TRAFFORD COUNCIL

Report to: Accounts and Audit Committee

Date: 19 November 2014

Report for: Information

Report of: Audit and Assurance Manager

Report Title

STRATEGIC RISK REGISTER (SRR) – 2014/15 (November 2014)

Purpose of the Report

The Accounts and Audit Committee is asked to consider this report which contains an update on the strategic risk environment. This includes arrangements in place to manage each of the strategic risks.

Recommendation

The Accounts and Audit Committee reviews this report.

Contact person for access to background papers and further information

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Background Papers: Corporate Risk Management Policy and Strategy

1. INTRODUCTION

- 1.1 The Council's Strategic Risk Register (SRR) contains the strategic risks the Council is likely to face in achieving its high level corporate objectives.
- 1.2 In accordance with the Council's Risk Management Policy, the Corporate Management Team (CMT) provides regular periodic updates on the strategic risk environment and in particular performance in managing the specific risks incorporated within the SRR.
- 1.3 This report is based on information provided by risk owners through September and October 2014.
- 1.4 The report highlights changes since the previous quarterly update and also, stated in section 2 below, key developments since the Accounts and Audit Committee last received an update in March 2014.

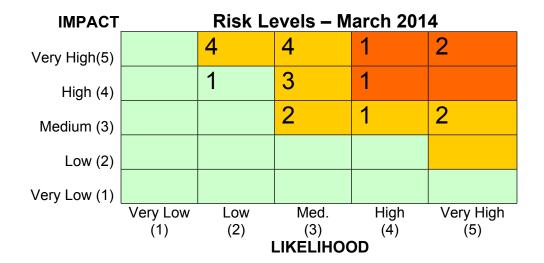
2. <u>THE STRATEGIC RISK ENVIRONMENT – RISK EXPOSURE AND PERFORMANCE MANAGEMENT</u>

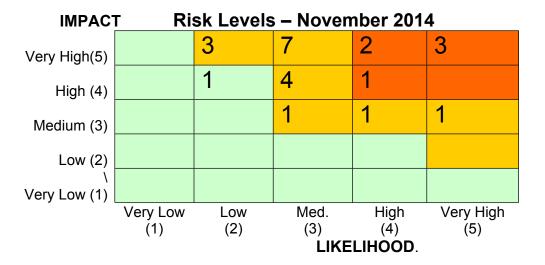
- 2.1 Section 3 of this report contains a summary listing of the highest strategic risks identified which was provided by respective risk owners at the request of the Audit & Assurance Service.
- 2.2 Since the last strategic risk monitoring update was reported to the Accounts and Audit Committee (quarter four report 2014/15 in March 2014), the number of strategic risks has increased from 21 risks to 24 risks. Two strategic risks have been removed from the Register and five strategic risks have been added to the Register. Details are as follows:
- 2.3 The strategic risks to be removed from the Register are:
 - SR15 Financial and other implication as a result of coalition Government policy to fast track initially "outstanding" schools and then all other schools to academy status).
 - The risk to the Council has now stabilised and the likelihood and impact of more primary schools converting to academy status is considered low. Activity will still be monitored through the CYPS Business Delivery Board.
 - SR21 (Ability to support schools in delivering the new national requirement in supplying free school meals (FSMs)).

 Following the receipt of funding and near final implementation of the equipment infrastructure (with work outstanding on only 8 of 57 schools, and all due to be completed around the time this report is issued), all schools required to meet the national requirement of supplying FSMs have complied. It is therefore recommended that the risk be removed from the Strategic Risk Register.
- 2.4 The strategic risks added to the Register are:

- SR15 (risk added in quarter two) Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014.
- SR21 (risk assed in quarter two) Failure or delay to implement new Adult Social Care System (Liquid Logic).
- SR22 (risk added in quarter one) The Transformation Programme savings will not be delivered in full.
- SR23 (risk added in quarter one) The Reshaping Trafford Council Programme doesn't progress to plan and /or deliver its expected outcomes
- SR24 (risk added in quarter one) Ability to implement the Early Help (Wellbeing Hub) in Trafford by April 2015. Risks around capacity, timescales, resources, interdependencies and sufficient co-production. New interdependency with health and social care integration programme requires a review of plans and programme governance risking possible delay.
- 2.5 Three risks have increased their risk exposure score since the last Account and Audit Committee Report:
 - SR12 (Failure of the Adult Safeguarding Service) has increased from medium risk of 10 to a high risk 12.
 - SR13 (Major event leading to inability to deliver critical services to vulnerable people) has increased from a medium risk of 9 to a high risk of 16.
 - SR16 (Adult Social Care Budget 2013/14 & 2014/15: Ability to implement wide range of savings proposals in the current economic conditions) has increased from a medium risk of 15 to a high risk of 25.
- 2.6 The risk chart on page four shows an analysis of the current strategic risks. The chart analyses the levels of risk exposure in terms of impact and likelihood. The number of strategic risks for each risk level is shown. There are 24 strategic risks (six of which are considered high level). The highest risks reflect risks relating to the Council's medium term financial position (SR4) and risks in relation to managing demand and budgets in Adult Social Care (SR8 and SR16).

Comparison of Risk Levels March 2014 and November 2014





High Risk Medium Risk Low Risk

3. Summary Table –Strategic Risks (November 2014)

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Risk	Strategic Risk Title / (Directorate) / (Portfolio)	Risk Level	Management of Risk - Direction of Travel *	Comments
1	Major regeneration projects, including Altair, Altrincham Strategic Framework delivery, Old Trafford Master Plan (OTMP) and Carrington development do not proceed due to economic and financial constraints. (EGEI)/(Economic Growth and Planning)	8 Low		 All project risks contained and detailed within individual project plans. Overall, all projects are within tolerance. Altair planning application has been approved. Funding has been approved for the OTMP, and Land Pooling Agreement approved by the Executive March 2014 (subject to final agreement and signing, anticipated for Autumn 2014). Altrincham public realm strategy agreed and phase 1 complete. Procurement of design consultants for phase 2 commenced. Proposals for new Altrincham Library approved at Executive. Agreement for lease in place. New operator for Altrincham market appointed and Operating Agreement and Agreement for lease completed (November 2013). Stretford Masterplan approved (January 2014). Advisers for Lacy Street in place and procurement of public realm design consultants underway (September 2014). Draft Altrincham Strategy approved (January 2014 and consultation complete (April 2014)). Sale of Carrington by Shell to Langtree completed and new project governance structure agreed (December 2013).
2	Whilst safeguarding services in Trafford have been inspected and rated by OfSTED as good with good prospects for improvement, this is an area of Council responsibility that requires constant high levels of vigilance to guard against the risk of harm or abuse to children that could have been prevented through intervention and support of services. In particular, the risk of the Safeguarding Board not being effective in undertaking its duties and responsibilities and/ or	20 High	*	 Trafford took part in a Safeguarding Peer Review in February 2013 and received the final letter in June 2013. An action plan in response was agreed and is complete. The overall messages about safeguarding were very positive, with recognition of good practice, strong partnership working and a learning organisation. The feedback was helpful in confirming for us the areas of continued development and improvement which were already underway and the findings were in line with our own evaluation of strengths and areas of development needed. OFSTED implemented their long awaited new inspection framework for local authority safeguarding arrangements in November 2013 and a number of authorities have now been inspected. Authorities only receive 24 hours'

insufficient numbers of staff, particularly social workers with relevant experience, to provide effective safeguarding services to children and young people.

(CFW)/(Children's Services)

notice of the start of the four week process. Trafford has considered the new criteria for achieving an outcome of "good" and has worked on making sure the information required as soon as the unannounced inspection starts can be available. It is clear from the early inspections that the standard required to achieve an overall outcome for "good" is higher than previously.

- With regard to the general overview of safeguarding:
 - Partnership working and communication in safeguarding services remain good, both within the CFW and between the CFW, health partners and other agencies. Guidance and direction for staff are good and staff report experiencing professional challenge and support, with accessible managers and clear decision making.
 - Trafford continues to have a good reputation as an Authority, with high numbers of applicants for posts in CFW and positive feedback from staff who have come to Trafford from other Authorities. However, several high quality managers are in the process of leaving to pursue career opportunities elsewhere and this will mean a short term loss of skill for Trafford that it will be important to replace quickly.
 - Caseloads are high but manageable. The workload management system indicates that staff are working at capacity and this is kept under review on a monthly basis.
 - Training and support for social work staff has been reviewed to comply with the new national professional capabilities framework that is still in development. Training for experienced workers is now being developed to comply with the new requirements and Trafford has identified a Principal Social Worker for Children's Services in line with the national requirement.
 - A partnership response in respect of Early Help for families is a priority as part of the response to the Munro Review of Child Protection and a strategy has been developed to reflect the work already undertaken and the work needed for the future.
 - The Family Justice Review recommendations have been implemented and the new court timescales are being met but are very challenging. This requires all Authorities to achieve outcomes for children in shorter

			timescales and for more expert work to be undertaken by Social Workers rather than additional professionals. There remains heightened awareness regionally and nationally around child sexual exploitation. Trafford has a clear strategy and action plan on a partnership basis to manage this potential risk. New statutory guidance has recently been implemented in relation to young people who go missing and this has also been considered and addressed in Trafford.
3	Demand for school places under-estimated and/ or additional school places are not delivered to satisfy increased demand. (CFW)/(Children's Services)	15 Medium	 All children have been allocated places for the 2014/15 academic year. The demand for primary and secondary school places continues to be monitored and capital resources allocated to ensure sufficient places are provided to meet our statutory duty. A two year resource allocation has now been received from Department for Education (DfE) and a Capital Programme is planned in line with projections. A secondary sufficiency review has been completed with schools and academies to manage the projected increases working through from the primary sector. An implementation plan is being developed following approval of the outcomes by the Council Executive and Secondary Schools. Capital implications of the SEN review are also being implemented to meet additional demand for places.
4	Continuing uncertainty regarding the Council's medium term financial position given the reliance that exists on support from Central Government, cost pressures within the existing budget and major changes in the administration of Business Rates resulting in a greater risk being transferred to local government. (T&R)/(Finance)	25 High	The last Comprehensive Spending Review (CSR) was in June 2013 for the years 2014/15 and 2015/16. No further CSR is currently planned, and it may be unlikely that there will be a formal announcement on Local Authority funding ahead of the general election next May. Reasonably reliable indicative figures for Government support only exist for 2015/16 and best estimates are being used for future years. In addition: • The budget for 2014/15 has been approved, although it is now recognised that there is budgetary pressure in adult social care for which some in-year measures have been proposed, and residual matters rolled up into the 2015/16 budget planning process. • It is estimated that the total budget pressures facing the Council over the next three years are £57m. Of this some £25m is in respect of 2015/16. • Draft budget proposals have been announced

			 for 2015/16 and are now subject to formal consultation. The usual rigour around business cases and the robustness of the Budget will be applied. A significant provision has been set aside on the balance sheet as at 31 March 2014 which will mitigate to a large extent the risk from backdated rating appeals. Some risks remain in that monies may need to be set aside to fund a future safety net contribution at the time of the next valuation in 2017. Shortfalls against base line caused by any means are 49% funded by the Council up to a safety net of c. £2.4m. Only 24.5% of income above base line can be retained by the Council.
5	Availability of capital resources from sales of surplus assets and Government Grant to support the Capital Programme. (T&R)/(Finance)	9 Medium	 Nationally, Government funding has been suppressed and cautious estimates of funding have been assumed by Trafford for its current Capital Programme. The sale of spare Council assets has also been suppressed due to the economy. This has reduced the availability of local discretionary funds. The current plans for 2014/17 maximise the use of LSVT VAT receipts from Trafford Housing Trust. Historically an element of these has been retained to support a number of environmental warranties e.g. asbestos, given to THT following the transfer of housing stock, but THT has confirmed that no further claims are anticipated. In the event of any future valid claim any cost would need to be met from existing revenue or capital resources. The Capital Programme and level of available resources continues to be monitored and reported to the Executive on a quarterly basis. As part of the current budget process the 2014/17 Programme has been reviewed to ensure it remains affordable. The Community Infrastructure Levy represents a potential significant improvement in the availability of funds in the medium term.
6	Ability of partnership working in relation to vulnerable adults and older people. (CFW)/(Adult Social Services and Community Wellbeing)	12 Medium	 The Health and Wellbeing Board is established. The Health and Wellbeing Strategy and underpinning Action Plan is progressing with leads using a report template in partnership with the Clinical Commissioning Group (CCG), and wider stakeholders. A Health and Wellbeing Programme Delivery Board continues to populate the action plan on a wider partnership footprint. Risks: Lack of clarity and support regarding monitoring and reporting data on a more regular basis than

