RISK DEFINITION						
RISK REF	**RISK TITLE & DESCRIPTION**	**DEPT.**	**CABINET PORTFOLIO**	**RISK THEME - LOCAL ANALYSIS**	**RISK CAUSE**	**RISK EFFECT**
SR1 / CR1	**Staffing (capacity, skills and knowledge)** - Increasing demands on existing resources	Human Resources & Organisational Development	GOVERNANCE AND LICENSING	STAFF	Budget restrictions have seen services workforce shrink without proportional reduction in demands, increases expectation on remaining staff with more responsibilities and reliance on good will of staff.	Increased stress levels, increased staff sickness, reliance on temporary staff, increased costs, increased mistakes, reduction in morale, service delivery failure (including statutory responsibilities), external sanctions and fines.
SR3 / CR3	**Cyber security -** Vulnerability of the Council 's IT estate to cyber attacks	Digital and Customer Management	GOVERNANCE AND LICENSING	SYSTEMS	Historic lack of investment in IT; failure to maintain systems at most current release and constantly changing threat landscape. Open nature of IT infrastructure (proliferation of devices)	Extended IT outages and significant data loss. Potential fines from the ICO and reputational damage.
SR5 / CR5	**Statutory Compliance and Property Health & Safety** - Non-compliant condition of Council properties including land and buildings	Property	GOVERNANCE AND LICENSING	HEALTH AND SAFETY	Lack of capacity and resources to maintain and manage our land, building and facilities. Failure to operate safe systems for the use and occupation of buildings.	Breach of statutory Health & Safety and duty of care obligations. Potential injury, loss of life, service disruption and damage to property.
SR6 / CC-R1	**Managing Major Capital Projects -** Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget	Cross Organisational	GOVERNANCE AND LICENSING	PROJECTS	High number of projects currently underway requires significant management and governance resource. Resources and timescales associated with bids for project funding can lead to insufficient due diligence leaving the project vulnerable to cost overruns and programme delays.	Delay to delivery of projects, overspend and increasing pressure on council reserves, reputational damage for failure to deliver projects, political pressure from members
SR7 / CR6	**Management of Contract Performance and Delivery -** Ineffective contract management	Legal Procurement and Democratic Services	FINANCE AND PROCURMENT	PROCUREMENT AND COMMISSIONING	Lack of Contract Manager training and capacity.	Potentially significant financial, service delivery, reputational and compliance effects. Council placed in special measures and adverse effect on Council's Value for Money (VfM) rating.
SR8 / CR7	**Data and records management -** Poorly defined records management systems and processes	Digital and Customer Management	GOVERNANCE AND LICENSING	DATA	No corporate records management framework. Historic lack of investment in system controls including user access.	Inefficiencies from time taken finding material. Poorly informed decision-making. Data breaches leading to ICO fine and reputational damage.
SR9 / CR8	**Health and Wellbeing -** High levels of sickness absence	Human Resources & Organisational Development	GOVERNANCE AND LICENSING	STAFF	Increased workload pressure on staff due to budget cuts, loss of workforce and retained levels of expected delivery.	Increased sickness levels (including stress), failure to deliver service statutory duties, decreased staff morale.
SR10 / P-R1	**Demand Management (high demand, sufficiency challenges and budget implications) -** Inability to manage demand within the approved budget	All	ASC CYP	BUDGET	Short term focus on financial prioritisation; Social and economic factors such as increased migration and asylum, longer life expectancy, higher levels of disability, greater levels of need.	Higher number of placements required beyond LA capacity leading to major budget overspends
SR11 / CC-R4	**Risk of impact of No-Deal Brexit** at a local level	All	All	LEGAL	Uncertainty over national decision making process and expected exit from the EU.	Risk of increased community tensions and possible disruption to services and access to some goods / services. Financial risk due to increased demand for services due to recession and loss of EU funding. Risk to recruitment and retention of EU nationals in some services following transition period. Risk of failure to deliver statutory requirements in light of changing regulatory laws and processes. Risk of failure to communicate effectively with those affected by Brexit in the local area.
SR14 / C&P-R1	**Sinfin Waste Plant -** Adverse outcome to estimated fair value determination	Streetpride & Public Protection	COMMUNITIES, NEIGHBOURHOOD AND STREETPRIDE	PROJECT MANAGEMENT	Adjudication does not deliver the expected financial outcome.	Payment of an estimated fair value in excess of that which the Councils consider reasonable and appropriate; further litigation.
SR15 / CR16	**Medium Term Financial Planning -** Changes in Government Funding frameworks	Finance	FINANCE AND PROCURMENT	BUDGET	Rebalancing local govt. funding between central govt. funding and local funds. (external factors comprise of fair funding, business rates retention, business rates reset & elections)	Failure to strategically plan long term finances exposes potential for unidentified expenditure adding additional pressure on financial structure and jeopardising the financial sustainability of the council. Unacceptable strategic & financial risks to the Council.
SR16 / CR17	**Annual Budget -** Non-Delivery of the in-year budget	Finance	FINANCE AND PROCURMENT	BUDGET	Insufficient resources to meet council priorities within the existing financial year due to: - unbudgeted expenditure and unplanned overspend - financial shocks - reduced financial resilience	- Unplanned use of reserve / overspends and its impact on long term financial resilience. - Moratorium on spends have unintended consequences.
SR17 / P-R12	**Failure of Local Authority and Local Area (Local Authority and key local Health partners jointly) to implement the SEND reform –** Failure to make sufficient progress against the WSoA before next OFSTED inspection (a year to 18 months from when the Written Statement of Action (WSoA) was agreed – Dec 2019)	Learning and Skills	CYP	PROJECT MANAGEMENT	1. Lack of senior leadership buy in to project management processes and approach, both within the Local Authority and across the Local Area. 2. Lack of effective communication, engagement and co-production with parents and carers in the implementation of the WSoA and effective co-ordination of this across the Local Area. 3. Lack of clarity, ownership and full accountability around WSoA roles and Local Area responsibilities in implementing the WSoA. 4. High absence levels and staff turnover in SEND statutory team. Leading to insufficient resource to address ongoing high demand for statutory assessments, resulting in non-compliance with statutory SEND requirements and lack of capacity to effectively address key development work identified in WSoA. 5. Skills gaps and a lack of workforce development opportunities across the Local Area for colleagues that support CYP with SEND. 6. Lack of overarching sufficiency in service provision, or service that does not meet the needs of our CYP with SEND across the Local Area. 7. Inability to ensure and evidence that work conducted fully addresses the areas of weakness identified in the WSoA. 8. Further causes from within Derby and Derbyshire CCG that have not been transparently communicated and/or effectively managed but sit outside the direct control of Derby City Council.	1. Derby City Council and Derby and Derbyshire CCG would be vulnerable to further intervention including being required to complete a second WSOA, with a further re-inspection 18 months later. 2. Statutory intervention by Department for Education (DfE) if subsequent inspection outcomes remain poor. 3. Further reputational damage including adverse media coverage, further reduction in parent and carer satisfaction/confidence. 4. Poor outcomes for children and young people with SEND; possibly impacting on services required from Adult Social Care colleagues. 5. Financial implications associated with tribunals and compensation/ombudsmen claims. Recruitment and retention could become more challenging. 6. Derby City Council's loss of credibility resulting in inability to influence SEND reforms on a national level. 7. Poor inspection outcomes for the city's schools if they are not inclusive and supporting the priorities in the WSOA.

