

TRAFFORD COUNCIL

Report to: Accounts and Audit Committee
Date: 24 March 2015
Report for: Information
Report of: Audit and Assurance Manager

Report Title

Strategic Risk Register 2014/15 (March 2015 update)

Summary

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:

Name: Mark Foster – Audit & Assurance Manager. **Extension:** 1323
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Background Papers:

None

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 January to early March 2015.

2. THE STRATEGIC RISK ENVIRONMENT – RISK EXPOSURE AND PERFORMANCE MANAGEMENT

- 2.1 The Council continues to review and monitor its strategic risks. Given the challenges faced by the Council going forward, it is acknowledged that it will need to continue to review its approach to risk and risk management as risks change and potentially higher risks arise.
- 2.2 Section 3 of this report contains a summary listing of the highest strategic risks identified. The Audit & Assurance Service requested current strategic risk owners to provide a summary update on the strategic risks that are under their remit including progress in managing these risks.
- 2.3 Since the last strategic risk monitoring update was reported to the Accounts and Audit Committee in November 2014, it is proposed that five strategic risks be removed from the Register and two strategic risks be added to the Register.
- 2.4 The strategic risks to be removed from the Register are (reference numbers as included on the November 2014 update report) :

- **SR5 - Availability of capital resources from sales of surplus assets and Government Grant to support the Capital Programme.**
Historically, capital expenditure has been contained within capital resources available and this is estimated to be the case for 2015-18, hence the risk has been removed.
- **SR7 - Ability of partnership working to release resources with sufficient speed and execution to deliver joint objectives around children.**
Given the Section 75 Strategic Partnership Commissioning Agreement has now been in place for some time, the risk in future will be monitored at the service level through monitoring of the partnership agreement.
- **SR11 - Council does not agree, adopt and deliver carbon reduction targets.** It is recommended that this risk be removed from the Strategic Risk

Register. A number of details supporting the removal of the risk were provided by the EGEI Directorate which include the following information:

- Trafford Council has fallen out of the Carbon Reduction Commitment (CRC) Scheme at the beginning of Phase 2 in 2014/15. This element of risk is no longer applicable.
- The proposed new commercial Joint Venture will be tasked with saving energy from Council buildings.

- **SR18 – 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.**

Given the changes made to the Council website over the last 12 months it is considered that this risk should be removed.

- **SR24 - Ability to implement the Early Help (Wellbeing Hub) in Trafford by April 2015. Risks around capacity, timescales, resources, interdependencies and sufficient coproduction. New interdependency with health and social care integration programme requires a review of plans and programme governance, risking possible delay.**

This risk is removed from the register because the “hub” programme has ceased, with key aspects being incorporated into other projects within the CFW work programme.

2.5 The proposed strategic risks to be added are:

- **SR5 (new risk) - Loss / absence and retention of senior managers to the organisation.**
- **SR11 (new risk) - New Joint Venture partner fails to deliver services to the required standard or fails to deliver required efficiency savings.**

2.6 The risk exposure score has been revised for one existing risk:

- **SR17 - (Inability to meet Trafford residents’ requests to have burials within the local area due to insufficient land) reduced from a medium risk of 12 to a low risk of 8.**

2.7 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 21 strategic risks (seven of which are considered high level).

2.8 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). Risk 16 regarding the Adult Social Care Budget 2015/16 has been reviewed to take account of progress with governance arrangements that have been put in place including the establishment of a CFW

Transformation team. This team has reviewed all business cases and is providing support to achieve delivery of savings. CFW has continued to progress implementation of actions identified in the Budget Monitoring Action Plan to ensure improved monitoring processes are in place.

Comparison of Risk Levels November 2014 and March 2015

IMPACT **Risk Levels – November 2014**

Very High(5)	3	7	2	3	
High (4)	1	4	1		
Medium (3)		1	1	1	
Low (2)					
Very Low (1)					
	Very Low (1)	Low (2)	Med. (3)	High (4)	Very High (5)

LIKELIHOOD

IMPACT **Risk Levels – March 2015**



Very High(5)	4	5	3	3	
High (4)	2	2	1		
Medium (3)				1	
Low (2)					
Very Low (1)					
	Very Low (1)	Low (2)	Med. (3)	High (4)	Very High (5)

LIKELIHOOD

High Risk
Medium Risk
Low Risk

3. Summary Table –Strategic Risks (March 2015)

Red	Amber	Green
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<i>Risk</i>	<i>Strategic Risk Title / (Directorate) / (Portfolio)</i>	<i>Risk Level</i>	<i>Management of Risk - Direction of Travel *</i>	<i>Comments</i>
1	<p>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.</p> <p>(EGE1)/(Economic Growth and Planning)</p>	8 Low		<p>All project risks contained and detailed within individual project plans. Overall, all projects are within tolerance.</p> <ul style="list-style-type: none"> • Altair outline planning consent granted. Revision to the development agreement to be completed by the end February 2015. Detailed planning application for phase 1 due summer 2015 with start on site Spring 2016. • 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 Spring 2015). • Altrincham public realm strategy agreed and phase 1 complete. Procurement of design consultants for phase 2 completed. • 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 report produced. Procurement of public realm design consultants complete. • Altrincham Strategy approved. • Sale of Carrington by Shell to Langtree completed, with further sale to Himor also completed. Project governance structure being reviewed.
2	<p>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</p>	20 High		<ul style="list-style-type: none"> • A Safeguarding Peer Review (February 2013) has been helpful in identifying the areas for development and improvement which were in line with our own evaluations. The overall messages about safeguarding were very positive, with recognition of good practice, strong partnership working and a learning organisation. • Responsibility for this risk is multi-agency and dependant on all parties to achieve successful outcomes and sustained improvement. • The Family Justice Review recommendations



	<p>intervention and support of services. In particular, the risk of the Safeguarding Board not being effective in undertaking its duties and responsibilities and/ or insufficient numbers of staff, particularly social workers with relevant experience, to provide effective safeguarding services to children and young people.</p> <p>(CFW)/(Children's Services)</p>			<p>are being progressed and the new court timescales will be implemented. 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.</p> <ul style="list-style-type: none"> • Ofsted completed a full inspection of Trafford Council services to safeguard children and of the Trafford Safeguarding Children's Board (TSCB) in February 2015, the outcome of which will be published in April 2015. It will be appropriate to review this risk once the full Ofsted report has been published.
3	<p>Demand for school places under-estimated and/ or additional school places are not delivered to satisfy increased demand.</p> <p>(CFW)/(Children's Services)</p>	<p>15 Medium</p>	<p>← →</p>	<ul style="list-style-type: none"> • All children have been allocated places for the 2015/16 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 to plan for 2017 and beyond 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	<p>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.</p> <p>(T&R)/(Finance)</p>	<p>25 High</p>	<p>← →</p>	<p>The last Comprehensive Spending Review (CSR) was in June 2013 for the years 2014/15 and 2015/16. The next Spending Round is expected in summer 2015 and is expected to signal further reductions in local government spending over the next few years. At this stage best estimates have been made for later years for forecasting purposes.</p> <p>The budget for 2015/16 has been agreed by Council on 18 February 2015. The budget for 2015/16 of £148.914m included for:-</p> <ul style="list-style-type: none"> • Budget pressures in the form of reduced government funding of £10.1m and additional cost pressures of £14.6m. • Additional one-off income of £3.2m from an


				<p>increase in the council taxbase, additional dividend from the Manchester Airport Group and an increase in retained business rates. It is not certain that these last two sources will continue in the future.</p> <ul style="list-style-type: none"> • Savings of £21.5m - the highest single year for savings yet and the expectation is that the requirement to make savings will continue over the next few years. This will be demanding on the capacity of both managers and staff. To part mitigate this, a dedicated transformation team has been set up to look at the delivery of the CFW savings which make up the major part of the overall budget savings. <p>Some decisions on the budget are not yet known for example the Joint Venture and extended consultation on the libraries with decisions on these areas in March 2015.</p> <p>To mitigate against the risks a minimum reserve level of £6m has been maintained.</p>
5	<p>Loss / absence and retention of senior managers to the organisation.</p> <p>(T&R)/(Finance)</p>	<p>20 High</p>	<p>New Risk</p>	<p>New risk added 16.12.14</p> <ul style="list-style-type: none"> • An assessment process was undertaken in January 2015 for the post of Corporate Director – Children, Families and Wellbeing and an appointment made on an acting-up basis. • Proposals on revised and strengthened Corporate Management Team arrangements were approved at Council on 18th February 2015; the realignment of the post of Corporate Director – Resources to incorporate increased and robust responsibility directly for the Council’s financial management arrangements and the formal appointment of a deputy for the Chief Executive, together with the Directors of Legal and HR attending CMT meetings. • The Corporate Director – Resources post is out to advert at present and the assessment day is scheduled for 21st April 2015. Interim arrangements are in place pending an appointment.
6	<p>Ability of partnership working in relation to vulnerable adults and older people.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	<p>12 Medium</p>	<p>← →</p>	<ul style="list-style-type: none"> • 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