7	Ability of partnership working to release resources with sufficient speed and execution to deliver joint objectives around children. Increased risk from role of National Commissioning Board (NCB) local area team as associate commissioner and lead funding agency for health visiting and some school nursing services.	15 Medium	annually. The integration of Adult Social Care Operational Services and Trafford Provider Services has continued to progress based on strong project management arrangements. A formal partnership agreement was signed and agreed in October 2013 and agreed by the Full Council Executive. Implementation is in place and being delivered on schedule. The transfer of community health from Trafford Provider Services to Pennine Care has been successfully completed. Heightened awareness nationally around safeguarding – elderly and vulnerable adults. Risks around ensuring all elderly and vulnerable adults in Trafford are safe and potential reputation risk is mitigated. Strategic Partnership Agreement (Section 75) for CYPS Integrated Commissioning revised and in place. Consistent contract management arrangements in place for community health contract. On-going risk in relation to the fragmentation of commissioning arrangements in the Health Sector. This includes transfer of commissioning responsibilities for some services including Health Visiting to the Council in 2015. Revised governance arrangements have been established to support delivery of the partnership agreement.
8	CFW)/(Children's Services) Demand for eligible services outstrips resources in adult social care. (CFW)/(Adult Social Services and Community Wellbeing)	25 High	 Throughout the summer hospitals have been on a continued high alert. This has seen a continuous demand placed upon the homecare market. The increase in demand re-hospital discharges has placed a further pressure on the reablement service which has seen an increase in reablement bypasses. Increased numbers coming through reablement and homecare adding pressure to financial resources. Increase in number of service uses who are therefore requiring long-term homecare, causing an increase in required budgets. Business Delivery Programme Board is responsible for monitoring and managing demand, performance and savings delivery based on a collaborative model, including commissioners, operations, health colleagues, Finance and Performance. The newly revised resource panel is functioning

9	Failure of the Adult Safeguarding Service. (CFW)/(Adult Social Services and Community Wellbeing)	12 Medium	successfully and has seen changes in presentation and the added challenge the forum brings to each and every placement. • A Business Case with regard to the reshaping of Trafford offer has been put forward for consideration by elected members which will add to the number of work-streams in managing the demand. • The Telecare offer has been accelerated evidenced by the launch of the Telecare Pledge to all residents in Trafford over 80+. • An external pilot in relation to Assessment and Reablement continues to be delivered to support the overall reablement service. • Strong operational links developed with the hospitals to manage delayed transfer. • Extensive work with University Hospital South Manchester (UHSM) with regard to the correct identification/classification of section 5s has been completed. • Increased activity at UHSM causing increased pressure on Social Care resources has seen a reduction in the overall capacity within the residential and nursing sector. • Actions and activity arising from the Budget Monitoring Investigation Action Plan have and are being implemented and will be updated to the Accounts and Audit Committee. • Development and launch of new Safeguarding procedures. • Refresh of Adult Safeguarding Board. • Safeguarding procedures have been reviewed. • Senior Learning & Development post vacant. Impact on sustaining competency in relation to implementation of practice with both internal and external agencies. • Serious Case Review Panel reviewed and in place. • Recent court judgements lowering the threshold for Deprivation of Liberty Orders. This requires increased Social Work capacity and will impact
10	Breach of health and safety legislation leading to prosecution under the Corporate Manslaughter Act. (T&R)/(Transformation and Resources)	10 Medium	 Revised policy and guidance and an accompanying toolkit on managing violence and aggression has been produced. This assists managers and staff in reducing the risk of violence and aggression towards staff and signposts to support available and actions to be taken in response to incidents of violence and aggression. To meet HSE requirements in respect to ensuring that supervisors are adequately

11	Council does not agree, adopt and deliver carbon reduction targets. (EGEI)/(Environment and Operations)	12 Medium		trained to properly plan, supervise and ensure that work at height is carried out in a safe manner, a programme has been initiated where supervisors carry out checks that employees are following a safe system of work (regarding work at height) whilst out on site. Training has been provided to all managers and supervisors whose staff work at height, to help them review their safe systems of work and risk assessments in relation to working at height. Trafford has successfully submitted its CRC return by 31 July 2014. Trafford will fall out of the CRC Scheme at the beginning of Phase 2 in 2014/15. Voluntary reporting of Greenhouse Gas information to Department of Energy and Climate Change (DECC) has been made by the 31 July deadline. The transfer of the Council's energy data to a new system (Systems Link) will take place shortly. A draft Energy and Water Management Plan has been completed to provide a framework for carbon emissions reduction. The Council withdrew from the AGMA Non-Domestic Energy Efficiency (NDEE) programme for schools retrofit. The NDEE scheme is currently under review at AGMA level. The Council is engaging with the Greater Manchester Heat Network Programme looking at projects for Trafford Park. Latest figures from DECC (2012) show a rise in carbon emissions for the borough from the previous year. This rise is replicated across GM and nationally and is most likely due to a colder
10				summer that year.
12	Performance targets relating to Adult Social Care services are not met. (CFW)/(Adult Social Services and Community Wellbeing)	10 Medium	*	 Monitoring is in place and a range of weekly, monthly and quarterly reports are overseen by Business Delivery Programme Board. Performance is monitored against national and local performance indicators as per Directorate Performance Framework. The overall improvement in performance evidenced by year has been significant. It is important to note that the set of Adult Social Care returns is to change from 2014 / 15 and the implications for on-going indicators and targets is, as yet, unclear. Related to the above, the baseline for the older people permanent residential admissions measure included as part of the Better Care

			Fund (BCF) metrics is calculated using the old methodology in the Adult Social Care Combined Activity Return. From 2014/15, this information will be generated from the new short and long term (SALT) return. There is no indication as to what the overall implications of this will be and the impact on the figures reported. • Delay to the implementation of the replacement IT system in Adult Social Care (Liquid Logic) may compromise the ability to produce accurate end year reports across a range of indicators as they will not be based on full year data collection.
13	Major event leading to inability to deliver critical services to vulnerable people. (CFW)/(Adult Social Services and Community Wellbeing)	16	Due to the current levels of demand on eligible services, current demands are outstripping resources available. Any major event such as a flu pandemic would have serious connotations on the ability to escalate current services.
14	Failure to complete the Business Continuity (BC) Programme Project, resulting in an increased risk that the Council may fail to deliver Council services in the event of significant disruption. (T&R)/(Transformation and Resources)	10 Medium	 In the Summer 2013 the Business Impact Analysis (BIA) and the Business Continuity Plan (BCP) templates were completely revised and have since been issued with other guidance as a BC Toolkit hosted on the Council's Intranet site. At the same time the Council's web pages were updated with further information and continue to comply with the Civil Contingencies Act in regard to providing advice to the public and businesses. Amendments to the Intranet and website pages are completed as necessary by the Emergency Planning Manager and are currently up to date. The current BC Policy was approved by CMT in December 2013 and will need further amendments to reflect service changes, but will remain broadly the same. The T&R Directorate have undertaken a table top exercise to test their BC arrangements during an ICT disruption. An action plan was developed following the disruptive weather in February 2014 in order to better prepare Council services for dealing with similar incidents. Under the Reshaping Trafford banner the Council will need to ensure that outsourced Council Services have robust BCP. The Emergency Planning Manager, together with Manchester City Council and AGMA have been looking at the provision of an online e-

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15	Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014.	15 Medium	learning package for internal use at Trafford Council. There has been agreement in principle, but the logistics of implementation will have to be worked through. • A spread sheet outlining the structure of the Council highlights the current status of business continuity planning across the Authority, using the Red, amber and Green (RAG) system. • An updated position statement is to be presented to CMT in December 2014. • For ease of reference a summary of the RAG spread sheet is outlined below: • Children, Families and Wellbeing (Adults and (Children), All BIAs and necessary BCPs were completed in 2013 and are now up for review. • Economic Growth and Prosperity. All BIAs and BCPs were completed in 2013 but will now need updating in the current review to reflect Directorate changes to EGEI. • Environment, Transport and Operations. Still awaiting Environment Strategy, some of Environmental Operations, School Transport and Public Protection. These will all need to be reviewed and also need to reflect the changes to EGEI. • Transformation and Resources. Still awaiting responses from Legal and Democratic, and Culture and Sport. ICT are now in the process of updating their Disaster Recovery/BCP. • Corporate Plan. The completion of the Corporate BCP is dependent on service areas completing their analyses of their business. A draft version is currently being prepared. There has been a tremendous amount of work across all the services updating their plans which in turn will lower the risk of a failure to deliver during a business interruption. Work continues on chasing those services that have analyses outstanding. New Risk • SEND requirements of the Children and Families Act came into force on the 1 September 2014. • All new cases are now subject to an Education, Health and Care Plan rather than a Statement of Special Educational Needs
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	ZU14.		of Special Educational Needs.
	(CFW)/(Children's Services)		 Transition plan is in place to convert
	,		Statements to Education, Health and Care (EHC) Plans.
			Local Offer published in September 2014 and
			consultation on revised policies in line with new Code of Practice to start in October 2014.
			Code of Practice to Start in October 2014.

			Work underway to establish an integrated referral and assessment service to enable
16	Adult Social Care Budget 2013/14 & 2014/15: Ability to implement wide range of savings proposals in the current economic conditions. (CFW)/ (Adult Social Services and Community Wellbeing).	25 High	 The demand management remains a significant risk and is mirrored nationally. The demand pressures will be monitored through the Business Delivery Programme Board on a weekly basis throughout the year. The revised resource panel will monitor individual placements and add a further level of scrutiny. The finance sub-groups of the Business Delivery Programme Board will monitor current and projected spend escalating issues as and when needed to the SLT. The increasing pressure of the Learning Disability (LD) Pooled Fund the Directorate will continue to be a priority linked to in year Recovery Business Cases and 2015/16 Business Cases currently underway. The target of achieving a balanced position over a two year period will be very challenging. The LD Partnership Agreement will be reviewed including revisiting the contribution to the Pooled Budget from the CCG. Additional pressures from Acute Wards and Homecare Framework. Actions and activity arising from the Budget Monitoring Investigation Action Plan have and
17	Inability to meet Trafford residents' requests to have burials within the local area due to insufficient land. (EGEI)/(Environment and Operations)	12 Medium	 will be updated to the Accounts and Audit Committee. Agreement in principle reached to purchase additional land. The Council is in dialogue with the landowner, the National Trust to conclude the land acquisition. The anticipated final purchase date is subject to the agreement by the National Trust. Additional possibilities are still to be investigated for land adjacent to Urmston Cemetery. Risk remains medium. However, if the land cannot be purchased by November 2014 we will need to raise the risk to High. Planning application to be submitted following acquisition.
18	The Council website is not easily accessible, services are unable to update information or provide service responses fast enough through digital	12 Medium	 Customers have a greater and growing use and dependency on websites to access up to date information and services, including financial transactions. Trafford Council's website and supporting infrastructure, including IT, Customer

challenges to meet customer expectations. Other channels of communication – face to face, telephone and Member's surgeries - gain increased numbers of requests due to reliability issues around digital channels.

