) Lack of Children in care placements due to Covid BAU RISKS: 1. The number of children who are looked after is above the number identified in the LAC strategy action plan 2. % LAC placed out of county and more than 20 miles from home as identified in P&C performance dashboard 	 COVID RELATED: A) Developing alternative placement provision in case this is needed 1. Regular monitoring of numbers, placements and length of time in placement by P&C 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 	12

Risk #	Risk	Triggers	Control	Residual Risk Level
		3. The unit cost of placements for children in care is above targets identified in the LAC strategy action plan	care when children cannot live safely with their families.	
			4. Community resilience strategy details CCC vision for resilient communities	
			5. P&C management team assess impacts and risks associated with managing down costs	
			6. Implementation of Family Safeguarding will reduce demand on child in care services as more children are enabled to remain safely within their families	
12	Insufficient capacity to manage organisational change	COVID RELATED: A) COVID has forced the organisation to manage change during a critical incident which has both presented with challenges and also opportunities which will be further explored in recovery plans	COVID RELATED: A) All Council services are seeing change to every part of the organization, allowing there to be a coherent approach to overcoming challenges and identifying new opportunities - recovery plans are being developed to outline these	12
		BAU RISKS: 1. Staffing restructures result in loss of staff	1. Resource focussed appropriately where needed to deliver savings.	_
		2. Aging workforce and succession planning is challenging	2. P&C 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. Commissioning work plans regularly reviewed by Management Team.	
			5. P&C Management Team monitors achievement of savings on a monthly basis - including ensuring capacity is provided	
			6. Transformation team in place and supporting the changes across the organisation	

Risk #	Risk	Triggers	Control	Residual Risk Level
			7. Increased communications to staff of ongoing changes and how they can help influence	
			8. Children's Services restructure is completed and implementation of Family Safeguarding will have minimal impact	
13	Insufficient preventative	Supply chains are no longer able to keep up with demand	Supply line of 'key PPE' is established	12
	procedures and equipment	An increase in demand for PPE as services begin to reopen	Additional suppliers identified and undergo the QA process to enable ordering ease	
	(I.E. PPE) for staff to continue to work to guidance stipulates PPE requirementsLRF PPE store will close end July 2020 - which may lead to supporting external providers Government guidance stipulates the LA will be the 'back up' for key partner services for PPE	A LA PPE team is established to track, process and monitor stock levels and demands (both internally and with external providers if required)		
14	Achieving the new Libraries	1. Unable to achieve the expectations of the new vision	1. Work is progressing on the vision for 2021	12
	Transformation Vision	 Insufficient funding Community capacity Partners are not on board with the vision 	2. Initial vision statement has been produced and will be developed further3. Monthly Programme Board	-
		5. Covid impacts on library delivery	4. New Libraries Programme Board	
15	Failure to	01. Uninformed decision on where the Registration	01. 2020 Project	12
	make an informed and	Service is going to be based in Cambridge 02. The Council is not aware of the requirements of	02. Registration Service Management Plan	
	timely decision	the Registration Service including beyond the	03. Customer communications	
	on the Registration	specification 03. The Service is unable to book ceremonies after	04. Planning Application for use of the Roger	
	Service in Cambridge	September 2020	Ascham Building for Registration Services is going to Planning Committee. Extension agreed to the use of the current building enabled by the delay in the	

Risk #	Risk	Triggers	Control	Residual Risk Level
			Cambs 2020 Project. Customers have been kept updated.	
16	Libraries budget risk	 Income Generation from Libraries Income Generation for registration - particularly on legislative change and home office Coroners - new set of SLA's Capital projects overrunning - particularly Sawston 	 01. Regular budget monitoring 02. Library Transformation Board meeting monthly 03. Close working with the Transformation Team 04. Extra borrowing for 2 years to help with delivering the plan 05. Fees and Charges Policy for Registration Service 06. PCH MF Centre 07. Coroners Service back up plan in place 08. Local contracts in place with regular suppliers 09. New discretionary fees for Registration Service COVID RELATED: Revenue impact of Covid-19 has been captured in business cases. Proactive management brought Registration Services back form lockdown ahead of 	9
17	Increase in Homelessness across CCC	More individuals / families requesting support	 many other councils, enabling revenue to be maximised. Officer Task & Finish group has been developed as instructed by the Communities & Partnerships Committee Committee receives a regular update and report CCC Co-chairs the sub-region housing board Since Covid more homeless people have been able to temporary be housed and work is underway to continue this work through the recovery phase 	9