Risk Summary

Impact					
4		SR6/CC-R1, SR7/CR6, SR17/P-R12	SR3/CR3, SR5/CR5, SR9/CR8	SR10/P-R1, SR14/C&P-R1
3	SR11/CC-R4	SR15/CR16	SR1/CR1, SR8/CR7, SR16/CR17	
2				
	1	2	3	4

Likelihood
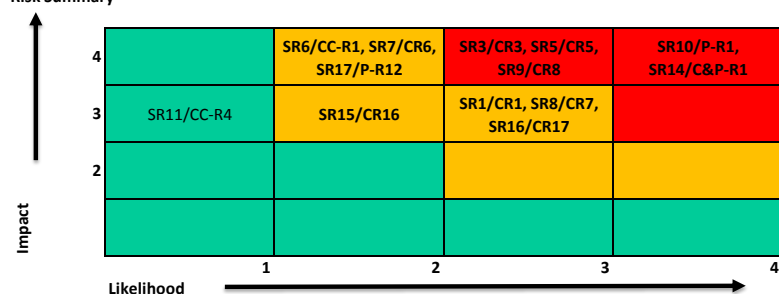
Abbreviations -

SR:	Strategic Risk
CR:	Corporate Resources Risk
C&P-R:	Communities & Place Risk
P-R:	People Services Risk
CC-R:	Corporate Core Risk