(T&R)/ (Transformation and Resources).

- Relationship management (CRM) and content updates from all service areas need to be robust to support customers in accessing information and services; and allow them to carry out financial transactions. This also protects and promotes the Council's reputation.
- The Council website was re-launched on 1
 October 2013 and is far more transactional than
 the previous version with Apply for It, Book It,
 Pay for It, Request It and Say It boxes that
 allow customers to self-serve. All services now
 have the capability of updating their own web
 pages and key members of staff throughout all
 Directorates have received training on the web
 Content Management System (CMS).
- The Customer Strategy sets out the priorities for the Council around channel shift and how we will meet the challenges that creates.
- The new CRM System will come on stream in early 2015 and from that point forward services will go live on an incremental basis. This will allow for further customers to self-serve where they can.
- The procurement process for the new CRM system has been completed and the contract has been signed. The appointed provider, Asidua, is now on site working with Trafford staff. Trafford's Implementation Team have had in-depth engagement with 31 services so far to understand requirements, the majority of these services are those going live in phase 1. The Team are continuing to speak to remaining services and updating business cases.
- The CRM process was subject to a Local Partnerships review and the outcome was Amber/ Green which is defined as 'successful delivery appears probable however constant attention will be needed to ensure risks do not materialise into major issues threatening delivery'
- The website now has Browse Aloud functionality. This enables people to access the website whose first language is not English and those who have visual impairments that make reading text difficult. The software translates the text into a number of other different languages chosen from a drop down list. Additionally the top 20 languages can also be translated from text to speech.
- Work is nearing completion on the 'microsites' (i.e. individual sites linked to the mail Council website) to migrate the content into the main

19	Impact and implementation of the Care Act. Royal Assent was granted to the Care Bill in May 2014 and it is now the Care Act. The Act represents the most significant reform of care and support in over 60 years, putting people and their carers in control of their care and support and introducing a cap on how much people will have to pay for the costs of care in their lifetime. Other key elements include new rights for carers to assessment and support, introduction of a national eligibility threshold for care and support, Local Authority responsibility for preventative services and the provision of universal information. (CFW)/ (Adult Social Services and Community	15 Medium		website. A rationalisation of these sites was completed too as some had not been updated or accessed for a considerable time. This work has meant that the content of the remaining sites is up to date and relevant. • As a result of the CRM work there will be a significant increase in the range of services that can be accessed and reported via the website. • A communications strategy is in place to inform customers and staff of the changes. • Programme Manager, Board and governance arrangements established to oversee the implementation of the Care Act programme. • Eight work streams created to deliver the changes and reforms outlined in the Care Act. • The deliverables and timescales mapped across the programme to ensure Trafford meet the Care Act requirements in a timely manner. • Reporting mechanisms in place to map progress and highlight risks. • Initial financial modelling taken place to understand the financial impact of the Act, further work is planned to build a comprehensive picture.
20	Wellbeing). Trafford Council must ensure	15 Modium	•	Citizens and businesses have a right to expect data hold about them to be treated in a course.
	that information held about citizens, employees, partners, contractors, members and organisations in Trafford is safe in their hands. To be able to assure its partners and the public that this is the case they need to demonstrate that they are handling personal/ sensitive and commercial data securely both in technology and physical terms. They also need to ensure that 3rd parties acting	Medium		 data held about them to be treated in a secure manner and only shared on a need to know basis. Employees, Partners, Contractors and members have the right to expect data held about them to be treated in a secure manner. Trafford Council have a responsibility to protect their data and information including building and equipment security. The Information Security Governance Work Stream have developed all relevant policies, procedures, communication and education including mandatory courses for all employees, partners and members. These policies and

	on their behalf are handling their data sets in accordance with Trafford Council's policies and procedures. This is a corporate risk and the risk to the Council is reputational, financial, adverse publicity and could ultimately be a breach of the Data Protection Act.		procedures have been communicated to the Council and the first tranche of training has been rolled out. The annual work plan is successfully being delivered with a completion of the 31 December 2014, with a new work plan being developed to pick up new activities. Information Asset Owner are progressing the embedding of information in the Council's day to day activities. Information Asset Owners are progressing the
	(T&R)/ (Transformation and Resources).		 embedding of information in the Council's day to day activities. Corporate Information Governance Groups are assisting in embedding information governance in the culture of the Council by using team meetings and 1:1 supervision as their forum.
21	Failure or delay to implement new Adult Social Care System (Liquid Logic). (CFW)/(Adult Social Services and Community Wellbeing)	20 High	 New Risk Business continuity plan is updated to include an interim non Adult Social Care Review System for new and existing business. Next data migration Round (DM6) will be a full data push and will confirm the length of the data freeze. Liquid Logic (LL) and Oxford Computer consultants Risks, Assumptions, Issues and Dependencies (OCC RAID) Log updated weekly during project to identify problems and provide solutions. Escalation process established to communicate issues and risks. Softbox will be used during the data freeze to pay providers and invoice clients until LL recovery plan is complete. Finance data freeze strategy is almost complete and will be presented to the Board for finance. Finance will be identified to assist with data entry into LL after migration.
22	The Transformation Programme savings will not be delivered in full. (T&R)/ (Transformation and Resources)	15 Medium	 The Transformation Portfolio savings targets are reviewed and monitored monthly. In May, the savings targets were reviewed by TPR. As a result, the savings target is revised from the original value of £5,559k of the £13,659m MTFP savings for 2014/15 to £5,484k of £13,776k. At August 2014, of the revised savings target £4,746k (86.5%) had been delivered. Based on the level of savings achieved to date and the governance improvements in place, the risk is being managed proactively.
23	The Reshaping Trafford Council Programme doesn't progress to plan and/or deliver its expected	15 Medium	The programme is still on track to deliver its objectives and is routinely monitored by TPR, CMT and Members. It is envisaged that from April 2015, the Transformation Programme

	outcomes.			becomes the 'Reshaping Trafford Council
				Programme' and all project activity planned
	(T&R)/ (Transformation and			links to it. On this basis, the budget consultation
	Resources)			process and proposals for 2015/16 will be built
	, , , , , , , , , , , , , , , , , , , ,			around the Reshaping Trafford Council
				Blueprint.
				The programme was subject to an independent
				review by Local Partnerships in July 2014. This
				was completed at the Council's request to
				provide an objective and strategic level
				assessment of the programme's outcomes and
				objectives and confirm the fit with the Council's
				overall strategy. The review rated the
				programme as 'amber/red' but acknowledged
				the programme is still forming and that the
				budget process for 2015/16 will further shape it.
				An action plan has been produced which
				addresses the eight recommendations made by
				the review and this has been approved and will be implemented in full by February 2015,
				providing a solid governance foundation for the
				programme going forward.
24	Ability to implement the Early	15	4	Programme Manager in place.
	Help (Wellbeing Hub) in	Medium	(49)	Programme Board established.
	Trafford by April 2015. Risks			Baseline work has taken place to scope and
	around capacity, timescales,			model the Wellbeing Hub resulting in an initial
	resources,			business case.
	interdependencies and			Engagement work has taken place to co-
	sufficient coproduction. New			produce an initial model in conjunction with the
	interdependency with health			public, partners, providers and staff.
	and social care integration			 August 2014 – Hub has now been included with
	programme requires a			integration to form a combined work
	review of plans and			programme, as part of Reshaping Trafford
	programme governance,			'Early Help Hub and Integration'.
	risking possible delay.			This Joint Programme has now been included
	(CFW)/(Adult Social Care)			in Trafford's BCF submission.
	(3. 11), (1 tadit 300iai 3ai3)			Work planned to dovetail integration and hub
				programmes.
				Further engagement will be required to update partners and stakeholders of the revised plane.
				partners and stakeholders of the revised plans, and maintain their interest.
				and maintain their interest.

^{*} Note: This indicates the direction of travel in respect of performance in managing the risk and not direction of travel of the risk level.

4. STRATEGIC RISK REGISTER (November 2014)

STRATEGIC R	SK REGISTER	2014/15	Risk N	lumber	1		
Corporate Prior		Value for money Fighting crime	, ,	Link(s) to Community Strategy Key Objectives		 Positive environmental impact Better homes Health and improved quality of life for all Strong economy 	
RISK Major regeneration projects, including Altair, Altrincham Strategic Framewood delivery, Old Trafford Master Plan (OTMP) and Carrington development do proceed due to economic and financial constraints.					Framework		
Consequences	 Fai Ne Ad Fai 	lure to deliver on p gative impact on re verse impact on ur lure to deliver the	eliver on promise to community. pact on reputation. pact on urban regeneration. eliver the Core Strategy housing and employment growth targets.				
Controls	LeaCoOffReDe	 Consultants in advisory role where appropriate. Officer/ member steering groups in place. Regular performance meetings with developer/ key stakeholders. Detailed project plans in place. 					
Risk Assessment	Likelihood	Altair = 2 Altrincham = 2 OTMP = 2 Carrington = 2	Impact	Altair = 4 Altrincham OTMP = 4 Carrington	1 = 4	Exposure	Altair = 8 Altrincham = 8 OTMP = 8 Carrington = 8 Average = 8
RISK LEVEL			Low Risk	(Average)			
RISK LEVEL Risk Performance Indicators Altair CPO confirmed, developer proposals being finalised. Funding strategy dependent upon pre-letting key parts of deve Planning application approved. Altrincham Altrincham Forward Board reviews – quarterly. Delivery of pipeline developments, including Graftons (on site) interchange and Altair (see above). Support of local traders/ organisations/residents. Altrincham Town Team in place (July 2013). Draft Altrincham Strategy approved and consultation complete OTMP Essex Way development complete. Tamworth refurbishment and demolition works on site – compl track). Hullard refurbishments complete. HCA funding for Shrewsbury Street scheme approved. Project agreed and in place. Land Pool Agreement approved by Council Executive. Funding approved. Carrington				(on site), new completed. - completion Project gove	hospital, March 2014 (on		

	Sale of site by Shell to developer complete (2013).
	Outline of spatial concepts being developed.
	Engagement with key stakeholders' on-going.
	Flixton Road junction improvements complete.
	New project governance structure in place with Langtree, the new owners of Carrington
	and their advisers.
Effectiveness of	Altair = 3
controls and	Altrincham = 4
performance indicators	OTMP = 3
	Carrington = 3
Improvement Actions	Regular performance meetings with developers/ key stakeholders to ensure project times
(ref to action plans)	and delivery of key mile stones.