				<p>reporting data on a more regular basis than annually.</p> <ul style="list-style-type: none"> • 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.
7	<p>The Reshaping Trafford Council Programme doesn't progress to plan and/or deliver its expected outcomes.</p> <p>(T&R)/(Transformation and Resources)</p> <p>(Note this risk was formerly listed as Strategic Risk No. 23 per the November 2014 strategic risk register)</p>	<p>15 Medium</p>	<p>← →</p>	<ul style="list-style-type: none"> • 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 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 becomes the 'Reshaping Trafford Council Programme' and all projects actively planned links on to it. On this basis, the budget consultation 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. The actions are being implemented, providing a solid governance foundation for the programme going forward. • In recognition of the significant level of savings to be made by CFW, the potential risk to these being delivered and the consequential impact on

				the CFW service user population and the Council, a discrete transformation programme has now been established within CFW. This will provide the level of rigour and governance required to deliver the savings, the all age integrated delivery model for CFW and manage all risks/issues associated with this work.
8	<p>Demand for eligible services outstrips resources in adult social care.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	25 High	← →	<ul style="list-style-type: none"> • Revised (2014) comprehensive budget monitoring programme including monitoring of budgets at Business Delivery Programme Board and Senior Leadership Team level. • Monthly Budget period monitoring reports now contain clear, up to date information about service demand levels and links to budget impacts and transparent details of assumptions made in forecasting in year • Following a major review and rebalancing of AC budgets in 2014/15 Period 9 Budget Monitoring report shows budget controls are delivering services within budget. • Actions and activity arising from the Budget Monitoring Investigation Action Plan are being implemented and will regularly be updated to the Accounts and Audit Committee.
9	<p>Failure of the Adult Safeguarding Service.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	12 Medium	← →	<ul style="list-style-type: none"> • Refresh of the Safeguarding Policy and procedures are due to commence in March 2015. • Adult Safeguarding Board has been refreshed and a revised governance process in place, introducing a strategic operational board which is jointly chaired. • An Independent Chair is to be appointed. • Joint Children's and Adult safeguarding committee now in place. • Senior Learning and Development post vacant. Impact on sustaining competency in relation to implementation of practice both internal and external agencies. • The Clinical Safeguarding Nurse is currently not in work, this is being covered two days a week by the CCG. • Serious Case Review Panel reviewed and in place. • Recent court judgements lowering the threshold for Deprivation of Liberty Orders. Increased resources agreed. • Additional Capacity agreed. • Annual Safeguarding Plan completed. Serious Case Review Plan is in place. Annual Report completed.


10	<p>Breach of health and safety legislation leading to prosecution under the Corporate Manslaughter Act.</p> <p>(T&R)/(Transformation and Resources)</p>	<p>10 Medium</p>	<p>← →</p>	<ul style="list-style-type: none"> • 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 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. Training for staff who work at height is now underway. • The First Aid procedures/arrangements have been reviewed and training for staff is on-going, together with manual handling training.
11	<p>New Joint Venture partner fails to deliver services to the required standard or fails to deliver required efficiency savings.</p> <p>(EGEI)/(Environment and Operations)</p>	<p>10 Medium</p>	<p>New Risk</p>	<p>New Risk</p> <ul style="list-style-type: none"> • The effectiveness of controls and performance will only be fully tested when new contract in operation and governance arrangements established. • Any actions for improvement would be determined when contract in place (subject to Executive approval).
12	<p>Performance targets relating to Adult Social Care services are not met.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	<p>10 Medium</p>	<p>← →</p>	<ul style="list-style-type: none"> • Monitoring is in place and a range of weekly, monthly and quarterly reports are overseen by Business Delivery Programme Board. A weekly activity to finance update has been added to the reporting schedule to give an early indication of potential spending pressures. • Performance is measured against national and local performance indicators as per Directorate Performance Framework. • The Liquid Logic IT system has now been implemented (December 2014) and should eventually ensure better reporting and closer alignment of activity and finance data to facilitate more accurate planning. • Ensure that the roll out of the new operating model/ integration of health and social care continues to address key personalisation/ integration performance indicators.


13	<p>Major event leading to inability to deliver critical services to vulnerable people.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	<p>16 High</p>		<ul style="list-style-type: none"> • Consideration has been given to events which could stretch the capacity of the Service. This has included plans for monitoring and responding to winter pressures. All CFW Services have business continuity plans in place within the Directorate with supporting action plans actively monitored. These are due to be reviewed further. • Contractual requirements on external providers to have business continuity plans in place.
14	<p>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.</p> <p>(T&R)/(Transformation and Resources)</p>	<p>10 Medium</p>		<ul style="list-style-type: none"> • In the Summer of 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 Emergency Planning Manager has through HR and AGMA, gained agreement to use an on-line learning package developed by Risk and Resilience at Manchester City Council. Currently HR are looking at placing this on their work programme. • The BC policy has been updated with some minor amendments and also to reflect service structural changes across the council. This now needs to be agreed by CMT. • 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-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. • Over the past few months all BIAs and where

		15		<p>necessary BC plans are under review.</p> <ul style="list-style-type: none"> • 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. <p>For ease of reference a summary of the RAG spread sheet is outlined below:</p> <ul style="list-style-type: none"> • <u>Children, Families and Wellbeing (Adults and Children)</u>. All Adult and Children's Services now need an annual review. BIAs and necessary BCPs were completed but are now due for review. • <u>Economic Growth and Prosperity</u>. All BIAs and BCPs were completed in 2013 but will now need updating in the current review to reflect Directorate changes to EGEI. • <u>Environment, Transport and Operations</u>. 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. • <u>Transformation and Resources</u>. Still awaiting responses from Legal and Democratic, Revenues and Benefits and Culture and Sport. Human Resources completed in 2014. ICT are in the process of building a second server, but still require updating their Disaster Recovery/BCP. • <u>Corporate Plan</u>. The completion of the Corporate BCP is dependent on service areas completing their analyses of their business. A draft version is currently being prepared. <p>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.</p>
15	<p>Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014.</p> <p>(CFW)/(Children's Services)</p>	15 Medium		<ul style="list-style-type: none"> • 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. • 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.

				<ul style="list-style-type: none"> • Work underway to establish an integrated referral and assessment service to enable personal budgets linked to EHC Plans.
16	<p>Adult Social Care Budget 2015/16: Ability to implement approved savings proposals in the current economic conditions.</p> <p>(CFW)/ (Adult Social Services and Community Wellbeing).</p>	<p>25 High</p>	<p>↔</p>	<ul style="list-style-type: none"> • The ASC budget has now been completely realigned to remove historic structural budget issues. This has meant that an additional £6.5M has been built into the 2015/16 CFW budget (before savings). This rebasing will ensure that savings proposals are now developed and implemented based on robust financial information. • Regular monitoring of budget at SLT and service level. • CFW Transformation Programme Board to monitor delivery of savings proposals on a monthly basis. • CFW Transformation Team in place including Benefits Realisation Manager. • Detailed action plans developed to deliver all budget savings proposals. • Updated benefits realisation monitoring process being implemented based on monitoring of key actions linked to activity and unit costs. • 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. • 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 in 2014/15. Continued monitoring of progress against this plan will take place to ensure agreed actions are implemented and details of progress will continue to be reported. • A new operating process is being developed to be fully implemented by 1 April 2016: Phase1 will focus on reviewing and realigning existing budgets to establish a clear baseline in terms of cost and activity and then developing a CFW Benefits Realisation process for 2015/16. Phase2 will focus on the development of an outcome focussed CFW operating process for the future.
17	<p>Inability to meet Trafford residents' requests to have burials within the local area due to insufficient land.</p>	<p>8 Low</p>	<p>↑</p>	<ul style="list-style-type: none"> • Agreement in principle reached to purchase additional land. • The Council is in dialogue with the landowner, the National Trust to conclude the land

	(EGEI)/(Environment and Operations)			<p>acquisition.</p> <ul style="list-style-type: none"> The anticipated final purchase date is subject to associated tenant agreements on the land. Risk now classed as low. However, if the land cannot be purchased by May 2015 we will need to raise the risk to Medium. <p>Planning application to be submitted following acquisition.</p>
18	<p><u>Impact and implementation of the Care Act.</u> 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.</p> <p><i>(CFW)/ (Adult Social Services and Community Wellbeing).</i></p> <p>(Note this risk was formerly listed as Strategic Risk No. 19 per the November 2014 strategic risk register)</p>	15 Medium	← →	<ul style="list-style-type: none"> Programme Manager appointed. Care Act Programme Board and ASC Business Delivery Board provide overview and scrutiny role in relation to preparations and readiness of the Care Act programme. Linked into the Care Act national and regional Networks Nine 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. The financial reform work stream is undertaking comprehensive financial modelling and will highlight any significant financial impacts.
19	Trafford Council must ensure 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	15 Medium	← →	<ul style="list-style-type: none"> Citizens and businesses have a right to expect 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