Risk #	Risk	Triggers	Control	Residual Risk Level
18	Increased prevalence of adolescent young people entering the criminal justice system.	 Existing preventative activity does not meet the needs and behaviours of young people. High demand for some crime types resulting in reduced levels of intervention from some of our partners. 	 1.Continued development of the shared services Youth Offending Service with Peterborough, ensuring best practice is shared and resources are flexed where they are most needed. 2.Development of the statutory youth justice board to ensure a system wide approach is taken to supporting adolescent young people. 3.Continued development of positive interventions, including National Citizen Service, to engage proactively with young people. 	9
19	Partnership agreements with NHS are not agreed between partners or do not deliver what the Council needs	 COVID RELATED: A) Delays in accessing NHS Services may results in having an impact on Adults Social Care (ASC) B) Inability to reach agreement with health partners on financial impact of covid or key areas BAU RISKS 2. S75 with CCG for pooled budget for LDP has not been agreed (Pooled budget for LDP agreed until April 2020 – S75 for Mental Health social workers has been renewed for 1 year) 	 COVIDE RELATED: A) Ensure strategic health engagement in Covid-19 response Compare and monitor recovery plans across key partners COVID RELATED: B) Continued contact with health to establish and agree a financial way forward 1.Discussions underway with CCG about the S75 for LDP now the pooled budget has been agreed until April 2020. 2.Work underway re review of HC costs to inform renewal of pooled budget post April 2020 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 	9

Risk #	Risk	Triggers	Control	Residual Risk Level
			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. P&C have made arrangements for preparing within Inspections	
			10. Next Steps Board oversees preparation for Ofsted inspections of services for children in need of help and protection	
			11. Review the results of the Adults Service User survey	
			12. Adults are aligned for CQC inspections in LDP	
			13. Adults Customer Care Team separate from adults service	
			14. Preparation for the LDP Inspection	
20	MOSAIC Finance Module - ensuring the embedding of the system	 1.MOSAIC system / modules are not working as they should which impacts on transfer from AFM system to MOSAIC 2.Complaints and service user distress about inaccurate invoices 3. Not enough capacity or resources not available to train staff adequately 	Risk reduced as the transition is being implemented and working well. Now to monitor risk into monitoring the embedding of this.	9
21	Failure of information	1.Amount of time P&C Business Systems (Social Care, Ed Case Management) are working and	1. Individual Services Business Continuity Plans.	8

Risk #	Risk	Triggers	Control	Residual Risk Level
	and data systems, particularly with the implementation of MOSAIC in Adults and LiquidLogic in children's.	 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. 4. ONE - Quality of system and sustainability of demand of Service especially SEND 4. ERP- Reports from providers of late payments or no payments Reports from services that have processed and progressed payments, but still no further actions taken from ERP 	 LGSS IT service resilience measures (backup data centre, network re-routing). Version upgrades to incorporate latest product functionality Training for P&C Business systems prior to use Information sharing agreement Backup systems for mobile working Back up systems for P&C Business Systems Corporate (Information Governance Team) monitor data handling and security position and improvements Robust MOSAIC programme has been established and a clear plan for implementation is in place Robust implementation programme for LL includes risk control. 	
22	Failure to work within regulation and/or regulatory frameworks	 COVID RELATED: A) Not meeting statutory requirements and/or to the same level due to Covid-19 and the need to adapt to meet the current need for those most vulnerable - Government guidance can be inconsistent and announcements and changes made with little or no notice BAU RISKS: Poor inspection and/or ombudsman results Higher number of successful legal challenges to our actions/decisions Low assurance from internal audit 	 COVID RELATED: A) Ensuring a link with public health to advise on changes as they are applied 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 	8

Risk #	Risk	Triggers	Control	Residual Risk Level
			 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. P&C have made arrangements for preparing within Inspections 10. Next Steps Board oversees preparation for Ofsted inspections of services for children in need of help and protection Review the results of the Adults Service User survey Adults are aligned for CQC inspections in LDP 	
			Adults Customer Care Team separate from adults service Preparation for the LDP Inspection	
23.	Meeting demand for school places and settings	 Failure to provide our legal requirement for every child of statutory school age to access a place and within a 'reasonable' distance from their home (less than 2 miles for 4 to 8 year olds and up to 3 miles for 9 to 16 year olds) Cut in Government funding for school places 1.Demand on places outstrips sufficiency Failure of not having early years settings funding is low in Cambridgeshire 	 The Education School Organisation plan and demographic forecasts are regularly updated and presented to the Council for publication. Sufficient resources identified in MTFP to support known requirements in the next 3 years if forecasts remain accurate Quality of relationship with schools means schools have overadmitted to support the Council with bulge years On-going review of the Council's five year rolling programme of capital investment. Priority continues to be given to the identified basic need requirement for additional school places 	8

Risk #	Risk	Triggers	Control	Residual Risk Level
			5) Annual School Capacity Review to the Department	
			for Education (DfE) completed in a way which aims to maximise the Council's basic need funding allocation.	
			6) Local and national lobbying (inc. EFA capital	
			funding options, inc. Free Schools)	
			7) Continue to review options around reducing costs	
			including modular technology, use of existing	
			buildings and procurement savings	
			8) Plans for emergency places being developed	
			including pulling forward schemes and additional	
			mobiles	
			COVID RELATED:	
			Due to COVID and government guidance which	
			outlined that children were not 'required' to attend	
			school rom end-March - July 2020. Plans in situ to support schools with reopening in September 2020	