Person or Group Responsible for management of risk | Economic Growth, Environment and Infrastructure (EGEI)

Previous risk reviews completed:

- G Pickering, Corporate Director PPD. April 2009
- J Valentine, Head of Asset Management. October 2009
- P Harvey, Director of Environment. February 2010 and July 2010
- D Smith/ J Valentine, Head of Strategic Planning & Houses/ Head of Asset Management. May 2010 and January 2011
- D Challis, Asset manager. June 2011
- N Gerrard, Corporate Director EGP & Steph Everett, Growth Delivery Manager. September 2011; and February 2012
- R Haslam, Acting Strategic Planning Manager and J Steward, Interim Economic Growth Lead. August 2012.
- S James, Economic Growth Manager. February 2013.
- H Jones, Corporate Director EGP. August 2013.

Risk Review	January	Completed By	Richard Roe	Designation	Head of Growth.
Date	2014				
Risk Review	September	Completed By	Richard Roe	Designation	Director of Growth and
Date	2014				Regulatory Services.

STRATEGIC RISK RE	GISTER 2014/15	Risk Nu	mber	2	
Corporate Priorities	Services focused o	n the	Link(s) to Con		Bright Futures
	most vulnerable pe		Strategy Key		
RISK	good with good prosp that requires constant abuse to children that services. In particular undertaking its duties	ects for ir high leve could hav , the risk and resp kers with	mprovement, tels of vigilance we been prevel of the Safegua onsibilities and relevant expe	his is an area to guard aga nted through i arding Board r d/or insufficie	
Consequences	 Harm or abuse of chi Sanctions/penalties a Legal liability claims. Negative impact on re 	against Se	rvice.		
Controls	 Monthly meetings of Independent Chair apaproved. 				

Risk Assessment	Likelihood	4	Impact	5	Exposure	20		
RISK LEVEL High Risk								
Risk Performan Indicators	succe • There 2010 Tean	 Responsibility for the risks are multi-agency and depend on all parties to achieve successful outcomes and sustained improvement. There were staffing implications arising from the CQC/OFSTED Inspection report in April 2010 around the need to strengthen the role of LADO and the Independent Reviewing Team and the role of Statutory Children's Compliant Service. The issues have been addressed and additional resources identified as appropriate. 						
Effectiveness of controls and performance indicators	April capa than Servi confii The made procest three moni Multithe n number analy Action are v Partres the Control of the C	2010 and the repcity for improvem statistical neighbores in Trafford wormed for a secon Trafford Safeguard good progress as has now been eyear plan is composed regularly with the period child protect of child protect and support in plans have been ery minor. The ship working a sypplicants was not participated working and support in garranged by the supplicant of the period participated in garranged by the supplicant of the state of participated in the sages about safeguard arming areas for committed and arming a	is improving. The port concluded that ent were good, with ours and nationall ere rated as perford year in December ding Children's Beagainst its 2012/13 in developed linked plete. The work of assuring safeguative work with childidren coming into etion plans and children coming into etion plans and children communication and communication en the CYPS, heal good and staff repole managers and red to a number of shigh indicating Trivell and are very put manageable and reliand are very put manageable and reliand in line with for staff are of conne TSCB for which child protection set travel is in line with commendations alor detailed expectant a Safeguarding I guarding were very on the travel of the staff are of connerts of the safeguarding o	the overall effect th only a few except. In addition in It rming excellently e	ctiveness of safegoeptions, performations, performations and people groups is robust and young people groups is robust after children. Well developed and the ingh and reasons in the performation as an empire early experience an agement system of staff and their level ality, especially the performance of the people is robust and people groups is robust and the ingh and reasons in the performance are groups in the performance and the ingh and work is in performance and work is in performance. The finding is not yet available feedback has been all the individual feedback has been are consistent. The finding is not yet available feedback has been are the individual feedback	duarding and the ance is better children's I this rating was atly chaired and as planning as strategy and a and they are defective and he current for this are commendations d, both within uidance and lenge and cherof high ployer. They are es here. I may be a helping to wel of the overall practice, strong en helpful in		
Improvement Ad (ref to action pla	ans) • Actio	ns arising from th	ent inspections to ne 2013 Peer Revi eview recommend	ew of safeguard	ing have all been	actioned.		

	timescales will be implemented. Authorities are required to achieve outcomes for children					
	in shorter timescales and we will continue to manage potential risks.					
Person or Group Response	onsible for management of risk					
Previous risk reviews completed:						
C Pratt, Corporate Director CYPS. April 2009 and October 2009						
M Woodhouse, Interim Corporate Director CYPS. March 2010 and July 2010						

February 2013 and August 2013.

• CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden & C Baker-Longshaw). February 2014.

Risk Review	October	Completed	Deborah Brownlee	Designation	Corporate Director CFW
Data	2014	DV		_	

• D Brownlee, Corporate Director CYPS. January, April, July, September 2011, January 2012, August 2012,

STRATEGIC R	ISK RE	GISTER 2	2014/15	Risk	lumber	3		
Corporate Prior	ities	Exc	cellence in Educat		s) to Community egy Key Objectives	Bright Futur	res	
RISK Demand for school places underestimated and/ or additional school places are no						aces are not		
			ed to satisfy incr		l			
Consequences			tory duty not disc					
			tive impact on rep					
			oc expensive prov	•				
Controlo			ption to pupils' ed		-	Antonia la la come	0040 table enter	
Controls			ougn review base unt recent and pla		nt birth rates under	taken in January	2012 taking into	
			-	•	nalysis of and proje	acting the increas	ed demand for	
					utive in June 2014			
					completed and re			
			or 2017 and beyo	•	•	•		
Risk	Likelih	ood	3	Impact	5	Exposure	15	
Assessment								
RISK LEVEL				ium Risk				
Risk Performan	ce	All children are offered a place at school.						
Indicators								
Effectiveness o	f	The dire	ction of travel ren	nains stable. P	anning for school r	places continues t	o be an area of	
controls and		The direction of travel remains stable. Planning for school places continues to be an area of risk. All pupils have been placed in schools for the 2014/15 academic year, though not						
performance		necessarily in the preferred choice of parents. A Capital Programme is in place to address						
indicators		priority areas for expansion in the primary sector up to 2016. Secondary Sufficiency Review						
		has identified options for managing the future projected demand from 2017.						
L	-4:	0 "	1 1 1			1:0 1	1	
Improvement A (ref to action pla					en on most recent	birth rates and ta	king into	
(Ter to action pie	a115 <i>)</i>	 account recent and planned housing developments. Monitor the pupil's flows to the independent sectors and non-Trafford schools. 						
		 Continue to monitor the demand for primary and secondary school places; produce a plan 						
		for meeting these; secure the necessary capital resources and deliver the plan. Current						
		projecti			number of seconda			
		issue.	entation of access	anaa arrangan	onto makaa it inara	aginaly difficult to	nlan nlassa in	
					ents makes it incre missions Authority			
					t powers in relation			
			ions policies.			- Present browning	J	

Update the Executive when Spending Review allocations are published.					
 Subject to approval, implement to 	 Subject to approval, implement the Comprehensive Plan. 				
Person or Group Responsible for management of risk	CFW Senior Leadership Team				
Previous risk reviews completed:					
C Pratt, Corporate Director CYPS. April 2009 and Octo	ober 2009				
M Woodhouse, Interim Corporate Director CYPS. March 2010 and July 2010					
 D Brownlee, Corporate Director CYPS. January, April, July, September 2011, January 2012, August 2012, 					
February 2013 and August 2013.					

• CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden & C Barker-Longshaw). February 2014.						
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	

Date						Director CFW
STRATEGIC RIS	K REGISTER 20	14/15	F	Risk Number	4	
Corporate Prioriti	es All C	orporate Priorities	L	ink(s) to Commu	inity	
			S	Strategy Key Obje	ectives	
RISK There continues to be uncertated position given the reliance that public expenditure reductions Support from Control Government				exists on suppo re now expected	ort from C d to cont	Central Government and that
Support from Central Government Cost Pressures The provisional settlement for 2015/16 has been provided, which inclugrants. The position for the following two years is not known and is unconsidered until after the election of a new government in May 2015.						nown and is unlikely to be
 In addition to reducing funding there continues to be cost pressures and demonstrated the budget including: Increased demand on and in the cost of social care. Pressure from Transport and Waste Disposal levies. Employee costs – potential risks in this area include for national pay award, national insurance and pension changes, and the continuing effects of job evaluation. 						or national pay award,
	Equally austerit	y budgets are becomes Rate Retention	savinç oming	gs through effic more difficult to	o find.	d economy after five years of
	retain 2- howeve In forec- uncerta and leve To an ex	4.5% of surplus rate, the Council is reasting income leven inty as they are lared by the Valuation at this forecasti	tes colesponsels, ba rge, hig Agending un	llected above a sible to make up ck-dated rating ghly variable, ar cy Office which certainty has no	Governm a 49% s appeals ad detern is indepe	13, allows the Council to nent determined target, hare any shortfalls. have been a major source of nined in terms of both timing endent of the Council. significantly mitigated by the reals of £37m, to which the

- The variability of the local economy.
- Annual review of the appeals provision.
- The unknown impact of the 2017 valuation, including associated appeals.

Council had to contribute £2.4m. There remains a number of forecasting and other

issues such as:

Consequences	Reducing level of ser		Authority.				
	1	Adverse perception of the Authority.Negative impact on reputation.					
		•					
 Potential political impact. Controls Likely gross deficit based on best data available for 2015/16 budget year 					or and 2015/19		
Controls	MTFP period has be						
will reduce from £154.5m to £144.3m (a reduction of 6.6%) and i programme of almost £24m.							
	These plans will be s for most proposals, a				n 12 December		
	 Prioritisation of budg and other mandatory 	services.		•	nin social care,		
	Budget and financialRegular budget mon	•	•	•	ss Rate		
	projections.Government safety n		esses on busine	ss rates in a partic	cular year (current		
	 annual maximum liab Reshaping projects vigeneration, sharing of 	widening the scop					
	or contract arrangem	nents.					
	 Provisions maintaine rationalisation). 	·	•	•			
	 Smoothing reserves Management to avoid 						
	equalise the costs of				budget, and to		
			lished to provide	short term cover			
Risk Likeliho Assessment	ood 5	Impact	5	Exposure	25		
RISK LEVEL	ı	High Risk					
Risk Performance	Director of Finance n			budget.			
Indicators	1 -	Regular budget/ financial monitoring (Directorates).					
	TPR monitoring trans	sformation and al	l other savings.				
Effectiveness of	3						
controls and	3						
performance indicators							
Improvement Actions	Resource forecasts v						
(ref to action plans)	Government of the L	ocal Government	t Finance Settlei	ment is not expect	ted until late		
	autumn.	uetnose and mon	itorina process	os boina actionad			
 Improvements to robustness and monitoring processes being actioned. Savings proposals are soon to be subject to public, staff and business consultations. 							
equality impact assessment and a rigorous business case development and robu							
review. Variations in both resource levels and savings will be reviewed regularly fr							
CMT and Executive to take remedial action.							
	nsible for management o	rrisk Directo	or of Finance				
Previous risk reviews I Duncan Director of Reviews	Finance. April 2009; Octo	ober 2009: Februs	arv 2010 [.] .lulv 2	010 January 201	1 September		
2012, February 2013	and March 2014.			5.5, 5anaary 201	., σορισποσι		
I Kershaw, Head of Financial Management. August 2011 and January 2012.							