	<p>data securely both in technology and physical terms. They also need to ensure that 3rd parties acting 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.</p> <p>(T&R)/ (Transformation and Resources).</p> <p>(Note this risk was formerly listed as Strategic Risk No. 20 per the November 2014 strategic risk register)</p>			<p>Stream have developed all relevant policies, procedures, communication and education including mandatory courses for all employees, partners and members. These policies and procedures have been communicated to the Council and the first tranche of training has been rolled out.</p> <ul style="list-style-type: none"> • The annual work plan is successfully being delivered with a completion of the 31 December 2015. Information Asset Owner are progressing the embedding of information in the Council's day to day activities. • Information Asset Owners are progressing the 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 • An Information Governance Team has been set up to include an IG Manager, 2 x IG Officers and an IG Apprentice. The team is in the process of being established with an expected full complement of staff at the end of March 2015.
20	<p>Failure or delay to implement new Adult Social Care System (Liquid Logic).</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p> <p>(Note this risk was formerly listed as Strategic Risk No. 21 per the November 2014 strategic risk register)</p>	20 High		<ul style="list-style-type: none"> • Business continuity plan is updated to include an interim non Adult Social Care Review System for new and existing business. • LAS implementation phase one went live 9th December as planned. Phase 2 implementation for the Control OCC System to go live on 1st April 15. (Its <u>modules include</u>: Contracts, Payments and Charging which can work together to provide a personalised framework for managing individual budgets). • Liquid Logic (LL) and Oxford Computer. Consultants (OCC) 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 until phase 2 is completed and a period of embedding has occurred. • Manuals written to support key parts of the system and regular meetings held with users to address specific process issues. Member of HR providing support with training until end March 2015. • Review the work packages against the proposed "Go Live" and extend if possible. • Version 6 is being tested to accommodate changes required for the implementation of the

				<p>Care Act in April 2015.</p> <ul style="list-style-type: none"> • Programme Board meets weekly to monitor progress post-implementation • Ensure the correct level of resource is available in order to meet the project deadlines. Additional staff in place to clear backlog generated during the four weeks when there was no access immediately prior to Go Live.
21	<p>The Transformation Programme savings will not be delivered in full.</p> <p>(T&R)/ (Transformation and Resources)</p> <p>(Note this risk was formerly listed as Strategic Risk No. 22 per the November 2014 strategic risk register)</p>	<p>15 Medium</p>		<ul style="list-style-type: none"> • 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 Transformation Portfolio savings target are reviewed and monitored monthly. • In May 2014, 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 £13,776k. • At November 2014, of the revised savings target £5,079 (93%) had been delivered. • Based on the level of savings achieved to date and the governance improvements in place, the risk is being managed proactively.

* 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 (March 2015)

STRATEGIC RISK REGISTER 2014/15			Risk Number		1	
Corporate Priorities		Value for money Fighting crime Economic Growth and Development	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 Framework delivery, Old Trafford Master Plan (OTMP) and Carrington development do not proceed due to economic and financial constraints.				
Consequences		<ul style="list-style-type: none"> • Failure to deliver on promise to community. • Negative impact on reputation. • Adverse impact on urban regeneration. • Failure to deliver the Core Strategy housing and employment growth targets. • Negative impact on economic and housing growth in the borough. 				
Controls		<ul style="list-style-type: none"> • Lead officers identified. • Consultants in advisory role where appropriate. • Officer/ member steering groups in place. • Regular performance meetings with developer/ key stakeholders. • Detailed project plans in place. • Altrincham Forward. 				
Risk Assessment	Likelihood	Altair = 2 Altrincham = 2 OTMP = 2 Carrington = 2	Impact	Altair = 4 Altrincham = 4 OTMP = 4 Carrington = 4	Exposure	Altair = 8 Altrincham = 8 OTMP = 8 Carrington = 8 Average = 8
RISK LEVEL			Low Risk (Average)			
Risk Performance Indicators		<p>Altair</p> <ul style="list-style-type: none"> • CPO confirmed, developer proposals being finalised. • Funding strategy dependent upon pre-letting key parts of development. • Outline planning consent granted and development agreement to be completed February 2015. <p>Altrincham</p> <ul style="list-style-type: none"> • Altrincham Forward Board reviews – quarterly. • Delivery of pipeline developments, including Graftons (on site), new hospital, interchange and Altair (see above). • Support of local traders/ organisations/residents. • Altrincham Town Team in place (July 2013). • Altrincham Strategy approved <p>OTMP</p> <ul style="list-style-type: none"> • Essex Way development complete. • Tamworth refurbishment and demolition works complete • Hullard refurbishments complete. • HCA funding for Shrewsbury Street scheme approved. Project governance structure agreed and in place. • Land Pool Agreement approved by Council Executive. <p>Carrington</p>				

	<ul style="list-style-type: none"> • Sale of site by Shell to developer complete (2013), with further sale to Himor complete. • Outline of spatial concepts being developed. • Engagement with key stakeholders' on-going. • Flixton Road junction improvements complete. • New project governance structure in place and being reviewed 				
Effectiveness of controls and performance indicators	Altair = 3 Altrincham = 4 OTMP = 3 Carrington = 3				
Improvement Actions (ref to action plans)	Regular performance meetings with developers/ key stakeholders to ensure project times and delivery of key mile stones.				
Person or Group Responsible for management of risk	Economic Growth, Environment and Infrastructure (EGEI)				
Previous risk reviews completed:	<ul style="list-style-type: none"> • 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 Date	January 2014	Completed By	Richard Roe	Designation	Head of Growth.
Risk Review Date	September 2014	Completed By	Richard Roe	Designation	Director of Growth and Regulatory Services.
Risk Review Date	February 2015	Completed By	Richard Roe	Designation	Director of Growth and Regulatory Services

STRATEGIC RISK REGISTER 2014/15		Risk Number	2
Corporate Priorities	Services focused on the most vulnerable people.	Link(s) to Community Strategy Key Objectives	Bright Futures
RISK	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 insufficient numbers of staff, particularly social workers with relevant experience, to provide effective safeguarding services to children and young people.		
Consequences	<ul style="list-style-type: none"> • Harm or abuse of children. • Sanctions/penalties against Service. • Legal liability claims. • Negative impact on reputation. 		
Controls	<ul style="list-style-type: none"> • Monthly meetings of the Director of Children's Services Safeguarding Group. • Independent Chair appointed and Safeguarding Board governance and planning 		

		approved.				
Risk Assessment	Likelihood	4	Impact	5	Exposure	20
RISK LEVEL			High Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> 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. Ofsted completed a full inspection of Trafford council services to safeguard children and of the TSCB in February 2015, the outcome of which will be published in April 2015. It will be appropriate to review this risk once the full Ofsted report has been published. 					
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> The direction of travel is improving. The Service was inspected by OFSTED and CQC in April 2010 and the report concluded that the overall effectiveness of safeguarding and the capacity for improvement were good, with only a few exceptions, performance is better than statistical neighbours and nationally. In addition in December 2010 Children’s Services in Trafford were rated as performing excellently by OFSTED and this rating was confirmed for a second year in December 2011. The Trafford Safeguarding Children’s Board (TSCB) remains independently chaired and made good progress against its 2012/13 business plan. A revised business planning process has now been developed linked to the children and young people’s strategy and a three year plan is complete. The work of the TSCB sub-groups is robust and they are monitoring and quality assuring safeguarding outcomes for children. Multi-agency preventative work with children in need is well developed and effective and the number of new children coming into care has recently increased and the current number of child protection plans and children in care is high and reasons for this are analysed regularly with actions taken if appropriate. Action plans have been developed following recent inspections but all recommendations are very minor. Partnership working and communication in safeguarding services are good, both within the CYPS and between the CYPS, 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. The CYPS has recruited to a number of posts in recent months. The number of high quality applicants was high indicating Trafford’s good reputation as an employer. They are settling into Trafford well and are very positive about their early experiences here. Caseloads are high but manageable and the workload management system is helping to promote balanced workloads in line with the capability of staff and their level of experience. Training and support for staff are of consistently high quality, especially the multi-agency training arranged by the TSCB for which take-up is good. The Munro review of child protection services and the government response indicates Trafford’s direction of travel is in line with current thinking and work is in progress to address the Munro recommendations although full clarity is not yet available from government in terms of detailed expectations. Trafford participated in a Safeguarding Peer Review in February 2013 and the overall messages about safeguarding were very positive with recognition of good practice, strong partnership working and as a learning organisation. The feedback has been helpful in confirming areas for continuous development and improvement. The findings were in line with our own evaluation of strengthens and areas for development. 					

Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> Action plans from recent inspections to be progressed and monitored within CFW. Actions arising from the 2013 Peer Review of safeguarding have all been actioned. The Family Justice Review recommendations are being progressed and the new court 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 Responsible for management of risk	CFW Senior Leadership Team				
Previous risk reviews completed:					
<ul style="list-style-type: none"> C Pratt, Corporate Director CYPS. April 2009 and October 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 Baker-Longshaw). February 2014. 					
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15			Risk Number		3	
Corporate Priorities		Excellence in Education		Link(s) to Community Strategy Key Objectives		Bright Futures
RISK	Demand for school places underestimated and/ or additional school places are not delivered to satisfy increased demand.					
Consequences	<ul style="list-style-type: none"> Statutory duty not discharged. Negative impact on reputation. Ad hoc expensive provision required. Disruption to pupils' education. 					
Controls	<ul style="list-style-type: none"> Thorough review based on most recent birth rates undertaken each year taking into account recent and planned housing developments. The comprehensive plan, giving the analysis of and projecting the increased demand for school places considered by the Executive in June 2014 is now being implemented. Secondary School Sufficiency Review completed and reported to the Council Executive to plan for 2017 and beyond. 					
Risk Assessment	Likelihood	3	Impact	5	Exposure	15
RISK LEVEL			Medium Risk			
Risk Performance Indicators	All children are offered a place at school.					
Effectiveness of controls and performance indicators	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 necessarily in the preferred choice of parents. A Capital Programme is in place to address 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.					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> Continue to update the review undertaken on most recent birth rates and taking into 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 					

<p>projections suggest that from 2017 the number of secondary school places will be a major issue.</p> <ul style="list-style-type: none"> • Fragmentation of governance arrangements makes it increasingly difficult to plan places in the secondary sector. Trafford is the Admissions Authority for only one of its 18 secondary schools and, therefore, has limited direct powers in relation to place planning and admissions policies. • Update the Executive when Spending Review allocations are published. • Subject to approval, implement the Comprehensive Plan.
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Person or Group Responsible for management of risk | CFW Senior Leadership Team

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
- 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
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15 | **Risk Number** | **4**

Corporate Priorities	All Corporate Priorities	Link(s) to Community Strategy Key Objectives
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RISK	<p>There continues to be uncertainty regarding the Council’s medium term financial position given the reliance that exists on support from Central Government and that public expenditure reductions are now expected to continue until 2017/18.</p> <p><u>Support from Central Government Cost Pressures</u> The financial settlement for 2015/16 broadly reflected the expected reduction in resources that was assumed in the Council’s projections for 2015/16. The position for the following two years will be known with more certainty following the outcome of the next Spending Review expected in the summer of 2015.</p> <p>In addition to reducing funding there continues to be cost pressures and demands on the budget including:</p> <ul style="list-style-type: none"> ➤ Increased demand on services including social care. ➤ Changes in legislation and new regulations. ➤ 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. ➤ Organisational change costs. <p>Equally, opportunities for savings through efficiency and economy after five years of austerity budgets are becoming more difficult to find. The scale of budgeted savings in 2015/16 is £21.5m the highest single year saving yet and the expectation is that the requirement to make savings will continue over the next few years. This will be demanding on the capacity of both managers and staff. To part mitigate this, a dedicated transformation team has been set up to look at the delivery of the CFW savings which make up the major part of the overall budget savings. Some decisions on the budget are not yet known for example the Joint Venture and extended</p>
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		<p>consultation on the libraries with decisions on these areas in March 2015.</p> <p>The Council has agreed the 2015/16 budget at £148.914m, a reduction of £5.638m or 3.6% on 2014/15. Overall services pressures continue to grow and are estimated at £24.7m made up of reduced government funding of £10.1m and increased cost pressures of £14.6m for 2015/16.</p> <p>To offset these pressures £3.2m has been identified from a combination of increase in the council taxbase, dividend from the Manchester Airport Group and increase in retained business rates. At this stage it is not known if these latter two will be recurring income streams.</p> <p>In respect of business rates there remains a number of forecasting and other issues such as:</p> <ul style="list-style-type: none"> ➤ The variability of the local economy. ➤ Annual review of the appeals provision. ➤ The unknown impact of the 2017 valuation, including associated appeals. 				
Consequences		<ul style="list-style-type: none"> • Reducing level of services across the Authority. • Adverse perception of the Authority. • Negative impact on reputation. • Potential political impact. 				
Controls		<ul style="list-style-type: none"> • Likely gross deficit based on best data available for 2015/16 budget year and 2015/18 MTFP period has been updated. • Budget and financial management information systems in place. • Regular budget monitoring reports including a Council Tax and Business Rate projections. • Government safety net will limit any losses on business rates in a particular year (current annual maximum liability is £2.4m). • Reshaping projects widening the scope of realising potential efficiencies through income generation, sharing overheads, introducing technology and investment through partner or contract arrangements. • Provisions maintained for anticipated costs of organisational change (employment rationalisation). • Smoothing reserves established where necessary for such items as, Treasury Management to avoid changes in the external markets impacting on the budget, and to equalise the costs of the Waste Disposal PFI over the medium term. • Minimum level of reserves established to provide short term cover for losses. 				
Risk Assessment	Likelihood	5	Impact	5	Exposure	25
RISK LEVEL			High Risk			
Risk Performance Indicators		<ul style="list-style-type: none"> • Director of Finance monitoring Council's current year budget. • Regular budget/ financial monitoring (Directorates). • Business Delivery Group established to review and challenge CFW budget monitoring • TPR monitoring transformation and all other savings. 				
Effectiveness of controls and performance indicators		3				
Improvement Actions (ref to action plans)		<ul style="list-style-type: none"> • Improvements to robustness and monitoring processes being actioned. • Financial management training of budget holders rolled out in February and March 2015 				

- Savings areas for 2015/16 have been subject to public, staff and business consultation, equality impact assessment and a rigorous business case development and robustness review. Variations in both resource levels and savings will be reviewed regularly for CMT and Executive to take remedial action.

Person or Group Responsible for management of risk	Director of Finance				
Previous risk reviews completed:					
<ul style="list-style-type: none"> • I Duncan, Director of Finance. April 2009; October 2009; February 2010; July 2010, January 2011, September 2012, February 2013 and March 2014. • I Kershaw, Head of Financial Management. August 2011 and January 2012. • D Muggeridge, Finance Manager. August 2013. • G Bentley February 2015 					
Risk Review Date	October 2014	Completed By	Ian Duncan	Designation	Director of Finance
Risk Review Date	February 2015	Completed By	Graeme Bentley	Designation	Interim Head of Financial Management

STRATEGIC RISK REGISTER 2014/15			Risk Number	5	
Corporate Priorities	Reshaping Trafford Council	Link(s) to Community Strategy Key Objectives	Strong Economy		
RISK	Loss / absence and retention of senior managers to the organisation.				
Consequences	<ul style="list-style-type: none"> • Adverse impact on the delivery of the Reshaping Trafford Council programme. • Lack of direction / leadership. • Negative impact on reputation. • Increased demand on those managers remaining in the organisation. • De-motivated workforce / low morale. 				
Controls	<ul style="list-style-type: none"> • Executive Search Framework in place, enabling the prompt sourcing of experienced interims. • Opportunity for permanent recruitment for critical posts, with relocation available to ensure the widest candidate base. • Investment in skills development, through the 'Supporting Change to Happen' programme / change strategy. • Recognition of high performers through the Employee Recognition Awards and SOLACE development programme for rising stars to aid succession planning and talent management. • Organisational Development (OD) recovery plan in place, providing additional skills development. 				
Likelihood	4	Impact	5	Exposure	20
RISK LEVEL			High Risk		
Risk Performance Indicators	<ul style="list-style-type: none"> • Turnover • Absence • Employee survey results 				
Effectiveness of controls and performance indicators	3				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • Robust monitoring of the OD recovery plan through monthly CMT meetings. • Change Strategy Steering Group in place and the Year 2 strategy in development, with a focus on succession planning and talent management. 				