Derby City Council

Ref.	Description	Current status	Direction of travel	Risk Summary
SR1 / CR1	Staffing (capacity, skills and knowledge) - Increasing demands on existing resources	9	↗	Risk impact has been re-assessed and lowered to a 3 (high), although the risk still stays the same. Likelihood is still a 'probable'. - 4 controls remain in place. - 2 actions remain ongoing.
SR3 / CR3	Cyber security - Vulnerability of the Council 's IT estate to cyber attacks	12	↘	Risk impact has been re-assessed and increased to a 4 (very high). Likelihood is still a 'probable'. - 6 controls remain in place. - 1 action is now ongoing.
SR5 / CR5	Statutory Compliance and Property Health & Safety - Non-compliant condition of Council properties including land and buildings	12	→	Risk stays significant (probable and a very high impact). - 2 controls remain in place. - 4 actions remain ongoing.
SR6 / CC-R1	Managing Major Capital Projects - Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget	8	↗	Risk likelihood has been reduced from 'probable' to 'possible' (impact stays 'very high'). - 3 controls are now in place (including one that is newly established). - 1 action has been completed while the other remains ongoing.
SR7 / CR6	Management of Contract Performance and Delivery - Ineffective contract management	8	→	Risk stays medium (possible and a very high impact) - 4 controls remain place. - 5 actions: 2 have been completed, 2 remain ongoing and 1 is yet to commence.
SR8 / CR7	Data and records management - Poorly defined records management systems and processes	9	→	Risk stays medium (probable and a high impact). - 4 controls remain in place. *No new actions have been added.*
SR9 / CR8	Health and Wellbeing - High levels of sickness absence	12	→	Risk stays significant (probable and a very high impact). - 4 controls are in place (including one that is newly established). - 1 action remains ongoing.
SR10 / P-R1	Demand Management (high demand, sufficiency challenges and budget implications) - Inability to manage demand within the approved budget	16	→	Risk stays significant (almost certain and a very high impact). - 10 controls are in place - 6 actions: 2 have been completed are 4 are ongoing.
SR11 / CC-R4	Risk of impact of No-Deal Brexit at a local level	3	↗	Risk is now remote (impact stays high). - 3 controls are in place. - 1 action remains ongoing.
SR14 / C&P-R1	Sinfin Waste Plant - Adverse outcome to estimated fair value determination	16	★	New risk defined to replace C&P-R7 - to account for the change in situation due to the change in contractor. Risk is significant (almost certain and a very high impact). - 2 controls are in place.
SR15 / CR16	Medium Term Financial Planning - Changes in Government Funding frameworks	6	★	New risk added in Quarter 3, after Corporate Risk Management Group recommended the original risk on Medium Term Financial planning to reflect future budget pressures. Risk is medium (possible and a high impact). - 5 controls are in place.
SR16 / CR17	Annual Budget - Non-Delivery of the in-year budget	9	★	New risk added in Quarter 3, after Corporate Risk Management Group recommended identification of the risk on non-delivery of annual budget. Risk is medium (probable and a high impact). - 3 controls are in place. *No actions have been added.*
SR17 / P-R12	Failure of Local Authority and Local Area (Local Authority and key local Health partners jointly) to implement the SEND reform – Failure to make sufficient progress against the WSoA before next OFSTED inspection (a year to 18 months from when the Written Statement of Action (WSoA) was agreed – Dec 2019)	8	★	New risk added in Quarter 3, after its identification at the Corporate Risk Management Group. Risk is medium (possible and a very high impact). - 1 control is in place - 3 actions are completed and 3 are ongoing.

Risk	SR1 / CR1	Staffing (capacity, skills and knowledge) - Increasing demands on existing resources	
	Likelihood	Impact	Score
Inherent	3	4	12
Previous	3	4	12
Current	3	3	9
Target	1	4	4
Reason for changes	Risk has not changed, only a re-assessment of the impact.		

Controls	In place as at 31 Dec 2019?	Comments
Allocated Human Resource (HR) advisors to support managers and develop targeted action plans, providing advice on capacity to delivery business/service objectives (this will include supporting in the recruitment of temporary staff etc.)	Yes	Service Directors and Heads of Service have an allocated HR Advisor for their service areas to support them on driving excellent performance and developing business solutions. This includes providing advice on capacity to deliver business and service objectives, as outlined in service Business Plans.
Renewed leadership behaviours to support leaders to be accountable for appropriately managing their services/demands within current capacity	Yes	The nine new leadership behaviours were launched in quarter 2 and have been embedded into the performance conversations with managers. Direct communication on the behaviours from the Chief Executive to all managers has taken place, and the intranet has been updated with the new behaviours.
Refreshed council values to promote personal accountability, working as one 'Great Team'; being bold, strong and caring.	Yes	The updated Council values were successfully launched and promoted in quarter 2, using posters, values cards and other communication methods. A very successful awards event took place in November 2019 to showcase the new values in practice, and to celebrate the success of the nominees in demonstrating the values. The monthly programme focusing on individual values started in quarter 3 and will run until at least March to keep the momentum going. Colleagues are also being assessed on their demonstration of values through the moderation process of the performance system.
More recognition of colleagues that 'go the extra mile'	Yes	The awards event in November was very successful, and the VIP scheme is continuing with weekly nominations in Keeping in Touch emails, including VIP of the month. The values months from December also showcased colleagues demonstrating values in practice, with specific examples. Service Directors have continued to send thank you letters to colleagues recognising them when they go the extra mile.

Please also refer to SR9/CR8 for additional controls in place to manage sickness absence and associated triggers/issues, which impact on demand and capacity in teams.

Further Actions	Progress with action as at 31 Dec 2019	Comments
Targeted work to address resilience hotspots including market supplements, workforce development to address skills gaps/capacity issues etc.	Some slippage	Stress remains the highest reason for absence and has been a key focus for the Health and Attendance Advisors. Targets for attendance management have been set with each Service Director for the next three years, beginning 1 April 2019. Service Directors and Heads of Service have an allocated HR Advisor for their service areas to support them on driving excellent performance, including proactively managing attendance and reviewing resilience hot spots. The use of market supplements to address resilience hot spots remains minimal, with few areas identified where this solution is required. HR Advisors will also continue to work closely with colleagues in Organisational Development team (OD) to support managers to address skills gaps in their team. Work is ongoing by HR and OD with managers to use the Apprenticeship Levy, where applicable, to address skills gaps, and progress is reported to the Apprenticeship Levy Project Board. A workforce profile report was presented to the Corporate Leadership Team (CLT) in early October, and further data on specific hotspots will be reported back to CLT. The data will be used to develop and deliver the Workforce Planning and Development Strategy (WPDS) below. There is a specific emphasis on age and absence in the workforce.
Development and launch of the Workforce Planning and Development Strategy (WPDS)	On Track	Work continues within the OD team to develop and launch the workforce planning and development strategy which is due to be completed by the end of quarter 4.