D Muggeridge, Finance Manager. August 2013.								
Risk Review	October 2014 Completed By Ian Duncan Designation Director of Finance							
Date								

STRATEGIC R	ISK REG	ISTER 201	4/15		Risk Nu	ımber	5	
Corporate Prior	rities		Link(s) to Community No specific link					
		Strategy Key Objectives Availability of capital resources from sales of surplus assets and Governmen						
RISK						surplus a	ssets and Go	vernment Grant
			rt the Capital					
Consequences			n in ability to d					
Controls							on a quarterly	basis and
			d to the Execu			on resourc	e availability.	
			r generation of					
						y – either d	continuing to p	roceed, flexing,
	T		duling or postp			-	_	10
Risk	Likeliho	od 3		Impact	3	1	Exposure	9
Assessment				B.4. 1:	D: 1			
RISK LEVEL				Medium	RISK			
Risk Performan	ice	Capital	•	., .				
Indicators • Monitoring existing commitments.								
	<u>.</u>	4						
Effectiveness o controls and	T	4						
performance in	dicators							
periormance in	uicators							
Improvement A	ctions	None pro	posed at prese	ent Values se	et at realistic	levels and	some evidend	ce of minor
(ref to action pla			nents, and new			10 10 10 4114	Como ovidone	00 01 11111101
Person or Grou					ector of Fina	nce		
Previous risk ı								
• I Duncan, Di				ober 2009; Fe	ebruary 2010); July 2010	and January	2011
• I Kershaw, H			•		,	, ,	,	
 J Valentine, 			•	•	gust 2012 ar	nd Februar	y 2013.	
Risk Review		ust 2013	Complete		•	Designa		Finance
Date				Mu	ggeridge			Manager
Risk Review	Febr	uary 2014	Complete	d By Gra	aeme	Designa	tion	Technical
Date		-		Ber	ntley			Finance
								Manager
Risk Review	Octo	ber 2014	Complete	d By lan	Duncan	Designa	tion	Director of
Date								Finance

STRATEGIC RISK RE	GISTER 2014/15	Risk Number	6		
Corporate Priorities	Services focused on the most vulnerable people Low Council Tax and Value for Money		Health & Improved Quality of Life for All.		
RISK	Ability of partnership working with health to deliver joint objectives for vulnerable adults and older people and to improve health inequalities.				
Consequences	Not meeting service objectives around key groups of people.				

		not best utilised/ li		•					
		Could lead to reduced service/support to vulnerable persons.							
Controls	 Partnersh 	Partnership Boards in place.							
	Mechanis	ms in place to sup	port decision-m	aking an	d deliver gover	rnance) .		
	Regular le	adership and ove	rsight meetings	with Cou	uncil and NHS	Chief I	Executives.		
	Leadershi	p and engagemer	nt by relevant Cl	hief Offic	ers in respectiv	ve field	ds.		
Risk Assessment	Likelihood 3	Impact	4	Exposur	re l		12		
RISK LEVEL	•	Med	dium Risk						
Risk Performance	Signing-of	f procedures on k	ey agreements	and arra	ngements.				
Indicators	Delivery o	f health and wellb	eing indicators.						
Effectiveness of	3 – There ar	e forums in place	which enable A	dult Soci	al Services and	J CCG			
controls and		ers to meet on a r							
performance indicat	ors objectives. T	he Health and We	ellbeing Partners	ship Boa	rd has been se	t up a	nd Public Health		
		es have been suc							
		of joint services e.							
		d Community and							
		Pennine Care, Tr		ity Healt	h Provider, bas	sed on	effective		
	governance	and strong partne	rship working.						
Improvement Action		Health and Wellb	eing Partnershi	p to impl	ement Health a	and We	ellbeing		
(ref to action plans)	Strategy.								
		existing partnersh	ips have govern	ance arr	angements in p	place t	hat are fit for		
D D D-	the future.		OEW 0 i I	l l- !:	. T				
Person or Group Re	•	agement of risk	CFW Senior Lo	eadersni	p ream				
Previous risk review		200							
D McNulty, Chief	•		0040	0044					
D Hanley, Deputy		•		ary 2011	•				
J Walker, Perforn									
D Wagstaff, Senion		•	•						
CWB SMT: (A High									
3,	ry 2013 and CFW	•			,, ,				
CFW Senior Lead	dership Team (D B	rownlee, L Harpei	r, J Pearce, C R	amsden	& C Baker-Lon	igshav	v). February		
2014.	0.1.10044	0 11 10	D 1 1 D		D :		0		
Risk Review	October 2014	Completed By	Deborah Brow	niee	Designation		Corporate		

STRATEGIC RISK RE	GISTER 2014/15	Risk Number	7			
Services focused on the most vulnerable people. Low Council Tax and Value for Money		Link(s) to Community Strategy Key Objectives	Health & Improved Quality of Life for All			
RISK	Ability of partnership working execution to deliver joint objection	to release resources with suffice ectives around children. Increase sing arrangements in the health s	d risk from			
Consequences	 Not meeting service objectives around key groups of people. Unable to deliver services to as many people as the Council ought to. Spend is not best utilised/ limited value for money. Could lead to reduced service/ support to vulnerable persons. 					
Controls	Children's Trust Board.					

Date

Director CFW

		.loin	t Commissioning	Executive Groun	<u> </u>			
			•	•		ng and delive	er governar	nce
	 Mechanisms in place to support decision-making and deliver governance. Regular leadership and oversight meetings with Council and CCG Senior Officers. 							
Leadership and engagement by relevant Chief Officers in respective fields.								
Risk	Likelihood		3	Impact			osure	15
Assessment	Liitoiii100u			mpaot	`		,00010	
RISK LEVEL				Medium	Risk			
Risk Performan	ce •	Hea	Ith and Wellbeing	Action Plan.				
Indicators	•	Chil	dren and Young F	Persons Delivery	Plan.			
	•	Sign	ning-off procedure	s on key agreen	nents and	d arrangemer	nts.	
Effectiveness of controls and performance inc	i i i i i i i i i i i i i i i i i i i							
Improvement A	ctions	Wor	k closely with CC	G following the t	ranefer c	of commission	ina functio	n to GP consortia
(ref to action pla	 Work closely with CCG following the transfer of commissioning function to GP consortia and establish links with emerging bodies such as National Commissioning Board and Public Health England. Audit Review of S75 Agreement during 2014/15. Development of integrated financial reporting mechanisms to underpin integrated commissioning activity. 							
Person or Grou	p Responsi	ble fo	r management of	risk CFW S	Senior Le	adership Tea	m.	
Previous risk r		•						
	-		r CYPS. March a	•				
		irecto	or CYP. January, <i>I</i>	April, July, Septe	mber 20	11, January 2	2012, Augu	st 2012, February
2013 and Au	•		ID		lana d		0044	
			per, J Pearce, C F					rata Dinastan CEVV
Risk Review Date	October		Completed By	Deborah Brov	wniee	Designation	Corpor	ate Director CFW
שמוכ	2014							

STRATEGIC RISK REGI	STER 2014/15	Risk Number	8		
Corporate Priorities	Services focused on the	rices focused on the Link(s) to Community Heal			
	most vulnerable people	Strategy Key Objectives	of Life for All		
RISK	Demand for eligible services	outstrips resources in adult	social care.		
Consequences	 Overspend on budgets. 				
	• People do not receive service	es they are eligible for.			
Controls	• Delivery of MTFP and in year	savings.			
	 Monitoring of budgets at SLT 	and service level.			
	 Business Delivery Programm performance and savings del 		or and manage demand,		
	• Business case portfolio in pla	ce.			
	• Resource allocation system in	ntroduced and embedded.			
	• Improvements made to re-ab	lement services/ embedding c	of telecare offer.		
Improved performance data in place, to identify trends in take up of services.					
	• Local business performance	indicators developed.			

Assessment	Likelinood	5	Impact	5	Exposure	25		
RISK LEVEL			High Risk					
Risk Performance Indicators Budget monitoring. Project monitoring.								
Effectiveness of controls and performance indicators 3 – Delivery of savings is on target but demand for services is increasing and impacting budget.						and impacting on		
Improvement Ad (ref to action pla	ons) condand will trepo V In In In N S N N N N S N S N S N S N S N S N S	A Budget Monitoring Investigation Action Plan has been developed setting out the findir conclusions and recommendations following the review and was presented to the Accordand Audit Committee (26 September 2014). Monitoring of progress against the Action F will take place to ensure agreed actions are implemented and details of progress will be reported to future Committee meetings. Key actions include: • Work on delivering in year and future savings. • Implement austerity measures. • Improved performance data to identify trends in take-up of services. • Improved intelligence around take-up by potential service users. • Implement learning disability and mental health programmes. • New Learning Disabilities sub-group to be established. • Service re-designs to seek efficiency options to increase capacity. • New framework contracts let for home care with greater capacity. • New burdens funding is being programmed by the Department of Health (re: Care Act).						
Person or Group	o Responsible	for management o	of risk CFW S	Senior Leadersh	ip Team			
Previous risk r	-							
1	•	tions. April 2009;	•	•				
		artnerships Manag			and August 2011			
I A ID Waardaff 9	Conjor Pucinos	D. Wagetaff, Soniar Rusinass Polationship Partner, January 2012						

Impact

• D Wagstaff, Senior Business Relationship Partner. January 2012

Likelihood

Risk

- CWB SMT (A Higgins, J Wilmott, J Kay & M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J Wilmott & J Kay). February 2013 and August 2013.
- CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden & C Baker-Longshaw). February 2014.

Risk Review	October 2014	Completed	Deborah Brownlee	Designation	CFW Senior Leadership
Date		Bv			Team

STRATEGIC RISK RE	GISTER 2014/15	Risk Number	9			
Corporate Priorities	Services focussed on the most vulnerable people.					
RISK	Failure of the Adult Safeguard	ling Service.				
Consequences	Potential harm to vulnerable individuals.					
	 Legal action against the Cour 	ncil.				
	 Adverse impact on reputation 					
Controls	Updated Safeguarding strateg	gy in place.				
	Discrete Safeguarding team.					
	 Training provided to all key st 	aff.				
	 Working with a wide range of 	partners.				