<ul style="list-style-type: none"> • Phase 2 (coaching, negotiating and commercial skills training) of the ‘Supporting Change to Happen’ development programme commenced in January 2015. • Executive Search Framework due to be re-tendered, providing the opportunity to select providers that meet the changing demands of the organisation. • Appointment made (on an acting basis) to the Corporate Director, Children, Families and Wellbeing post. • Proposals on revised and strengthened Corporate Management Team arrangements approved at 18th February 2015 Council 					
Person or Group Responsible for management of risk			Lisa Hooley, Acting Director of HR		
Risk Review Date	March 2015	Completed By	Lisa Hooley	Designation	Acting Director of HR

STRATEGIC RISK REGISTER 2014/15				Risk Number		6
Corporate Priorities		<ul style="list-style-type: none"> • 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 with health to deliver joint objectives for vulnerable adults and older people and to improve health inequalities.				
Consequences		<ul style="list-style-type: none"> • Not meeting service objectives around key groups of people. • Spend is not best utilised/ limited value for money. • Could lead to reduced service/support to vulnerable persons. 				
Controls		<ul style="list-style-type: none"> • Partnership Boards in place. • Mechanisms in place to support decision-making and deliver governance. • Regular leadership and oversight meetings with Council and NHS Chief Executives. • Leadership and engagement by relevant Chief Officers in respective fields. 				
Risk Assessment	Likelihood	3	Impact	4	Exposure	12
RISK LEVEL				Medium Risk		
Risk Performance Indicators		<ul style="list-style-type: none"> • Signing-off procedures on key agreements and arrangements. • Delivery of health and wellbeing indicators. 				
Effectiveness of controls and performance indicators		<p>3 – There are forums in place which enable Adult Social Services and CCG Commissioners to meet on a regular basis, to ensure the delivery of joint partnership objectives. The Health and Wellbeing Board is established and will be reviewed in March 2015. Public Health responsibilities have been successfully transferred. There are Boards in place to oversee the delivery of joint services e.g. the Mental Health Commissioning Partnership Group and the Integrated Community and Equipment Services Board. A Section 75 Agreement is in place with Pennine Care to enable the delivery of integrated health and social care services for adults. Other S75 agreements are kept under constant review, for example the GMW s75 agreement has been reviewed and extended and the CWP S75 Agreement has been temporarily suspended pending a re-tendering exercise by the CCG. From April 2015 a new S75 agreement will be in place with the CCG to cover the Better Care Fund, our plans for which have now received national approval. The CFW Transformation Programme will result in a review and refresh of all relevant partnership arrangements.</p>				
Improvement Actions (ref to action plans)		<ul style="list-style-type: none"> • Work with Health and Wellbeing Board to implement Health and Wellbeing Strategy. • Ensuring existing partnerships have governance arrangements in place that are fit for 				

	the future.				
	<ul style="list-style-type: none"> CFW Transformation Programme 				
Person or Group Responsible for management of risk			CFW Senior Leadership Team		
Previous risk reviews completed by:					
<ul style="list-style-type: none"> D McNulty, Chief Executive. April 2009. D Hanley, Deputy Director CWB. February 2010; July 2010 and January 2011. J Walker, Performance & Partnerships Manager, August 2011 D Wagstaff, Senior Business Relationship Partner. January 2012 CWB SMT: (A Higgins, J Wilmott, J Kay & M Grimes). August 2012, CWB SMT: (D Brownlee, L Harper, J Wilmott & J Kay). February 2013 and CFW SMT: (D Brownlee, L Harper, J Wilmott & J Kay). August 2013. CFW Senior Leadership Team (D Brownlee, L Harper, J Pearce, C Ramsden & C Baker-Longshaw). February 2014. 					
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15			Risk Number	7 (No.23 previously)		
Corporate Priorities		<ul style="list-style-type: none"> Low Council Tax. Value for Money. Reshaping Trafford Council. 	Link(s) to Community Strategy Key Objectives			
RISK	The Reshaping Trafford Council Programme doesn't progress to plan and/or deliver its expected outcomes.					
Consequences	<ul style="list-style-type: none"> The new organisational model is not delivered. Adverse impact on reputation. Increased pressure on budgets as a result of securing additional, sustainable savings immediately or in the subsequent year via new initiatives. Unplanned budget and service impact adversely affecting service provision levels, quality and performance. Adverse impact on other programme activity, due to the significant interdependencies across the programme. The new organisational model is not underpinned by a shaping demand strategy. 					
Controls	<ul style="list-style-type: none"> Transformation Board/CMT. Transformation, Resources and Performance Group. Transformation Programme monthly monitoring, exception reporting and benefits realisation monitoring. Supporting Change to Happen Steering Group/Change Management Group. Resource planning. Provision of sufficient budget to resource the programme. CFW Programme Board. 					
Risk assessment	Likelihood	3	Impact	5	Exposure	15
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> Budget monitoring. Project monitoring. Executive key decision 1 September 2014. Executive key decision 18 February 2015. 					
Effectiveness of	<ul style="list-style-type: none"> The governance arrangements in place are mature and effective with appropriate senior 					

controls and performance indicators	<p>level representation and authority to provide the support, challenge, advice and decision making required.</p> <ul style="list-style-type: none"> • 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 becomes the 'Reshaping Trafford Council Programme' and all projects actively planned links on to it. On this basis, the budget consultation 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. The actions are being implemented, providing a solid governance foundation for the programme going forward. • In recognition of the significant level of savings to be made by CFW, the potential risk to these being delivered and the consequential impact on the CFW service user population and the Council, a discrete transformation programme has now been established within CFW. This will provide the level of rigour and governance required to deliver the savings, the all age integrated delivery model for CFW and manage all risks/issues associated with this work. 				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • CMT to continue to support understanding of and engagement in the programme, to secure support for it to continue to the original plan with minimal disruption. • Work closely with Senior Responsible Officers to identify risk to projects at the earliest opportunity and identify appropriate and considered mitigations plans. • Escalation of exceptions to plan to CMT/Transformation Board at the earliest opportunity. 				
Person or Group Responsible for management of risk	Joanne Hyde – Acting Corporate Director of Transformation and Resources.				
Risk Review Date	2 October 2014	Completed By	Sarah Maynard	Designation	Transformation Programme Manager
Risk Review Date	17 February 2015	Completed By	Dianne Geary	Designation	Acting Transformation Programme Manager

STRATEGIC RISK REGISTER 2014/15			Risk Number	8
Corporate Priorities	Services focused on the most vulnerable people	Link(s) to Community Strategy Key Objectives	Health & Improved Quality of Life for All	
RISK	Demand for eligible services outstrips resources in adult social care.			
Consequences	<ul style="list-style-type: none"> • Overspend on budgets. • People do not receive services they are eligible for. 			
Controls	<ul style="list-style-type: none"> • Delivery of MTFP and in year savings. • Revised (2014) comprehensive budget monitoring programme in place including monitoring of budgets at service, Business Delivery Programme Board and SLT level. • Monthly Budget period monitoring reports now continue clear, up to date information about service demand levels and links to budget impacts and transparent details of assumptions made in forecasting in year-end impacts • Business case portfolio in place. • Resource allocation system introduced and embedded. 			

	<ul style="list-style-type: none"> • Improvements made to reablement services/ embedding of telecare offer. • Improved performance data in place, to identify trends in take up of services. 					
Risk Assessment	Likelihood	5	Impact	5	Exposure	25
RISK LEVEL			High Risk			
Risk Performance Indicators	Budget monitoring. Project monitoring. CFW Transformation Programme reporting					
Effectiveness of controls and performance indicators	3 – Following major review and rebalancing of ASC budgets in 2014/15 Period 9 Budget monitoring report shows budget controls are delivering services within budget					
Improvement Actions (ref to action plans)	<p>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 (26 September 2014). Monitoring of progress against the Action Plan will take place to ensure agreed actions are implemented and details of progress will be reported to future Committee meetings. Key actions include:</p> <ul style="list-style-type: none"> • 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 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 prepared by the Department of Health (re: Care Act). • Negotiations complete re: the BCF. • On-going risk flagged to CFW Senior Leadership Team and included in the budget setting process. • CFW Transformation Programme Board in place and monitoring all major transformation plans • Care Act programme board managing risks associated with new national eligibility criteria and well-being duty 					
Person or Group Responsible for management of risk	CFW Senior Leadership Team					
Previous risk reviews completed:						
<ul style="list-style-type: none"> • D Hanley, Director of Operations. April 2009; July 2010 and January 2011 • J Walker, Performance & Partnerships Manager. October 2009, February 2010 and August 2011 • D Wagstaff, Senior Business Relationship Partner. January 2012 • 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 Date	October 2014	Completed By	Deborah Brownlee	Designation	CFW Senior Leadership Team	
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	

STRATEGIC RISK REGISTER 2014/15			Risk Number	9
Corporate Priorities	Services focussed on the	Link(s) to Community	• Strong Communities	

	most vulnerable people.	Strategy Key Objectives	• Health & Improved Quality of Life for All			
RISK	Failure of the Adult Safeguarding Service.					
Consequences	<ul style="list-style-type: none"> • Potential harm to vulnerable individuals. • Legal action against the Council. • Adverse impact on reputation. 					
Controls	<ul style="list-style-type: none"> • Updated Safeguarding strategy in place. • Discrete Safeguarding team. • Training provided to all key staff. • Working with a wide range of partners. • Robust management information and quarterly monitoring in place • Regular multi-agency safeguarding management meeting in place. • Additional capacity agreed. 					
Risk Assessment	Likelihood	3	Impact	4	Exposure	12
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> • SMT reporting. • Reports to Safeguarding Board. 					
Effectiveness of controls and performance indicators	3					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • Multi-agency review re: extending safeguarding role and responsibilities completed. • Reports on safeguarding incidents, by individual provider, to be introduced. • Implement quality assurance arrangements. • Re-launch communications with public and partners. • Annual Safeguarding plan completed • Annual report completed • Serious case review plan in place • Operational safeguarding group in place • Increased resources agreed for deprivation of Liberty activity 					
Person or Group Responsible for management of risk			CFW Senior Leadership Team			
Previous risk reviews completed:						
<ul style="list-style-type: none"> • D Hanley, Deputy Director CWB. April 2009; October 2009; July 2010 and January 2011 • J Walker, Performance & Partnerships Manager. February 2010 and August 2011 • D Wagstaff, Senior Business Relationship Partner. January 2012 • 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. 						
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	