Please also refer to Strategic R9 / CR8 for additional actions being taken to manage sickness absence and associated triggers/issues, which impact on demand and capacity in teams.

Risk	SR3 / CR3	Cyber security - Vulnerability of the Council's IT estate to cyber attacks	
	Likelihood	Impact	Score
Inherent	3	4	12
Previous	3	3	9
Current	3	4	12
Target	2	3	6
Reason for changes	Risk has not changed, only a re-assessment of the impact. Evolving threats continue to be responded to by continuous development of defence capabilities.		

Controls	In place as at 31 Dec 2019?	Comments
Perimeter security - firewalls etc.	Yes	We adopt a 'defence in depth' approach with security controls at the network perimeter and staff end user devices. Our approach to maintaining the security and integrity of our network is under review as part of the implementation of the replacement WAN and LAN project. Work is now well underway on implementing the new network, both in terms of replacing hardware and introducing new circuits to remote sites.
Anti-malware software	Yes	Anti-malware software continues to be upgraded as required.
PC Patching Programme	Yes	Work is ongoing to identify a new toolset to assist in software patching and enhanced auditing capabilities - the new improvements are being delivered as part of the Windows 10 and Office 365 upgrades, which will be on-going until April.
Information Security Working group (ISWG) meets monthly - looks at all threats and activities the council needs to take to counter those threats.	Yes	The Information Security Working Group (ISWG) comprises of Information Governance and Technical professionals, which meets monthly.
Incident response procedures	Yes	Incident response procedures are in place and regularly reviewed by the Information Security Working Group (ISWG).
GDPR and Cyber Security eLearning	Yes	Enforcement of training completion via Heads of Service continues. The Information Governance team has organised further informal drop in sessions (not formal training sessions). The drop in sessions are intended to cover all GDPR and data protection queries.

Further Actions	Progress with action as at 31 Dec 2019	Comments
Rollout of MFA across the organisation to protect the Council against identity theft	Some slippage	Regular communications are being sent out to all staff to ensure all staff sign up.

Risk	SR5 / CR5	Statutory Compliance and Property Health & Safety - Non-compliant condition of Council properties including land and buildings	
	Likelihood	Impact	Score
Inherent	4	4	16
Previous	3	4	12
Current	3	4	12
Target	2	4	8
Reason for changes	No change.		

Controls	In place as at 31 Dec 2019?	Comments
Health & Safety / compliance assurance now firmly embedded as a key objective in Property Team's Business Plan.	Yes	Compliance is a key area in the Property service business plan.
A Buildings maintenance programme is in place supported by asset surveys to limit likelihood and potential of incidents occurring as a result of unidentified Health & Safety issues.	Yes	In place, and focussed on high priority assets and Health & Safety issues - this is captured through the 2019/20 Capital Programme. The same approach is being worked on for the 2020/21 Capital Programme.

Further Actions	Progress with action as at 31 Dec 2019	Comments
Property Projects and Technical Services' to lead on Policy Development on key areas – Fire, Water Hygiene, Asbestos, Electricity And Gas (as part of the delivery of the Property Compliance Improvement Plan)	On track	Fire policy draft was taken to the last policy committee. We are currently working on the feedback.
Estates and Property Review' Service to undertake the relevant audits for the leased out properties (after the framework was established)	On track	The Audit process remains ongoing with a hybrid approach underway including: 1) physical audit inspections (high priority premises only), and 2) gathering evidence through documentation (lesser priority premises) - though the response rate from tenants is low.
Buildings Manual to be reviewed as part of the Corporate Landlord Business Plan activities.	Some slippage	A review of the revised document has been undertaken and concluded that the format is not fit for purpose. The proposal is to change the format to be easy to use for all parties.
Revise and implement an Estate Management Strategy identifying buildings as vacant, retain, dispose or invest	On track	There is currently a piece of work in place reviewing all the assets to identify if they are retain, review or dispose.

Risk	SR6 / CC-R1	Managing Major Capital Projects - Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget	
	Likelihood	Impact	Score
Inherent	4	4	16
Previous	3	4	12
Current	2	4	8
Target	2	4	8
Reason for changes	Risk is less likely as a result of the training delivered over twelve months. The PMO board reviews projects on a monthly basis, holding projects to account and has agreed to stop a project if it's deemed undeliverable, following the gateway process.		