Exposure

25

		Robust management information and quarterly monitoring in place							
			Regular multi-agency safeguarding management meeting in place.						
Risk	Likeliho	od	3	Impact		4	Exposure	12	
Assessment									
RISK LEVEL				Me	dium Ri	sk			
Risk Performan	ce	SMT rep	orting.						
Indicators		 Reports t 	o Safeguar	ding Boar	d.				
Effectiveness of	f	3							
controls and									
performance in	dicators								
Improvement A	ctions	 Multi-age 	ncy review	re: extend	ding safe	eguarding role	and responsibilit	ies underway.	
(ref to action pla	ans)	Reports (on safeguar	ding incid	lents, by	individual pro	vider, to be intro	duced.	
		Implement	nt quality as	surance a	arranger	nents.			
		Re-launce	h communic	cations wi	ith public	and partners			
Person or Grou	p Respor	nsible for mar	nagement o	f risk	CFW S	enior Leaders	hip Team		
Previous risk r	eviews o	completed:		•			•		
D Hanley, De	eputy Dire	ector CWB. A	April 2009; C	October 2	009; July	y 2010 and Ja	nuary 2011		
J Walker, Pe	rformanc	e & Partnersh	nips Manage	er. Februa	ary 2010	and August 2	2011		
D Wagstaff, S	Senior Bu	ısiness Relat	ionship Parl	tner. Janu	uary 201	2			
• CWB SMT (A	Higgins,	J Wilmott, J	Kay & M Gr	imes). Au	igust 20	12 and CWB	SMT (D Brownlee	, L Harper, J	
	CWB SMT (A Higgins, J Wilmott, J Kay & M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J Wilmott & J Kay). February 2013 & August 2013.								
CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden & C Baker-Longshaw). February 2014.						1.			
Risk Review		ber 2014	Complete			h Brownlee	Designation	Corporate Director	
Date								CFW	

nslaughter Act. Possible personal conv	Strategy fety legislation		cution und	ler the Corporate				
nslaughter Act. Possible personal conv			cution unc	ler the Corporate				
	iction of Officers		Breach of health and safety legislation leading to prosecution under the Corpo Manslaughter Act.					
 Possible personal conviction of Officers and/ or Members. Adverse impact on reputation. Financial consequences of fines/ legal claims. 								
 Controls Health and Safety Policy. Procedures in place to ensure legal compliance. Risk assessments and safe systems of work. Health and Safety Advisors aligned to each Directorate to provide exp Member awareness. Management training. Support to schools provided via SLA. 								
	pact	5 Expos		10				
-								
•		d Annual Report to	o Council.					
•	or accident reduction.							
Corporate Health and S	Safety Improven	nent Plan reviewed	d annually.					
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Financial consequence Health and Safety Police Procedures in place to Risk assessments and Health and Safety Advious Member awareness. Management training. Support to schools provedudit and Assurance read 2 Im Health and Safety team Six month report to CM Targets set for acciden	Financial consequences of fines/ legal Health and Safety Policy. Procedures in place to ensure legal consists assessments and safe systems of Health and Safety Advisors aligned to expendent training. Member awareness. Management training. Support to schools provided via SLA. Audit and Assurance review of the Council 2 Impact Medium Rise Health and Safety team track all accide Six month report to CMT/ Executive an Targets set for accident reduction.	Financial consequences of fines/ legal claims. Health and Safety Policy. Procedures in place to ensure legal compliance. Risk assessments and safe systems of work. Health and Safety Advisors aligned to each Directorate to Member awareness. Management training. Support to schools provided via SLA. Audit and Assurance review of the Council's corporate health and Assurance review of the Council's corporate health and Safety team track all accidents/ near misses. Six month report to CMT/ Executive and Annual Report to Cargets set for accident reduction.	Financial consequences of fines/ legal claims. Health and Safety Policy. Procedures in place to ensure legal compliance. Risk assessments and safe systems of work. Health and Safety Advisors aligned to each Directorate to provide extended awareness. Management training. Support to schools provided via SLA. Audit and Assurance review of the Council's corporate health and sated 2 Impact 5 Exposure Medium Risk Health and Safety team track all accidents/ near misses. Six month report to CMT/ Executive and Annual Report to Council.				

Effectiveness of	2				
controls and					
performance indicat	tors				
Improvement Action	ns • Delive	ery of work plan to i	mplement recomi	mendations in the corp	porate improvement plan.
(ref to action plans)			•	·	
Person or Group Re	esponsible for r	management of risk	All		
Risk reviews comp	oleted:				
G Pickering, Co	rporate Directo	r PPD. April 2009			
P Valentine, IBU	J Manager. Oct	tober 2009			
C Hay, Workford	ce & Core Strat	tegy Officer. Augus	t 2012		
J Arnold, Health	& Safety Man	ager. February 201	0; July 2010, Jan	uary 2011, August 20	11, February 2013,
September 2013	3 and February	2014.			
Risk Review (October 2014	Completed By	J Arnold	Designation	Health & Safety

STRATEGIC R	ISK REGIS	TER 2	2014/15		Risk Nu	mber	11			
Corporate Prior	ities		w Council Tax and lue for Money.	d	Link(s) to Community Strategy Key Objectives • Positive Environmental Impact • Better Homes • Strong Economy					omes
RISK	(Counc	cil does not agree	e, adopt	and deli	ver carb	on redu	ıction		•
ConsequencesReputation damage to the Council.Rising energy bills for residents and businesses.										
 Key stakeholders engaged. The Energy and Water Management Plan. E-technology monitoring tools being utilised. 										
Risk Assessment	Likelihoo				Expos	sure	12			
RISK LEVEL Risk Performan			very of the Energy		<mark>lium Risl</mark>					
 Delivery of the borough-wide Sustainability Strategy. Corporate Greenhouse Gas Emissions reporting data. Council falls out of CRC for Phase 2. Emissions data for the local authority area (published by DECC). 										
Effectiveness or controls and performance indicators	f	2								
Improvement Actions (ref to action plans) • Review and update the corporate Energy and Water Management Plan. • Review and update the borough-wide Sustainability Strategy and Action Plan. • Implementation of continuous audit reviews and recommendations.						Plan.				
			r management of							structure (EGEI)
February 2013,	August 20		nt, Sustainability N d January 2014.		. Septem	ber 2011	and Jar	nuary 2	2012, Aug	ust 2012,
Risk Review Da				leted By	A Hun		gnation		ainability	Manager
STRATEGIC R					_	Number		1:		10 111
Corporate Prior	ities	•	Lower Council Tax	x and	Link(s) t	o Commu	ınıty	H	ealth & Im	proved Quality

Date

Manager

		• S	alue for Money. ervices focusse ne most vulneral	d on	Strateg	y Key Objective	s of Life for A	dl .
RISK			eople nance targets r	elating t	o Adult	Social Care se	rvices are not me	
Consequences		Servi		ciating t	O Addit	oociai oale sei	ivices are not me	<u>76.</u>
			rse impact on C	ouncil's r	enutatio	n		
			re to meet perso					
Controls							lso captures CCG	information).
	Established data flows on statutory/ national indicators and performance indicators.						,	
					•		, monthly and qua	
			seen by Busines			•		, ,, ,,
			al Health Trust e		•	•	•	
Risk	Likeliho		2	Impact		5	Exposure	10
Assessment								
RISK LEVEL				Mediur	n Risk			
Risk Performan	ce			_		al and local per	formance indicato	rs as per
Indicators			torate Performa					
		Actio	n plans impleme	ented, wh	ere appr	opriate, against	underperforming	targets.
E.C. (1)	•							
Effectiveness of controls and	Ī	2						
performance inc	dicators							
periormance inc	licators							
Improvement A	ctions	Ensure	the roll out of th	e new on	erating r	nodel continues	to address key p	ersonalisation
(ref to action pla			ance indicators.	-			, 10 a.a.a. 200 ito, p	
	,				nge of w	eekly, monthly a	and quarterly repo	orts are overseen
			e Business Deliv				. , ,	
		• Perfo	rmance is monit	ored aga	inst natio	onal and local pe	erformance indica	tors as per
		direct	orate Performar	nce Fram	ework. T	he overall impro	ovement in perforr	nance evidenced
			ar has been sigı					
							returns is to chang	
							s, as yet, is unclea	
							permanent reside	
							lated using the old	
							vill be generated for rall implications of	
			pact on the figu			to what the over	raii irripiicatioris oi	tilis will be and
						acement IT sys	tem in Adult Socia	al Care (Liquid
		,				•	e end year reports	` ·
			of indicators th					
Person or Grou	p Respor	nsible for	management of	risk	CFW S	enior Leadershi	p Team	
Risk reviews c	omplete	d:						
			erships Manage	er. April 2	2009; Oc	tober 2009; Feb	oruary 2010; July 2	2010, January
2011 and Au	•							
D Wagstaff, S				_		•		
•			•	•	ugust 20	12 and CWB SI	MT (D Brownlee, L	₋ Harper, J
	• /	•	3 and August 2		0.05		E 1	
							February 2014.	omonate Direct
Risk Review	UCTO	ber 2014	Complete	u By 🔰	pepora	h Brownlee	Designation Co	orporate Director

Date

CFW

STRATEGIC RI	SK REG	ISTER	2014/15	R	isk Number		13	
Corporate Priori	ties	Se	rvices focused on	the Link(s)	to Community	/ H	ealth & I	mproved Quality
		mo	ost vulnerable peo	ple Strateg	y Key Objecti	ves of	Life for	All
RISK		Major o	event leading to i	nability to deliv	er critical se	rvices to v	ulnerab	le people.
Consequences		• Interr	uption to service p	rovision to vulne	rable people.			
		• Finan	cial loss to the org	ganisation.				
Controls		• Busin	ess continuity plai	ns under develop	ment within E	Directorate	with sup	porting action
		plans	actively monitored	d.				
			development with	providers.				
Risk	Likeliho	od	4	Impact	4	Expos	ure	16
Assessment								
RISK LEVEL				High Risk				
Risk Performand Indicators	ce	Action	plan to test and m	onitor business o	ontinuity plan	S.		
Effectiveness of controls and performance indicators		2 – Ful	I suite of business	continuity plans	in place.			
Improvement Action pla		Establis	sh programme for	testing business	continuity pla	ns.		
		nsible fo	r management of	risk CFW Ser	nior Leadersh	ip Team		
Previous risk re						•		
 D Hanley 	, Deputy	/ Directo	or CWB. April 2009	9; July 2010 and	January 2011	1		
 J Walker 	, Perforr	nance 8	Reartnerships Mai	nager. October 2	009, February	/ 2010 and	August	2011
D Wagstaff, Senior Business Relationship Partner. January 2012								
V D Wagst	an, ocm	 CWB SMT (A Higgins, J Wilmott, J Kay & M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J Wilmott & J Kay). February 2013 and August 2013. 						
CWB SM	1T (A Hig				st 2012 and C	CWB SMT (D Brown	nlee, L Harper, J
CWB SM Wilmott 8	IT (Α Hiզ & J Kay)	Februa		ıst 2013.				•

STRATEGIC RISK RI	EGISTER 2014/15	Risk Nur	nber	14			
Corporate Priorities	All corporate prior	 Link(s) to Community Strategy Key Objectives Health & Improved Quality of Life for All Better Homes Positive Environmental Impact Strong Economy 					
RISK	Failure to complete the Business Continuity (BC) Programme Project, res increased risk that the Council fails to deliver Council services in the evel significant disruption.						
Consequences	 Resources Assessr Failure to have suff effectively to local a Failure to continue welfare during disru 	ment criteria icient plans and widespr the delivery uption.	in place at a sead disruption of critical Cou	service and corp n, including that uncil services in	good practice and Use of porate level to respond caused by emergencies. cluding those vital to human bing Trafford have robust BC		

		ns. pact on council	reputation.				
 Set of templates and guidelines in place to guide service Business Impact Analysi and BC planning. Templates are available on the Council's intranet. There is a Council wide Resilience Forum in place, which includes partner agencies shares information and best practice in relation to planning for emergencies and se disruption in order to monitor the effectiveness of the plans. The Emergency Planning Manager offers support to individual services to review prequired. 							
Risk Assessment	Likelihood	2	Impact	5	Exposure	10	
RISK LEVEL			Medium Risk				
Risk Performan	cor • Tes • Co	nplete a BC plasting programn rporate BC Pla		eview periods lin I.	nked to risk.	or two, they must	
Effectiveness of controls and performance indicators	performance individual service areas.						
Improvement Ad (ref to action pla	•An A bette •BlA •An u need broa •An u •The have	ction Plan was er prepare Cou documents and pdated BC Pol I some further dly the same. pdated position Emergency Pla been looking ord Council. Ti	s developed followincil services for of the developed following was approve amendments and the statement will be anning Manager,	wing the disruptive dealing with similary, BC plans, are doing to by CMT on the distribution and the made to CMT together with Main an on-line E-Legreement in prince	ve weather in I lar incidents. e in place in mo e 11 December ect service cha in December 2 anchester City earning Packag	Council and AGMA ge for internal use at	
Person or Group				l of Partnerships	and Commun	ities	
Previous risk r A Harrison, T	eviews complemporary Busin, Head of Part	eted: ness Continuit	y Lead. February	2010; May 2010	0; July 2010 ar	nd January 2011. v 2013, August 2013 and	
Risk Review Date	October 2014	Completed By	David Hooley	Designation	Planni	ng Manager	

STRATEGIC RISK REGISTER 2014/15		Risk Number 15					
Corporate Priorities		Link(s) to Con	nmunity				
			Strategy Key Objectives				
RISK	Implementation of the Sp	mplementation of the Special Educational Needs and Disabilities (SEND) reforms					
	set out in the Children and Families Act 2014.						