STRATEGIC RISK REGISTER 2014/15			Risk Number	10
Corporate Priorities	Value for Money	Link(s) to Community Strategy Key Objectives		

RISK	Breach of health and safety legislation leading to prosecution under the Corporate Manslaughter Act.					
Consequences	<ul style="list-style-type: none"> • Possible personal conviction of Officers and/ or Members. • Adverse impact on reputation. • Financial consequences of fines/ legal claims. 					
Controls	<ul style="list-style-type: none"> • 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 expertise and support. • Member awareness. • Management training. • Support to schools provided via SLA. • Audit and Assurance review of the Council's corporate health and safety arrangements. 					
Risk Assessment	Likelihood	2	Impact	5	Exposure	10
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> • Health and Safety team track all accidents/ near misses. • Six month report to CMT/ Executive and Annual Report to Council. • Targets set for accident reduction. • Corporate Health and Safety Improvement Plan reviewed annually. 					
Effectiveness of controls and performance indicators	2					
Improvement Actions (ref to action plans)	<p>Delivery of work plan to implement recommendations in the corporate improvement plan.</p> <p>The first aid procedure has been reviewed and training is ongoing for staff involved in manual handling, working at height and first aid.</p>					
Person or Group Responsible for management of risk	All					
Risk reviews completed: <ul style="list-style-type: none"> • G Pickering, Corporate Director PPD. April 2009 • P Valentine, IBU Manager. October 2009 • C Hay, Workforce & Core Strategy Officer. August 2012 • J Arnold, Health & Safety Manager. February 2010; July 2010, January 2011, August 2011, February 2013, September 2013 and February 2014. • L Hooley, Acting Director of HR. February 2015 						
Risk Review Date	October 2014	Completed By	J Arnold	Designation	Health & Safety Manager	
Risk Review Date	February 2015	Completed By	L Hooley	Designation	Acting Director of HR	

STRATEGIC RISK REGISTER 2015/16			Risk Number	11
Corporate Priorities	Economic Growth and Development Reshaping Trafford Council	Link(s) to Community Strategy Key Objectives	Positive Environment Impact Better homes Strong economy	
RISK	New Joint Venture partner fails to deliver services to the required standard or fails to deliver required efficiency savings			
Consequences	<ul style="list-style-type: none"> • Failure to deliver key front line services, including domestic waste collection, street cleaning, grounds maintenance, highway maintenance and street lighting maintenance 			

	<ul style="list-style-type: none"> Negative impact on reputation Failure to meet budget savings targets Negative impact on economic growth and environmental and public health 				
Controls	<ul style="list-style-type: none"> Award of contract(s) subject to Executive approval on the 16th March 2015 Robust procurement exercise followed External legal advisers appointed New Contracts Director appointed and contract management team to be put in place New governance structure to be adopted to oversee service delivery at a strategic and operational level Local authority has retained control of strategy and policy approval New performance and payment mechanisms to be put in place 				
Likelihood	2	Impact	5	Exposure	10
RISK LEVEL			Medium Risk		
Risk Performance Indicators	<ul style="list-style-type: none"> New Key Performance Indicator suite adopted to cover all services delivered through the contract Price Performance Mechanism 				
Effectiveness of controls and performance indicators	3 (will only be fully tested when new contract in operation and governance arrangements established)				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> To be determined when contract in place (subject to Executive approval) 				
Person or Group Responsible for management of risk	Economic Growth, Environment and Infrastructure (EGEI)				
Risk Review Date	February 2015	Completed By	Richard Roe	Designation	Director of Growth and Regulatory Services
Risk Review Date		Completed By		Designation	

STRATEGIC RISK REGISTER 2014/15			Risk Number	12
Corporate Priorities	<ul style="list-style-type: none"> Lower Council Tax and Value for Money. Services focussed on the most vulnerable people. 	Link(s) to Community Strategy Key Objectives	Health & Improved Quality of Life for All	
RISK	Performance targets relating to Adult Social Care services are not met.			
Consequences	<ul style="list-style-type: none"> Services fail. Adverse impact on Council's reputation. Failure to meet personalisation agenda. 			
Controls	<ul style="list-style-type: none"> Performance management framework in place (now also captures CCG information). Established data flows on statutory/ national indicators and performance indicators. Monitoring in place within service – a range of weekly, monthly and quarterly reports overseen by Business Delivery Board and reported through to SLT. Action plans implemented, where appropriate, against underperforming targets. Replacement IT system (now live) should ensure better reporting and closer alignment of 			

	activity and financial data. A period of embedding required to test the system for accuracy.					
	<ul style="list-style-type: none"> Mental Health Trust engaged through Partnership meetings. 					
Risk Assessment	Likelihood	2	Impact	5	Exposure	10
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> Performance monitored against national and local performance indicators as per Directorate Performance framework. Action plans implemented, where appropriate, against underperforming targets. 					
Effectiveness of controls and performance indicators	<p>2</p> <p>Regular summary reports are provided to Business Delivery Board which outlines clearly the potential risk areas.</p>					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> Ensure the roll out of the new operating model / integration of health and social care continues to address key personalisation / integration performance indicators. Performance is measured against national and local performance indicators as per Directorate Performance Framework. Continue to ensure that the framework is reviewed and updated to focus on the key national and directorate priority areas as they change over time. Monitoring is in place via a range of weekly, monthly and quarterly reports that are overseen by the Business Delivery Programme Boards and reported through to SLT. A weekly activity to finance update has been added to the reporting schedule to give an early indication of potential spending pressures The Liquid Logic IT system has now been implemented (from December 2014) and should eventually ensure better reporting and closer alignment of activity and finance to facilitate more accurate planning. 					
Person or Group Responsible for management of risk	CFW Senior Leadership Team					
Risk reviews completed:						
<ul style="list-style-type: none"> J Walker, Performance & Partnerships Manager. April 2009; October 2009; February 2010; July 2010, January 2011 and August 2011 D Wagstaff, Senior Business Relationship Partner. August 2011 and January 2012 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 Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	

STRATEGIC RISK REGISTER 2014/15			Risk Number	13
Corporate Priorities	Services focused on the most vulnerable people	Link(s) to Community Strategy Key Objectives	Health & Improved Quality of Life for All	
RISK	Major event leading to inability to deliver critical services to vulnerable people.			
Consequences	<ul style="list-style-type: none"> Interruption to service provision to vulnerable people. Financial loss to the organisation. 			

Controls		<ul style="list-style-type: none"> • Consideration has been given to events which could stretch the capacity of the Service. This has included plans for monitoring and responding to winter pressures. Business continuity plans are in place within the Directorate with supporting action plans actively monitored. • Contractual requirements on external providers to have business continuity plans in place • Plan development with providers. 				
Risk Assessment	Likelihood	4	Impact	4	Exposure	16
RISK LEVEL			High Risk			
Risk Performance Indicators		Action plan to test and monitor business continuity plans.				
Effectiveness of controls and performance indicators		2 – Full suite of business continuity plans in place. Plans to be reviewed				
Improvement Actions (ref to action plans)		Review of existing plans and establish programme for testing business continuity plans.				
Person or Group Responsible for management of risk			CFW Senior Leadership Team			
Previous risk reviews completed:						
<ul style="list-style-type: none"> • D Hanley, Deputy Director CWB. April 2009; July 2010 and January 2011 • J Walker, Performance & Partnerships Manager. October 2009, February 2010 and August 2011 • D Wagstaff, Senior Business Relationship Partner. January 2012 • 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 Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW	