Controls	In place as at 31 Dec 2019?	Comments
Projects allocated to staff with experience and knowledge of Prince management techniques, all projects sponsored by senior director and regular updates with members to ensure accurate and complete position of project delivery is understood and monitored	Yes	PMO provides governance support and trainings and this was verified by internal audit in Oct 2019. Manager's alerted through Manager bulletin emails of upcoming training events. A new framework developed for Project roles agreed with Corporate Leadership Team (CLT)/PMO Board. Implementation started in June, Communities & Place directorate recruited into new roles advertised (Sep). All projects have a Senior Responsible Officer (SRO) allocated. CLT have oversight of the top 56 projects on the Corporate Project Dashboard.
Monitoring of capital projects by the Corporate Capital Programmes Boards (CCPB)	Yes	Finance undertakes monthly monitoring of the top 12 projects and reports to CCPB are sent quarterly.
Programme Management Office (PMO) in place	Yes	The PMO was set up in September 2018. Current priorities include monthly monitoring of 56 projects on the PMO dashboard, support for the Project SROs, Project Managers and PMO Board and management of the Gateway process. Project Management events held Dec 2019 (including more training on project risks, live project issues, SRO Health Checks and financial reporting).

Further Actions	Progress with action as at 31 Dec 2019	Comments
Review remaining risk registers of all high priority projects on the Corporate Project Dashboard, to ensure project risks are reflected in appropriate strategic / directorate risk registers.	Some slippage	SRO Health Check launched in July - deadline for all projects to complete 25th September - which also picks up management of project risks. Deadline for SRO checks moved to 31st Dec for projects undergoing audit. 25 SRO Heath checks received, 7 were due by 31st of Dec, and 4 have a new agreed deadline of 31 Jan (following completion of their internal audits). Analysis is still ongoing for those received. Completion will depend on the outcome of the SRO health checks.
Project Managers trained on Project Governance including Prince 2 technique.	Completed	PMO provides governance support and trainings and this was verified by internal audit in Oct 2019. Manager's alerted through Manager bulletin emails of upcoming training events.

Risk	SR7 / CR6	Management of Contract Performance and Delivery - Ineffective contract management	
	Likelihood	Impact	Score
Inherent	4	4	16
Previous	2	4	8
Current	2	4	8
Target	2	2	4
Reason for changes	A Contract management solution, once delivered, is expected to reduce the risk further.		

Controls	In place as at 31 Dec 2019?	Comments
All major contracts are issued with support and assistance from procurement team	Yes	Procurement Service continues to support whole Council in undertaking procurement activity
Regular review of the Strategic and Directorate Contract Registers at the Corporate and Directorate Leadership Team meetings and with the Cabinet - to highlight the highest risk/most significant non-compliant contracts and contracts in need of Procurement or action	Yes	Contract Registers reviewed quarterly at Corporate and Directorate Leadership Team meetings.
Procurement eLearning available on the Derby City Council intranet (also covers some elements of contract management)	Yes	eLearning remains in place; compliance is monitored by the Procurement Service.
Apprenticeship Levy for CIPS Level 4	Yes	Managed by the Apprenticeship Levy team in Human Resources (HR) department.
Attendance at East Midlands Heads of Procurement (EMHP) quarterly meeting	Yes	Head of Procurement attended EMHP - last held in Dec 2019.

Further Actions	Progress with action as at 31 Dec 2019	Comments
Enforce Procurement e-learning completion	Some slippage	Enforcement is dependant on the accuracy of the scheme of delegation; the model is no longer compulsory and a working group of budget managers needs to be maintained.
Identify a cost effective Contract Management training route and roll out	Some slippage	Procurement Service and commissioning colleagues continue to explore training options.
Update Oracle scheme of delegation (Finance)	Completed	There has been a corporate push to get this cleansed and it was completed in October. However, budget managers and service accountants need to continually update this for any emerging changes - it is an on-going process
Provide update on procurement and contract management risk at September meeting of Audit & Accounts Committee	Completed	National procurement strategy recognises that it is good practice for elected members to be engaged in internal Procurement strategy.
Review of Contract Procedure Rules every two years to ensure they are up to date and fit for purpose	NEW ACTION with monitoring to commence from summer 2021	N/A

Risk	SR8 / CR7	Data and records management - Poorly defined records management systems and processes	
	Likelihood	Impact	Score
Inherent	3	3	9
Previous	3	3	9
Current	3	3	9
Target	2	2	4
Reason for changes	No change.		

Controls	In place as at 31 Dec 2019?	Comments
Audits of key systems: Information Governance (IG) team support process reviews and audits of key systems after a data breach or rectification request	Yes	A robust data breach reporting process is in place and 'lessons learned' are implemented. 'Lessons learned' are implemented after data breaches and actions, identified as part of audits of key systems, are managed. We are looking to leverage security Enhancements from the Future Network programme and O365 implementation to make further improvements in this area.
Each Service has an Information Asset Owner (IAO) - and together they form the Information Governance Working Group (IGWG). They report any risks and issues associated with their information assets to the IG board.	Yes	The Information Governance Working Group (IGWG) is working on an ongoing programme targeting Information risks and government standards.
Training programme on Data Protection Policy and processes	Yes	Enforcement of training completion via Heads of Service continues. The IG team has organised further informal drop in sessions (not formal training sessions). The drop in sessions are intended to cover all GDPR and data protection queries.
Robust data breach reporting and follow through.	Yes	A robust data breach reporting process is in place and 'lessons learned' are implemented. The IG team request continued swift and comprehensive support from Services with data breaches.