• Lack of integrated planning leading to a failure to meet the needs of children and young people.									
		meet statutory	duties set out in the	Special Educationa	I Needs (SEN) Code of				
	Financial i	Financial impact on the Dedicated Schools Grant (DSG) High Needs Block.							
				n, Health and Care (
		•	damage to the Cou	•	,				
Controls					Pathfinder since 2011.				
		•	nce arrangements.						
		•	esigned and implen	ented.					
	EHC conv		J 1						
Risk Assessment Lik	kelihood	3 Impa	act 5	Exposure	15				
RISK LEVEL	,	Med	dium Risk						
Risk Performance	Measures	monitored throu	ugh governance arra	angements with hea	dlines to Business				
Indicators	Developm	ent Group and	SLT.	-					
	Number o	f EHC Plans.							
	Number o	f conversions.							
	Number o	f mediations.							
	Number o	f tribunals.							
Effectiveness of	•	tation plan on ta	•						
controls and			September 2014.						
performance indicators	Consultati	on on new polic	cies to start in Octob	er 2014.					
	 Good eng 	agement from p	parents and other st	akeholders in goverr	nance arrangements.				
Improvement Actions				oned from April 201	5.				
(ref to action plans)			e established from	•					
			-	e implementation pl	an.				
Person or Group Resp		agement of risk	CFW SLT						
Previous risk reviews									
Risk Review Date	October 2014	Completed	D Brownlee	Designation	Corporate Director				
		Ву			CFW				

STRATEGIC R	ISK REGISTER	2014/15		Risk Numbe	r 16			
Corporate Prior	ities S	ervices focussed of	on the Link(s)	to Community	Health & In	proved Quality		
		ost vulnerable ped		Strategy Key Objectives of Life for all				
RISK	Adult Social Care Budget 2014/15: Ability to implement wide range of savings proposals in the current economic conditions.							
Consequences	 Difficulty of implementing wide range of budget savings proposals destabilises provi with potential that people may not receive the services they are eligible for. Not delivering budget savings within agreed timescales leading to an overspend. Potential risk to destabilising the social care market in Trafford arising from impleme wide range of budget savings proposals. 							
 Regular monitoring of budget at SLT and service level. Robust plans for implementation of budget savings proposals. Business Delivery Programme Board to monitor and manage savings delivery Performance data in place to identify trends in take up of service. Market management and intelligence role of CWF Commissioning Officers. 						Ť		
Risk Likelihood 5 Impact 5 Exposure						25		

RISK LEVEL	High Risk
Risk Performance	Budget monitoring.
Indicators	SLT reporting.
	Business Delivery Programme Board's role in monitoring and managing savings
	proposals delivery.
Effectiveness of	3
controls and	Each proposal has agreed business case and risk rating.
performance indicators	Consultation exercise was completed.
	Budget savings proposals being closely monitored.
	Performance data being collected on an on-going basis.
Improvement Actions (ref to action plans)	 A Budget Monitoring Investigation Action Plan has been developed setting out the findings, conclusions and recommendations following the review and was presented to the Accounts and Audit Committee (25 September 2014). Monitoring of progress against this Plan will take place to ensure agreed actions are implemented and details of progress will be reported to future committee meetings. Key actions include: Actions have been assigned to key officers. New budget holders have been confirmed and training completed re: budget management. Revised governance arrangements for budget monitoring have been agreed and are in place with an agreed escalation process. Monitoring of trends and activities linked to changes in spending. Additional in year savings targets to reduce spend. Budget has been rebased (use of Council reserves and Council wide resources).
Person or Group Respo	nsible for management of risk
Previous risk reviews	completed:
_	ger and D Wagstaff, Senior Business Relationship Partner. March 2012
	, J Wilmott, J Kay & M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J
,	ruary 2013 and August 2013.
	e, L Harper, J Pearce, C Ramsden & C Baker-Longshaw). February 2014.
Risk Review Date C	october 2014 Completed By Deborah Brownlee Designation Corporate Director CFW

STRATEGIC RISK R	EGISTER 2	2014/15	Risk N	umber	17		
Corporate Priorities		ow Council Tax a alue for Money	Strateg	Link(s) to Community Strategy Key Objectives		Positive Impact	Environmental
		conomic Growth Development	and				
RISK Inability to meet Trafford res to insufficient land.			ord residents' re	quests to	have buri	als within th	e local area due
Consequences	Rep	act on MTFP. utational damage ncil does not acq		additional	burial land		
Controls On-going negotiations to acq Effective project management Capital monies available for project management				acquisition	and deve	lopment.	
Risk Likelihood 3 Impac Assessment							12

RISK LEVEL Medium Risk							
Risk Performance	•	Project	deadlines for land	acquisition establish	ned.		
Indicators	•	Complia	ance with developn	nent plan deadlines	(to be established)		
	•	Monitor	available burial sp	ace in all Council ce	emeteries.		
Effectiveness of controls and performance indicators	crols and ormance						
Improvement Act (ref to action plan	s) •	Agreement in principle reached to purchase additional land. Decision of acquisition expected September 2014. Anticipated final purchase November 2014.					
	•		nal possibilities also being looked at adjacent Urmston Cemetery.				
	•		duced to medium.	and a state of falls.			
D 0	•		• • • • • • • • • • • • • • • • • • • •	submitted following			
			anagement of risk	Economic Grow	th, Environment ar	nd Infrastructure (EGEI)	
Previous risk re							
			_	er. August 2013 and			
Risk Review September Completed				Dave Jennings	Designation	Bereavement	
Date	2014					Services Manager	

STRATEGIC RISK I	REGISTER 2	2014/15		Risk Number	18			
Corporate Priorities		shaping Trafford uncil		Link(s) to Community Strategy Key Objectives		ommunities eased overall on with services nmunities		
RISK	The Council website is not easily accessible, services are unable to update information or provide service responses fast enough through digital challenges to meet customer expectations. Other channels of communication – face to face, telephone and Member's surgeries - gain increased numbers of requests due to reliability issues around digital channels.							
Consequences	reside Costs	 Up to date information about how to access Trafford services via channels which residents prefer is not available. Costs around access to information and services are higher than necessary and customers are less satisfied because the process is not as easy as it should be. 						
Controls	customer	preferences with	hin Trafford, and	O,	vill work together port and staffing i services 24/7.			
Risk Like Assessment	elihood	3	Impact	4	Exposure	12		
RISK LEVEL			Medium	Risk				
Risk Performance Indicators						to deliver the		

	for ser	vice delivery nov	w and in the future.						
		, , , , , , , , , , , , , , , , , , ,							
Effectiveness of controls and performance indicators	On-goi updatir receiveAdditio	ng review of CM ng their own wel ed training on CI nal strategic co	of Customer Strategy - Customer Service Board. g review of CMS Project to ensure delivery. All services now have the capability of their own web pages and key members of staff throughout all Directorates have training on CMS – Sarah Curran al strategic communication support to develop and deliver a Communications and plans linked to priorities, including the Customer Strategy – Kelly Dooley.						
Improvement Actions (ref to acti plans)	 Strateg Develor Most we more periorities more of the presentation of the presentation. The Country allowing The new weare. The weare whose Ration update As a reserved. 	p Communication action plans linked to Council priorities (link to actions plans). Fill include communication. Ensure we develop a more proactive approach with planning by services allowing the opportunity to plan communication according to the services allowing the opportunity to plan communication according to the services allowing the opportunity to plan communication according to the services allowing the opportunity to plan communication according to the services allowing to plan communication according to plan communication according to the services allowing to plan communication according to plan communicatio							
Person or Group F	Responsible	Customer:	Service Board		<u> </u>				
for management o	t risk	CMS Proje Interim Ma		nationa Managas	and Communications Team				
Risk Review	September	 Interim Ma Completed 	Lynda Fothergill &	Designation	and Communications Team Interim Marketing &				
Date	2013	By	Communications	Boolghation	Communications Manager				
Risk Review	February	Completed	Sarah Curran	Designation	Head of Customer Service				
Date	2014	By	Canala Cuman	Decimation:	Head of Customer Comits				
Risk Review Date	October 2014	Completed By	Sarah Curran	Designation	Head of Customer Service				

STRATEGIC RISK R	EGIST	ER 2014/15	Risk Number	19		
Corporate Priorities		Link(s)	Link(s) to Community			
		Strateg	y Key Objectives			
RISK	<u>Impa</u>	ct and implementation of the Care	Act. Royal Assent	was granted to the Care Bill		
	of ca care costs Othe intro	ay 2014 and it is now the Care Act. re and support in over 60 years, purand support and introducing a cape of care in their lifetime. If key elements include new rights for the duction of a national eligibility thresonsibility for preventative services	tting people and the on how much people or carers to asses shold for care and	heir carers in control of their ople will have to pay for the sment and support, support, Local Authority		
Consequences	• In	creased financial pressure due to cos	t cap and increased	d responsibilities.		