STRATEGIC RISK REGISTER 2014/15		Risk Number	14
Corporate Priorities	All corporate priorities	Link(s) to Community Strategy Key Objectives	<ul style="list-style-type: none"> • Health & Improved Quality of Life for All • Better Homes • Positive Environmental Impact • Strong Economy
RISK	Failure to complete the Business Continuity (BC) Programme Project, resulting in an increased risk that the Council fails to deliver Council services in the event of significant disruption.		
Consequences	<ul style="list-style-type: none"> • Failure to meet requirements of the Civil Contingencies Act, good practice and Use of Resources Assessment criteria. • Failure to have sufficient plans in place at a service and corporate level to respond effectively to local and widespread disruption, including that caused by emergencies. • Failure to continue the delivery of critical Council services including those vital to human welfare during disruption. • Failure to ensure that services commissioned under Reshaping Trafford, have robust BC 		

	plans. • Impact on council reputation.					
Controls	<ul style="list-style-type: none"> • A set of templates are available on the council's Intranet pages, together with Business Continuity guidance and tips, under the 'Business Continuity Toolkit'. \\trafford.gov.uk/dfsroot/IBU/Corporate/Partnerships and Communities Service/Emergency Planning/Civil Contingencies/ROTA-NUMBERS-INFO • There is a Council wide Resilience Forum in place, which includes partner agencies, and shares information and best practice in relation to planning for emergencies and service disruption in order to monitor the effectiveness of the plans. • This forum fulfils civil protection duties under the Civil Contingencies Act in relation to Business Continuity, the sharing of information and co-operation with other local responders. • The Emergency Planning Manager offers support to individual services to review plans if required. 					
Risk Assessment	Likelihood	2	Impact	5	Exposure	10
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> • All services to undertake a BIA and where the risk level is a one or two, they must complete a BC plan. • Annual Reviews of BIAs and BC plans. • Corporate BC Plan is in draft form. • Service level and Corporate BC Plans to be tested. 					
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> • In late 2013 BIAs were conducted across service areas and BC plans written where necessary. • These are now due for review and an updated 'RAG' spreadsheet has been updated to reflect the current position. • BIAs and BC plans are the responsibility of individual service areas. • The Emergency Planning Manager updates the BC Intranet Site as necessary and maintains a spread sheet of the status of service planning. 					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • A planned test in the form of a table top exercise took place within the T&R Directorate. • The key area of concern was the ability to get ICT services up and running as soon as possible in the event of a disruption. (Exercise Flatline II report) • An Action Plan was developed following the disruptive weather in February 2014 in order to better prepare Council services for dealing with similar incidents. • Most actions were completed, with one still outstanding. (See action plan). • The BC policy has been updated with some minor amendments and also to reflect service structural changes across the council. This now needs to be agreed by CMT. • The Emergency Planning Manager has through HR and AGMA, gained agreement to use an on-line learning package developed by Risk and Resilience at Manchester City Council. Currently HR are looking at placing this on their work programme. 					
Person or Group Responsible for management of risk	Head of Partnerships and Communities					
Previous risk reviews completed:	<ul style="list-style-type: none"> • A Harrison, Temporary Business Continuity Lead. February 2010; May 2010; July 2010 and January 2011. • J Stephenson, Head of Partnerships & Performance. August 2011, August 2012, February 2013, August 2013 and February 2014. 					
Risk Review	October	Completed	David Hooley	Designation	Emergency Planning Manager	

Date	2014	By			
Risk Review Date	February 2015	Completed By	David Hooley	Designation	Emergency Planning Manager

STRATEGIC RISK REGISTER 2014/15				Risk Number	15
Corporate Priorities			Link(s) to Community Strategy Key Objectives		
RISK	Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014.				
Consequences	<ul style="list-style-type: none"> Lack of integrated planning leading to a failure to meet the needs of children and young people. Unable to meet statutory duties set out in the Special Educational Needs (SEN) Code of Practice. Financial impact on the Dedicated Schools Grant (DSG) High Needs Block. Potential legal/tribunal challenge to Education, Health and Care (EHC) Plans. Political and reputational damage to the Council. 				
Controls	<ul style="list-style-type: none"> Trafford has been a Special Educational Needs and Disabilities Pathfinder since 2011. Well established governance arrangements. Local offer and Policies designed and implemented. EHC conversion. 				
Risk Assessment	Likelihood	3	Impact	5	Exposure 15
RISK LEVEL			Medium Risk		
Risk Performance Indicators	<ul style="list-style-type: none"> Measures monitored through governance arrangements with headlines to Business Development Group and SLT. Number of EHC Plans. Number of conversions. Number of mediations. Number of tribunals. 				
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> Implementation plan on target. Local Offer available from September 2014. Consultation on new policies to start in October 2014. Good engagement from parents and other stakeholders in governance arrangements. 				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> Independent mediation service to be commissioned from April 2015. 0-25 EHC assessment to be established from April 2015. Progress against all key actions identified in the implementation plan. 				
Person or Group Responsible for management of risk		CFW SLT			
Previous risk reviews completed:					
Risk Review Date	October 2014	Completed By	D Brownlee	Designation	Corporate Director CFW
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15				Risk Number	16
Corporate Priorities		Services focussed on the most vulnerable people	Link(s) to Community Strategy Key Objectives		Health & Improved Quality of Life for all
RISK	Adult Social Care Budget 2015/16: Ability to implement approved savings proposals				

		in the current economic conditions.				
Consequences		<ul style="list-style-type: none"> • Difficulty of implementing wide range of budget savings proposals destabilises provision 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 implementing wide range of budget savings proposals. 				
Controls		<ul style="list-style-type: none"> • Regular monitoring of budget at SLT and service level. • CFW Transformation Programme Board to monitor delivery of savings proposals on a monthly basis. • CFW Transformation Team in place including Benefits Realisation Manager. • Detailed action plans developed to deliver all budget savings proposals. • Updated benefits realisation monitoring process being implemented based on monitoring of key actions linked to activity and unit costs. • 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. 				
Risk Assessment	Likelihood	5	Impact	5	Exposure	25
RISK LEVEL			High Risk			
Risk Performance Indicators		<ul style="list-style-type: none"> • Budget monitoring. • SLT reporting. • Business Delivery Programme Board's role in monitoring and managing savings proposals delivery. 				
Effectiveness of controls and performance indicators		<p>3</p> <ul style="list-style-type: none"> • Each proposal has agreed business case and risk rating. • Consultation exercise was completed. • Delivery plan developed for each savings proposal. • Benefits realisation/ savings proposals being closely monitored. • Performance data being collected on an on-going basis. 				
Improvement Actions (ref to action plans)		<p>The delivery of CFW 2015/16 savings and the identification of proposals for 2016/17 have been identified as a key risk to the Council. To address this a CFW Transformation Team has been established. This Team has reviewed all business cases and has added resources to support delivery. The governance arrangements in respect of this Team are through a new CFW Programme Board, the Transformation Board and the Reshaping Trafford Portfolio Holders Board. These boards meet monthly and will manage the delivery and benefits realisation of all savings proposals.</p> <p>The CFW Adults Budget has now been completely realigned to remove historic structural budget issues. This has meant that an additional £6.5m has been built into the 2015/16 CFW Budget (before savings). This rebasing will ensure that savings proposals are now developed and implemented based on robust financial information.</p> <p>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). Continued 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.</p>				

	<p>A new operating process is being developed for CFW to be fully implemented by 1st April 2016:</p> <ul style="list-style-type: none"> • Phase 1 (1st February to 30th April) will focus on reviewing and realigning existing budgets and data to establish a clear baseline in terms of cost and activity and then developing a CFW benefits realisation process for 2015/16. • Phase 2 (1st May to 31st July) will focus on the development of an outcome focused CFW operating process for the future. Key activity will include developing: <ul style="list-style-type: none"> - Medium term forecasts of costs and activity - Restructured budgets based on commissioning: provider split, and - Robust monitoring processes linking activity, cost and performance developed.
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Person or Group Responsible for management of risk | CFW Senior Leadership Team

Previous risk reviews completed:

- J Kay, Finance Manager and D Wagstaff, Senior Business Relationship Partner. March 2012
- 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 Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15			Risk Number	17		
Corporate Priorities		<ul style="list-style-type: none"> • Low Council Tax and Value for Money • Economic Growth and Development 	Link(s) to Community Strategy Key Objectives	Positive Environmental Impact		
RISK		Inability to meet Trafford residents' requests to have burials within the local area due to insufficient land.				
Consequences		<ul style="list-style-type: none"> • Impact on MTFP. • Reputational damage to the Council. • Council does not acquire the required additional burial land. 				
Controls		<ul style="list-style-type: none"> • On-going negotiations to acquire new land. • Effective project management of land acquisition and development. • Capital monies available for purchase. 				
Risk Assessment	Likelihood	2	Impact	4	Exposure	8
RISK LEVEL			Low Risk			
Risk Performance Indicators		<ul style="list-style-type: none"> • Project deadlines for land re-aligned. • Compliance with development plan deadlines (to be established). • Monitor available burial space in all Council cemeteries. 				
Effectiveness of controls and performance indicators		2				
Improvement Actions (ref to action plans)		<ul style="list-style-type: none"> • Agreement in principle reached to purchase additional land. • Decision of acquisition expected April 15. • Anticipated final purchase April 15. 				