No further actions have been added in Q3.

Risk	SR9 / CR8	Health and Wellbeing - High levels of sickness absence	
	Likelihood	Impact	Score
Inherent	3	4	12
Previous	3	4	12
Current	3	4	12
Target	1	4	4
Reason for changes	No change.		

Controls	In place as at 31 Dec 2019?	Comments
Health and Well-Being Strategy implemented	Yes	This control is in place.
Regular monitoring of sickness absence levels by Corporate and Directorate Leadership Teams; Management responsibility for monitoring and managing workload of team colleagues	Yes	This control is in place. Progress on managing attendance is reported to Corporate Leadership Team (CLT) on a monthly basis at the CLT Performance Board, and this is also considered regularly by Directorate Leadership Teams (DLTs). Managing attendance is also a standing item on the Personnel Committee agenda. The responsibility for monitoring and managing the workload of team colleagues remains a management responsibility, and this responsibility is underpinned by the new leadership behaviours. Managing absence is one of the new corporate objectives for all levels of managers.
Mental Health First Aiders (MHFAs) available to provide information and sign-posting to staff	Yes	Over 150 accredited MHFAs in place by end of December 2019, and a well established MHFA network is in place. Targeted recruitment of up to 400 MHFAs is underway to ensure sufficient provision across specific work areas.
Health and Safety audits (including Stress Risk Assessments)	Yes	*New control added in Quarter 3.*

Further Actions	Progress with action as at 31 Dec 2019	Comments
Monitoring of sickness hotspots with targeted interventions to support a gradual reduction of stress related absence	Some slippage	Managers are accountable for managing attendance in their teams. HR Advisors continue to carry out targeted work with managers to support them to deliver improvements in attendance, and have been delivering focussed attendance management training with departmental management teams. The Wellbeing Advisors continue to offer Health and Wellbeing clinics for managers and colleagues and have carried out analysis of mental health absence trends which has been reported to CLT. Some slippage assigned as although actions/controls are in place these have not yet had an impact on current sickness levels related to stress. Progress on delivering a reduction in absence will be monitored at DLT meetings and CLT Performance Board. More focused work on stress management is underway, including the launch of mandatory training for managers on completing stress risk assessments, and the Health and Safety team have implemented a new audit of health and safety issues in services, including the quality and outcomes from stress risk assessments. A corporate Wellbeing Plan is due to be launched in early Q4 which will state the Council's commitment to colleague wellbeing and outline roles and responsibilities as well as key actions.
Directorate Leadership Teams (DLT) to monitor on a quarterly basis the number of stress risk assessments completed by Heads of Service area	Major slippage	This action has been superseded by the revised approach whereby the Health and Safety team carries out audits in services, with stress risk assessments within their scope. *New control on Health and Safety audits will supersede this action.*

Risk	SR10 / P-R1	Demand Management (high demand, sufficiency challenges and budget implications) - Inability to manage demand within the approved budget	
	Likelihood	Impact	Score
Inherent	4	4	16
Previous	4	4	16
Current	4	4	16
Target	2	4	8
Reason for changes	No change.		

Controls	In place as at 31 Dec 2019?	Comments
Discussions at Strategic level with services outlining justification for budget structure	Yes	Detailed discussions were held with Cabinet members and Corporate Leadership Team (CLT), in relation to the setting of the Medium Term Financial Plan (MTFP).
Close liaison with responsible Cabinet member to ensure Social Care given appropriate focus when reviewing Medium Term Financial Planning (MTFP)	Yes	Cabinet members for Children and Young People (CYP) and Adults & Housing have both been fully involved in the development of the MTFP which includes robust consideration of the extent of any pressures.
Established Learning and Improvement Framework, with monthly audit activity to make sure thresholds are correct and interventions are in line with children, young people and family's needs	Yes	There continues to be monthly audits undertaken, results of these are reported to the newly formed Practice and Improvement Board. The operational service respond to all recommendations to ensure that the loop has been closed and improvements noted. This process is business as usual.
Close working relationship with Service Managers, Directors, Finance and Business Intelligence colleagues with a view to share information on demand levels, accurately account for spend, account for the services already being delivered, and ensure future budgets reflect the forecasted position	Yes	Work remains ongoing in relation to reconciliations between client and financial systems - results in accurate financial forecasting.
Regular senior management scrutiny on spend and commissioned placements	Yes	Monthly reports continue to be taken to Directorate Leadership Team (DLT) on high risk areas. Residential panel continues to scrutinise placements.
Review placement approval authorisations levels for certain needs	Yes	Current arrangements continue until confidence is regained; high cost residential placements still require authorisation of the Strategic Director.
Monthly budget monitoring on the high risk budget	Yes	This remains ongoing and is circulated to management team. Additional reconciliations have been introduced, to support verification of data.
Strategic Director's approval for recruitment to vacant posts, where this recruitment is expected to have an adverse financial impact on the budget manager's budget	Yes	Arrangements in place - Strategic Director has oversight of all requests for recruitment that adversely affect budgets.
Independent Fostering Agency (IFA) payment process improves accuracy and timeliness of payments and enhances system information that supports financial forecasting	Yes	First payment run of IFA placements been implemented through the system. This will improve payment process, accuracy and timeliness and will also enhance the information in the system required for financial forecasting.
Corporate Fostering Board drives forward the strategic priority to increase number of DCC fostering households & retain current carers	Yes	*New control added in Quarter 3.*