	ı	_ l.s.=	o o d do :!		dv of wet ala a -l	ا المالية المالية	in one cood	naibility for			
					dy stretched capa of care accounts						
					<i>*</i>			oilities and duties.			
Controls			•		n to the Care Act						
Controls								ny role in relation			
			parations and re			ioviding ove	erview and scruti	Thy Tole III Telation			
						nrogramm	e of change				
		_	Programme Manager in place to oversee the programme of change. Programme Board and governance arrangements in place to oversee the implementation								
		•	of the Care Act Programme.								
					nk in with existing	structures	are in place to d	eliver the			
					ed in the Care Ac		are in place to a	011701 1110			
					cales mapped acr		gramme to ensu	re Trafford meet			
					n a timely manne		9				
			•		ream is undertak		hensive financial	modelling and			
					financial impacts	•		J			
		•									
Risk	Likeli	hood	5	Imp	act	3	Exposure	15			
Assessment											
RISK LEVEL					Medium						
Risk Performanc	e	 Busines 	s Delivery Prog	ramme	e Board reporting						
Indicators		 SLT rep 	orting.								
		 Care Ac 	t Programme B	oard r	ole in co-ordinatir	ng, shaping	and driving the	changes.			
		 Program 	nme manageme	ent app	proach in place.						
		 Timesca 	les and deliver	ables ı	mapped.						
Effectiveness of					anagement in plac	ce but full ir	npact on process	s, demand,			
controls and		capacity a	and budgets is s	still bei	ing modelled.						
performance											
indicators											
I management and		0 1	6								
Improvement	otion	•	te financial mod	_							
Actions (ref to ac plans)	JUOIT		proposals for c	_		4	1 f 41				
	Door				onal and national			areas.			
Risk Review		just 2013	Completed		Adult Social (Deborah	Designa		rata Director			
Date	Aug	just 2013	Completed	Бу	Brownlee	Designa	CFW	rate Director			
Risk Review	Feh	ruary 2014	Completed	Rv	Deborah	Designa		Senior			
Date	1 00	nuary 2017	Completed	Бу	Brownlee, Linda	_		ership Team			
Date					Harper, John	4	Loade	Joinp ream			
					Pearce,						
					Charlotte						
					Ramsden &						
					Carol Baker-						
					Longshaw						
Risk Review	Oct	ober 2014	Completed	Ву	Deborah	Designa		rate Director			
Date					Brownlee		CFW				

STRATEGIC RISK REGIST	ER 2014/15	Risk	Number Number	20	
Corporate Priorities	Services focused on	the	Link(s) to C	ommunity	
	most vulnerable peop	ole	Strategy Ke	ey Objectives	

	Reshaping Trafford					
	Council					
RISK	Trafford Council must ens partners, contractors, mer hands. To be able to assumed to demonstrate that data securely both in tech that 3 rd parties acting on the with Trafford Council's porisk to the Council is repu	nbers and organisate its partners and the legal to the legal are handling per nology and physica neir behalf are hand licies and procedure	tions in Trafford he public that th ersonal/ sensitive I terms. They als ling their data se es. This is a corp	are safe in their is is the case they e and commercial so need to ensure ets in accordance porate risk and the		
	ultimately be a breach of t		Act. (T&R)/(T&R)			
Consequences	 Statutory duty not discha Negative impact on reput Unforeseen financial imp Emotional damage to see The risk is a mixture of reput 	tation. dications rvice users tational, financial, adv				
Controls	 a breach of the Data Protection Act resulting in a fine or multiple fines up to £500k. A project to develop policies, procedures, communication and training is complete and training is underway. Reviews of data breaches have been carried out to identify problem areas, these areas have been given priority to implementing controls to mitigate against reoccurrence. Mandatory training is being rolled out to all staff Specific role related training is being rolled out to specialist staff N3 accreditation through the IG Toolkit. (Access to NHS records)has been completed. An annual work plan has been developed to improve on current processes and to monitor and enforce best practice, this work plan is making good progress with a 					
Risk Likelihood	completion date for all a		Exposure	15		
Assessment RISK LEVEL		Medium				
Risk Performance		Wiediaiii				
Indicators						
Effectiveness of controls and performance indicators	 An Information Governal Information Governance The project to develop p Training Needs Assessman requirements of staff, page 1 	work. olicies and procedure nents have been carri rtners, consultants ar	es has been comp led out to identify and members.	oleted. the training		
	A communications plant place focusing on protect training and guidelines a	ting information, emp	loyees responsib	ilities, mandatory		
Improvement Actions (ref to action plans)	 Continue to update the I Communication will take coming 12 months. Monitoring of the effective audits, data protection a contracts with 3rd parties. The Senior Information I 	the form of informing eness of the campaig udits, reviews of data s and data sharing pa	g, education and e gn will be carried flows and review artners.	enforcing over the out through system rs/updates of all		

progress of the work plans.									
Person or Group F	Responsible for mar	nagement of	Wendy Marston – Corporate Director of Transformation &						
risk			Resources						
Risk Review	25 February	Completed By	Paula	Designation	Records & Information				
Date	2014		Titterington		Systems Manager				
Risk Review	24 September	Completed By	Paula	Designation	Records & Information				
Date	2014		Titterington		Systems Manager				

STRATEGICR	ISK RI	EGISTER 2	2014/15		Risk Number	Risk Number 21					
Corporate Prior	ities	Sei	rvices focused on the	most Link(s) t	o Community	Health ar	nd Improved				
		vul	nerable people.	Strategy	/ Key Objectives	Quality o	f Life				
RISK		Failure o	r delay to implemen	t new Adult So	cial Care System	(Liquid Log	ic (LL))				
Consequences		Major ca manual aNegative	n service provision, p pacity issues and inco and paper based rathe impact on the delive	rease the risk to er than electronic	service users as t	he processes	would be				
Controls		 Strategy. Business Continuity Plan (BCP) is updated to include an interim non Adult Social Care Review System for new and existing business. Next data migration round (DM6) will be a full data push and will confirm the length of the data freeze. LL and Oxford Computer Consultants Risks, Assumptions, Issues and Dependencies Log updated weekly during project to identify problems and provide solutions. Escalation process established to communicate issues and risks. Softbox will be used during the data freeze to pay providers and invoice clients until LL recovery plan is complete. Finance data freeze strategy is almost complete and will be presented to the Board for finance. Finance will be identified to assist with data entry into LL after migration. Communicate regularly with supplier to minimise risks and identify issues early. Review the work packages against the proposed "Go Live" and extend if possible. Ensure the correct level of resource is available in order to meet the project deadlines. 									
Risk assessment	Likeli	hood		pact		Exposure	20				
RISK LEVEL				High Risk							
Risk Performan	CE	Detailed r	project plan and perio								
Indicators	00	Betailed	oroject plan and peno	aloai iliilootoiloo	•						
maioatoro											
Effectiveness of controls and performance indicators This is a new risk which will be closely monitored. An action plan will be developed to experience to the controls and business readiness.					oped to ensure						
performance											
performance indicators		- Dovolon	nlan and milestones								
performance indicators Improvement	ection		plan and milestones.	takohaldara							
performance indicators Improvement Actions (ref to a	ection	• Share ar	nd shape plans with st	takeholders.							
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STRATEGIC RISK REGISTER 2014/15 Link(s) to Community												
RISK The Transformation Programme savings will not be delivered in full Increased pressure on budgets as a result of securing additional, sustainable savings immediately or in the subsequent year. Unplanned budget and service impact adversely affecting service provision levels, quality and performance. Adverse impact on reputation. In year revision of other project activity which may have adverse consequences. Controls Transformation Board/CMT. Transformation Programme monthly monitoring, exception reporting and benefits realisation monitoring. Risk Likelihood 3 Impact 5 Exposure 15 RISK LEVEL Risk Performance Indicators Medium Risk Budget monitoring. **Budget monitoring.** Budget monitoring. The governance arrangements in place are mature and effective with appropriate senior level representation and authority to provide the support, challenge, advice and decision making required. The governance arrangements in place are reviewed and monitored monthly. In May, the savings targets were reviewed by TPR. As a result, the saving target is revised from the original value of £5,559k of the £13,659m MTFP savings for 2014/15 to £5,484k of £13,756k. At August 2014, of the revised savings target £4,746k (86.5%) had been delivered. Based on the level of savings achieved to date and the governance improvements in place, the risk is being managed proactively. Improvement Actions (ref to action) **Work closely with Senior Responsible Officers to identify risk to savings at the earliest opportunity and identify appropriate and considered mitigation plans. **Escalate exceptions to the Transformation Board accordingly.	STRATEGIC RI	SK RI	EGISTER 20	14/15			Risk N	umber	22			
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Person or Group Responsible for management of risk Joanne Hyde – Programme Director	Person or Group	Resp							ctor			
Risk Review 21 May 2014 Completed By Sarah Maynard Designation Transformation										sformation		
Date Programme	Date								Progr	ramme		
Manager Manager												
Risk Review 2 October 2014 Completed By Sarah Maynard Designation Transformation		2 C	october 2014	Completed I	3y S	arah May	nard D	esignatior				
Date Programme	Date								_			
Manager									Iviana	igel		

Brownlee

STRATEGIC RISK REGIST	ER 2014/15	Risk Number	23
Corporate Priorities	Low Council Tax.	Link(s) to Community	
	Value for Money.	Strategy Key Objectives	
	 Reshaping Trafford Council. 		

Date

CFW.

RISK			naping Trafford outcomes.	Counci	I Programm	e does	n't progr	ess to pla	an and/	or deliver its
 The new organisational model is not delivered. Adverse impact on reputation. Increased pressure on budgets as a result of securing additional, sust immediately or in the subsequent year via new initiatives. Unplanned budget and service impact adversely affecting service provand performance. Adverse impact on other programme activity, due to the significant into the programme. The new organisational model is not underpinned by a shaping demand 					ice provis	vision levels, quality				
 Transformation Board/CMT. Transformation, Resources and Performance Group. Transformation Programme monthly monitoring, exception reporting and benefits rea monitoring. Supporting Change to Happen Steering Group. Resource planning. Provision of sufficient budget to resource the programme. 					ts realisation					
assessment						Ū		xpood.		.0
RISK LEVEL					Medium R	lisk				
Indicators	Risk Performance Indicators							red by TPR, programme by planned by 2015/16 will be		
Improvement Actions (ref to a plans)		support f • Work clo opportun	continue to support to continue sely with Senior ity and identify and of exceptions	to the or Respon appropria	riginal plan wi sible Officers ate and consi	ith mini to ide dered i	mal disrup ntify risk to mitigations	otion. o projects s plans.	at the	earliest
Person or Group	Resp			f risk						formation and
Risk Review	2 O	ctober 201	4 Completed	Ву	Sarah May	nard	Designa	tion	Transf	ormation

Date					Programme Manager
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STRATEGIC RISK RI	EGISTER 2014/	15	Ri	sk Number	24				
Corporate Priorities	Services	focused on the	Link(s) to Comr	munity	Health and improved quality				
	most vul	nerable people.	Strategy Key O	bjectives	of life.				
RISK	around cap	acity, timescale on. New interde	es, resources, inter pendency with hea	dependencie lith and socia					
Consequences	demand. • Hub is no BCF subr admissior	w included with t nission, it is not i ns to acute servic	he Health and Socia mplemented it will in ces.	al Care Integra	ncil's ability to manage future ation Programme in Trafford's Council's ability to reduce				
Controls	 Programn Baseline vinitial businitial business Engagem public, pa Work plandelivery multiple Updates the informed sinformed in Revised parts 	 Programme Manager in place. Programme Board established. Baseline work has taken place to scope and model the Wellbeing Hub resulting in an initial business case and project plan. Engagement work has taken place to co-produce an initial model in conjunction with the public, partners, providers and staff. Work planned to bring together integration and hub programmes, their governance and delivery models. Updates being shared and meetings taking place with partners and stakeholders to keep informed and maintain their interest. Revised plans to be shared and shaped with stakeholders. Revised milestones to be agreed and monitored to review risk. 							
Risk Assessment Li	ikelihood	3 Impa	ct 5	Exposu	re 15				
RISK LEVEL		Med	ium Risk						
Risk Performance Indicators	Detailed pro	ject plan and pe	riodical milestones.						
Effectiveness of controls and performance indicator	plans and m	•	peing revised to link vereed effectiveness w	•	n Programme. Once new 3.				
Improvement Actions (ref to action plans)	Develop plantShare andCoproduceMonitor cap	Treat the risk. •Develop plan and milestones. •Share and shape plans with stakeholders. •Coproduce delivery. •Monitor capacity of Project Team. •Monitor milestones and risk.							
Person or Group Resp			Programme Mana	ager – Commi	ssioning Service.				
Previous risk review	s completed:								
CFW SLT (D Brownlee, L Harper, D Eaton, J Pearce, C Ramsden and C Baker-Longshaw). June 2014									
Risk Review Date	October 2014	Completed By	D Brownlee	Designation	Corporate Director CFW				