	<ul style="list-style-type: none"> • Additional possibilities also being looked at adjacent Urmston Cemetery. • Risk reduced to Low • Layout and design worked up. • Planning application to be submitted following acquisition. 				
Person or Group Responsible for management of risk			T&R (Traded services)		
Previous risk reviews completed:					
Phil Valentine, Environment Strategic Business Manager. August 2013 and February 2014.					
Risk Review Date	September 2014	Completed By	Dave Jennings	Designation	Bereavement Services Manager
Risk Review Date	27 Jan 15	Completed By	Phil Valentine	Designation	Senior transformation manager

STRATEGIC RISK REGISTER 2014/15			Risk Number	18 (No.19 previously)		
Corporate Priorities			Link(s) to Community Strategy Key Objectives			
RISK	<p><u>Impact and implementation of the Care Act.</u> 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.</p> <p>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.</p>					
Consequences	<ul style="list-style-type: none"> • Increased financial pressure due to introduction of cost cap and increased responsibilities and duties. • Increased demand on already stretched capacity due to increased responsibility for assessment and developing of care accounts for all residents requiring care. • A lack of adequate resources and capacity across managers and teams in commissioning, operations and enabling groups to deliver unprecedented changes, leading to a delay in developments being implemented • Potential reputational damage through failure to meet changed responsibilities and duties. 					
Controls	<ul style="list-style-type: none"> • Trafford Council are linked in to the Care Act National and Regional Networks. • Care Act Programme Board and Adult Social Care Business Delivery Board providing overview and scrutiny role in relation to preparations and readiness. • Programme Manager in place to oversee the programme of change. • Governance arrangements in place to oversee the implementation of the Care Act Programme, including a Board and Team. • Nine work streams which link in with existing structures are in place 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. • The financial reform work stream is undertaking comprehensive financial modelling and will highlight any significant financial impacts. 					
Risk Assessment	Likelihood	5	Impact	3	Exposure	15
RISK LEVEL			Medium Risk			
Risk Performance Indicators	<ul style="list-style-type: none"> • Business Delivery Programme Board reporting. • SLT reporting. • Care Act Programme Board role in co-ordinating, shaping and driving the changes. 					

	<ul style="list-style-type: none"> • Programme management approach in place. • Timescales and deliverables mapped. 				
Effectiveness of controls and performance indicators	2 – Governance programme management in place but full impact on process, demand, capacity and budgets is still being modelled.				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • Complete financial modelling. • Finalise proposals for change. • Continue involvement in regional and national networks to learn from other areas. 				
Person or Group Responsible for management of risk	Adult Social Care Delivery Board.				
Previous risk reviews completed:					
<ul style="list-style-type: none"> • Deborah Brownlee, Corporate Director CFW, August 2013 • D Brownlee, L Harper, J Pearce, C Ramsden and C Baker-Longshaw, CFW SLT, February 2014 					
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2014/15		Risk Number	19 (No.20 previously)
Corporate Priorities	<ul style="list-style-type: none"> • Services focused on the most vulnerable people • Reshaping Trafford Council 	Link(s) to Community Strategy Key Objectives	
RISK	<p>Trafford Council must ensure that information held about citizens, employees, partners, contractors, members and organisations in Trafford are 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 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. (T&R)/(T&R).</p>		
Consequences	<ul style="list-style-type: none"> • Statutory duty not discharged. • Negative impact on reputation. • Unforeseen financial implications • Emotional damage to service users • The risk is a mixture of reputational, financial, adverse publicity and could ultimately be a breach of the Data Protection Act resulting in a fine or multiple fines up to £500k. 		
Controls	<ul style="list-style-type: none"> • Reviews of data breaches are continually 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, this is a yearly accreditation activity and forms part of the IG Annual workplan. • 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 completion date for all activities set to the 31 December 2014. 		

	<ul style="list-style-type: none"> An IG team has been set up to deal with IG activities both across the council and with external partners and contractors. 					
Risk Assessment	Likelihood	3	Impact	5	Exposure	15
RISK LEVEL			Medium Risk			
Risk Performance Indicators						
Effectiveness of controls and performance indicators						
<ul style="list-style-type: none"> An Information Governance Project Board has been set up to oversee the Information Governance work. The project to develop policies and procedures has been completed. Training Needs Assessments have been carried out to identify the training requirements of staff, partners, consultants and members. A communications plan has been developed and a communications campaign took place focusing on protecting information, employees' responsibilities, mandatory training and guidelines and toolkits to enable 'best practice' information governance. An IG team has been established with an expected full complement of staff by the end of March 2015. 						
Improvement Actions (ref to action plans)						
<ul style="list-style-type: none"> Continue to update the Information Governance Board on progress. Communication will take the form of informing, education and enforcing over the coming 12 months. Monitoring of the effectiveness of the campaign will be carried out through system audits, data protection audits, reviews of data flows and reviews/updates of all contracts with 3rd parties and data sharing partners. The Senior Information Risk Owner (SIRO) will regularly update CMT on the progress of the work plans. 						
Person or Group Responsible for management of risk				Wendy Marston – Corporate Director of Transformation & Resources		
Risk Review Date	25 February 2014	Completed By	Paula Titterington	Designation	Records & Information Systems Manager	
Risk Review Date	24 September 2014	Completed By	Paula Titterington	Designation	Records & Information Systems Manager	
Risk Review Date	18 February 2015	Completed By	Paula Titterington	Designation	Records & Information Systems Manager	

STRATEGIC RISK REGISTER 2014/15			Risk Number	20 ((No.21 previously))
Corporate Priorities	Services focused on the most vulnerable people.	Link(s) to Community Strategy Key Objectives	Health and Improved Quality of Life	
RISK	Failure or delay to implement new Adult Social Care System (Liquid Logic (LL))			
Consequences	<ul style="list-style-type: none"> Impact on service provision, payment to providers, billing, care assessments and reviews. Major capacity issues and increase the risk to service users as the processes would be manual and paper based rather than electronic. Negative impact on the delivery of the Council's Corporate Priorities and the Community Strategy. 			
Controls	<ul style="list-style-type: none"> 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 			

		<p>updated weekly during project to identify problems and provide solutions. Escalation process established to communicate issues and risks.</p> <ul style="list-style-type: none"> • Softbox will be used until Phase 2 has been completed and a period of embedding has occurred. • Liquid Logic IT System went live in December 2014. On-site support from the Performance Team will continue to be available until the end of March 2015. • Communicate regularly with supplier to minimise risks and identify issues early. • Manuals written to support key parts of the system and regular meetings held with users to address specific process issues. Member of HR providing support with training until end March 2015. • Review the work packages against the proposed “Go Live” and extend if possible. Go Live of ContrOCC delayed until April 2015. • Version 6 is being tested to accommodate changes required for the implementation of the Care Act in April 2015. • Programme Board meets weekly to monitor progress post-implementation. • Ensure the correct level of resource is available in order to meet the project deadlines. Additional staff in place to clear backlog generated during the four weeks when there was no access immediately prior to Go Live. • Project Plan in place to deliver Phase 2 of the implementation. 					
Risk assessment	Likelihood	4	Impact	5	Exposure	20	
RISK LEVEL				High Risk			
Risk Performance Indicators	Detailed project plan and periodical milestones.						
Effectiveness of controls and performance indicators	This is a new risk which will be closely monitored. An action plan will be developed to ensure business readiness.						
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> • Develop plan and milestones. • Share and shape plans with stakeholders. • Coproduce delivery. • Monitor capacity of Project Team. • Monitor milestones and risk. 						
Person or Group Responsible for management of risk			Identified members of Operational Services and Project Team				
Risk Review Date	October 2014	Completed By	Deborah Brownlee	Designation	Corporate Director CFW		
Risk Review Date	February 2015	Completed By	Deborah Brownlee	Designation	Corporate Director CFW		

STRATEGIC RISK REGISTER 2014/15			Risk Number	21 (No.22 previously)
Corporate Priorities	<ul style="list-style-type: none"> • Low Council Tax • Value for Money • Reshaping Trafford Council 	Link(s) to Community Strategy Key Objectives		
RISK	The Transformation Programme savings will not be delivered in full			
Consequences	<ul style="list-style-type: none"> • 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. <ul style="list-style-type: none"> • Adverse impact on reputation. • In year revision of other project activity which may have adverse consequences. 					
Controls	<ul style="list-style-type: none"> • Transformation Board/CMT. • Transformation, Resources and Performance Group. • Transformation Programme monthly monitoring, exception reporting and benefits realisation monitoring. 					
Risk assessment	Likelihood	3	Impact	5	Exposure	15
RISK LEVEL				Medium Risk		
Risk Performance Indicators	<ul style="list-style-type: none"> • Budget monitoring. • Project monitoring. 					
Effectiveness of controls and performance indicators	<p>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.</p> <ul style="list-style-type: none"> • The Transformation Portfolio savings target 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 £13,776k. • At November 2014, of the revised savings target £5,079 (93%) 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 plans)	<ul style="list-style-type: none"> • 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. 					
Person or Group Responsible for management of risk			Joanne Hyde – Programme Director			
Risk Review Date	21 May 2014	Completed By	Sarah Maynard	Designation	Transformation Programme Manager	
Risk Review Date	2 October 2014	Completed By	Sarah Maynard	Designation	Transformation Programme Manager	
Risk Review Date	17 February 2015	Completed By	Dianne Geary	Designation	Acting Transformation Programme Manager	