Further Actions	Progress with action as at 31 Dec 2019	Comments
Work with partners through Derby & Derbyshire Safeguarding Children Board Demand Meetings to support local decision making and a city-wide understanding of demand	Completed	Following the Joint Targeted Area Inspection (JTAI) inspection lean review of the children's front door completed with new multi-agency arrangements implemented in quarter 3. Impact will be monitored through review of the JTAI improvement plan via JTAI implementation meetings in quarter 4 and beyond.
Undertake 'deep dive' performance reviews, in linked areas, to support strategic understanding and on-going management of demand and the impact of this on our budgets	On track	Performance information in quarter 3 demonstrates the emerging impact of demand management work, including reduction in numbers of children in need and plateauing of looked-after children (LAC) numbers. Mocksted exercise scheduled to commence in Jan 2020 - this exercise will provide an evaluative update on the impact of demand management work since this will look at thresholds for services including children admitted to care.
Redesign of the front door into Adult Services	On track	Work progresses on the redesign of the front door.
Improve sufficiency of placements for looked-after children (LAC) through work with Property services to refurbish and open a 2 bedded children's home	Some slippage	Additional properties have been purchased. Development still required for internal provision enhancements.
Improving sufficiency of placements for LAC through work with Derby Homes on purchasing flats for 16-17 year old looked-after children (LAC) to step down from Children's home	Some slippage	Homes purchased, step downs in plan. This will be ongoing covering residential placements and supported accommodation for 16-17 year olds (primarily unaccompanied asylum seeking children).

Risk	SR11 / CC-R4	Risk of impact of No-Deal Brexit at a local level	
	Likelihood	Impact	Score
Inherent	2	4	8
Previous	3	3	9
Current	1	3	3
Target	1	4	4
Reason for changes	Government has closed Operation 'Yellow Hammer'.		

Controls	In place as at 31 Dec 2019?	Comments
Brexit working group in place and meeting monthly to assess any new intelligence / guidance. Ongoing participation in the Local Resilience Forum.	Yes	The working group has continued to meet on a monthly basis to reflect on the latest intelligence and update the risk log.
Business continuity plans in place with up to date contacts and communications leads in place.	Yes	Business continuity plans are subject to regular review.
Communication plan in place to raise awareness with public, businesses and key stakeholders.	Yes	Communication is reviewed regularly by the working group.

Further Actions	Progress with action as at 31 Dec 2019	Comments
Ongoing monitoring of the Brexit preparedness issue and risk log in light of 'No Deal'	On track	The log has been reviewed on a monthly basis by the working group with appropriate mitigation in place.

Risk	SR14 / C&P-R1	Sinfin Waste Plant - Adverse outcome to estimated fair value determination	
	Likelihood	Impact	Score
Inherent	4	4	16
Previous		*Risk added in Quarter 3.*	
Current	4	4	16
Target	2	4	8
Reason for changes		*Risk added in Quarter 3.*	

Controls	In place as at 31 Dec 2019?	Comments
Full advisor team (solicitors, counsellors and barristers, financial advisers, technical advisers, and expert witnesses) appointed to advise Councils	Yes	Full team remains in place and continues to advice the Councils accordingly.
Survey work in the plant to establish capability and condition - as being done by the new contractor	Yes	This work remains ongoing, with full engagement with the contractor.

No further actions have been added in Q3.

Risk	SR15 / CR16	Medium Term Financial Planning - Changes in Government Funding frameworks	
	Likelihood	Impact	Score
Inherent	3	3	9
Previous	Risk added in Quarter 3.		
Current	2	3	6
Target	2	2	4
Reason for changes	Risk added in Quarter 3.		

Controls	In place as at 31 Dec 2019	Comments
Medium Term Financial Planning (MTFP) over 3 years (including a capital programme)	Yes	Ongoing analysis of funding changes based on emerging intelligence. Regular updates as standing item on Corporate Leadership Team (CLT) meetings.
Reserve strategy and improved reserve levels (ability to respond to financial shocks)	Yes	Monthly reserves monitoring in place with quarterly updates to Cabinet.
Membership of business rates pool to manage financial shocks	Yes	This is business as usual with monthly monitoring and reporting to the pool in place.
Financial modelling (intelligence led) by external consultants	Yes	Membership of SIGOMA and PIXEL with appropriate updates and meetings received and held to ensure latest intelligence is used in forming the MTFP.
Change Derby programme matching resources to outcomes	Yes	Work ongoing with the Change Derby team to ensure resources are matched to requirements of the MTFP for savings delivery.

No further actions have been added in Q3.

Risk	SR16 / CR17	Annual Budget - Non-Delivery of the in-year budget	
	Likelihood	Impact	Score
Inherent	3	3	9
Previous		Risk added in Quarter 3.	
Current	3	3	9
Target	3	2	6
Reason for changes		Risk added in Quarter 3.	

Controls	In place as at 31 Dec 2019	Comments
Right training to budget holder	Yes	Ongoing training as required with period refresh at the beginning of the year - we need to have more emphasis for training in order to establish requirements of budget managers and refresh training needs.
Budgets allocated to budget holders / delegation	Yes	Budgets are allocated to budget holders at the beginning of the year and outlined in Oracle - however more emphasis is required for accountability of budgets and understanding any delegation.
Budget monitoring	Yes	Monthly budget monitoring to Corporate Leadership Team (CLT) and quarterly monitoring to Cabinet to identify issues and any mitigations - ultimately will be use of reserves in 19/20 mainly due to emerging pressures in Peoples directorate (children's services).

No further actions have been added in Q3.

Risk	SR17 / P-R12	Failure of Local Authority and Local Area (Local Authority and key local Health partners jointly) to implement the SEND reform – Failure to make sufficient progress against the WSoA before next OFSTED inspection (a year to 18 months from when the Written Statement of Action (WSoA) was agreed – Dec 2019)	
	Likelihood	**Impact**	**Score**
Inherent	2	4	8
Previous	*Risk added in Quarter 3*		
Current	2	4	8
Target	1	4	4
Reason for changes	*Risk added in Quarter 3.*		

Controls	In place as at 31 Dec 2019?	Comments
Local Area Special Educational Needs and Disabilities (SEND) Board established with external chair and ongoing	**Yes**	The first meeting has been chaired by the external chair; their role will include chairing, agreeing agendas, meeting Senior Responsible Officers (list not exhaustive).

Further Actions	Progress with action as at 31 Dec 2019	Comments
Approval/feedback from Ofsted on the Written Statement of Action (WSoA) submitted on 26 Nov	**Completed**	Approval has been received.
Strategic Director's approval of the project proposal before the proposal can be submitted to the Gateway	**Completed**	Strategic Director's approval has been received.
Establishment of Project Management structure	**Completed**	Project Management structure is included within the Project Proposal that has been approved (see above). This will need communicating out more widely to everyone involved.
Project proposal to be presented at the PMO	**On track**	Final details being confirmed with the Strategic Director, including whether this project replaces the Local Area SEND reforms, whether this is going through gateway 2 or 3 and minor details ref report for submission.
Senior Responsible Officers (SROs) and their teams to provide detailed individual action plans with reference to the WSOA	**On track**	The status of this action is dependent on the progress of individual teams. Subsequent to the completion of this action, a review is planned against the WSOA (with the SROs), to ensure everything has been considered and tracks correctly, parental engagement is being managed across the WSOA, working groups are necessary (and not duplicated) any issues and risks have been considered.
Delivery Group and Impact & Analysis Group within the Local Area SEND Governance structure in the process of being fully established.	**On track**	Details for meetings being finalised, although diary demands are challenging staff are committed to prioritising these meetings as they are critical to the successful governance of Local Area SEND and delivery of the outcomes for the WSoA.

Risk Assessment Guidance

Impact		Remote (1)	Possible (2)	Probable (3)	Highly Probable (4)
Very High (4)		4	8	12	16
High (3)		3	6	9	12
Medium (2)		2	4	6	8
Low (1)		1	2	3	4

Likelihood

12-16	Significant Risk
6-9	Medium Risk
1 - 4	Low Risk

Risk Likelihood Key				
	Remote	**Possible**	**Probable**	**Highly probable**
Certainty	Extremely unlikely	Fairly likely	More likely than not	Almost certain

Risk Impact Key				
	Low	**Medium**	**High**	**Very High**
Compliance & Regulation	Minor breach of internal regulations, not reportable	Breach of internal regulations leading to disciplinary action Breach of external regulations, reportable	Significant breach of external regulations leading to intervention or sanctions	Major breach leading to suspension or discontinuation of business and services
Financial	Below £500,000	Between £500,000 and £1,000,000	Between £1,000,000 and £5,000,000	More than £5,000,000
Operational Delivery	Low level processes would need to be revised but the issue could be resolved	Significant work required by a team to repair operational systems	Significant work required by all levels to resolve the matter	Fundamental organisational changes would be needed
Reputation	Complaints from individuals / small number of stakeholders Low local media coverage	Broader based general dissatisfaction with the organisation Adverse local / national media coverage	Significant adverse national media coverage	Persistent adverse national media coverage
Health & Safety	Minor Injury to employee or someone in DCC's care	Serious Injury to employee or someone in DCC's care	Fatality to employee or someone in DCC's care	Multiple fatalities to employees or individuals in DCC's care
Strategic	Limited impact on achieving organisational strategy	Would impact on the organisational objectives	Would require a significant shift from current strategy and objectives	Would require a fundamental change in strategy and objectives