

## TRAFFORD COUNCIL

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

### **Report Title**

**Strategic Risk Register 2015/16 (September 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  
Susan Price – Senior Audit & Assurance Officer                      **Extension:** 1325

### **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 June to early September 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 Progress has continued to be made in addressing the strategic risks as detailed in Sections 3 and 4 of this report.
- 2.3 The Audit & Assurance Service requested current strategic risk owners to provide an update on the strategic risks that are under their remit including progress in managing these risks. Section 3 of this report contains a summary listing of the highest strategic risks identified. Section 4 contains the risk registers for each strategic risk.
- 2.4 Since the previous strategic risk report update to CMT in June 2015, the risk exposure scores have been revised for three existing risks:
  - SR11 - New Joint Venture partner fails to deliver services to the required standard or fails to deliver required efficiency savings reduced from a medium risk of 10 to a low risk of 8.
  - SR15 – Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014 reduced from a medium risk of 15 to a medium risk of 12.
  - SR16 – Adult Social Care Budget 2015/16: Ability to implement approved savings proposals in the current economic conditions reduced from a high risk of 25 to a medium risk of 15.
- 2.5 Since the last update, four risks have been removed from the strategic risk register. The relevant associated risks and issues will continue to be managed at a Directorate level within the Community, Families and Wellbeing Directorate. These risks are:

- Ability of partnership working in relation to vulnerable adults and older people (formerly Strategic Risk 6 per the previous update).
- Demand for eligible services outstrips resources in adult social care (formerly Strategic Risk 8 per the previous update).
- Performance targets relating to Adult Social Care services are not met (formerly Strategic Risk 12 per the previous update).
- Impact and implementation of the Care Act (formerly Strategic Risk 18 per the previous update).

2.6 The risk chart on page 4 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 17 strategic risks (four of which are considered high level). The highest risk relates to the Council's medium term financial position (SR4).

## Comparison of Risk Levels June 2015 and September 2015

<b>IMPACT</b>		<b>Risk Levels – June 2015</b>				
Very High(5)		4	5	2	3	
High (4)		2	2	1		
Medium (3)				1	1	
Low (2)						
Very Low (1)						
		Very Low (1)	Low (2)	Med. (3)	High (4)	Very High (5)

**LIKELIHOOD**



<b>IMPACT</b>		<b>Risk Levels – September 2015</b>				
Very High(5)		2	5	2	1	
High (4)		3	2	1		
Medium (3)				1		
Low (2)						
Very Low (1)						
		Very Low (1)	Low (2)	Med. (3)	High (4)	Very High (5)

**LIKELIHOOD**



<b>High Risk</b>
<b>Medium Risk</b>
<b>Low Risk</b>

### 3. Summary Table –Strategic Risks (September 2015)

<b>Red</b>	<b>Amber</b>	<b>Green</b>
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<b>Risk</b>	<b>Strategic Risk Title / (Directorate) / (Portfolio)</b>	<b>Risk Level</b>	<b>Management of Risk - Direction of Travel *</b>	<b>Comments</b>
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>(EGEI)/(Economic Growth and Planning)</p>	<b>8 Low</b>		<p>All project risks contained and detailed within individual project plans. Overall, all projects are within tolerance.</p> <ul style="list-style-type: none"> <li>• Altair outline planning consent granted. Revised Development Agreement complete (April 2015). Detailed planning application for phase 1 due autumn 2015 with start on site late 2016.</li> <li>• Funding has been approved for the OTMP, and Land Pooling Agreement approved by the Executive March 2014.</li> <li>• Altrincham public realm strategy agreed and phase 1 on site with the first areas complete.</li> <li>• Proposals for new Altrincham Library approved at Executive. Agreement for lease in place, and pre-planning discussions underway.</li> <li>• New operator for Altrincham market appointed and Operating Agreement and Agreement for lease completed (November 2013).</li> <li>• Stretford Masterplan approved (January 2014). Advisers for Lacy Street in place and report produced. Public realm study complete.</li> <li>• Altrincham Strategy approved.</li> <li>• Sale of Carrington by Shell to Langtree completed, with further transfer to Himor also completed. Project governance structure being reviewed and proposals for support by the Growth Team agreed.</li> </ul>
2	<p>The OFSTED Inspection Report published in May 2015 judged our services to be Good with Outstanding areas. The TSCB was also rated as Good. However Safeguarding children 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</p>	<b>12 Medium</b>		<ul style="list-style-type: none"> <li>• OFSTED conducted a full Inspection of services for Children in Need, Children in Need of Protection and Looked after children and the report was published on 12<sup>th</sup> May 2015. At the same time OFSTED conducted an inspection of the Trafford Safeguarding Children’s Board (TSCB) and the report of their performance was also published on 12<sup>th</sup> May 2015.</li> <li>• Services for children in need and children in need of protection were judged to be Good.</li> <li>• Services for Looked After Children were judged to be Good.</li> <li>• Adoption Service was judged to be Good.</li> <li>• Aftercare was judged to be Outstanding.</li> </ul>

<p>been prevented through early help, identification, assessment and support of services. It is therefore imperative that the Local Authority maintains high levels of compliance with legislation, procedures and follows good practice principles in its delivery of statutory services to children and that compliance is consistently monitored and quality assured.</p> <p>The TSCB also must maintain the capacity and support to ensure practice is delivered at the highest level, compliance with standards and targets is closely monitored and deficiencies or concerns are suitably challenged and addressed.</p> <p>(CFW)/(Children's Services)</p>			<ul style="list-style-type: none"> <li>• Leadership &amp; Management was judged to be Outstanding.</li> <li>• The TSCB Was judged to be Good.</li> <li>• There were no areas of immediate action required.</li> <li>• The LA report listed 6 Areas for Improvement. An Action Plan has been developed to address these and sent to OFSTED in August. Progress against this action plan is monitored at the monthly Director of Children Services Safeguarding Meeting.</li> <li>• The TSCB remains independently chaired and completed progress against its 2014/15 business plan and has developed its 15/16 Business Plan. The TSCB sub-groups are monitoring and quality assuring safeguarding outcomes for children.</li> <li>• OFSTED described Multi-agency preventative work with children in need as well developed and effective. The number of new children coming into care has recently increased which is largely due to changes in procedures and young people staying in care for longer, however the children in care numbers are rigorously monitored and each child independently reviewed by the IRO's. The number of child protection plans have reduced while child in need plans have increased, this was seen as positive by OFSTED. Quality of Child in Need Plans is monitored by the IRO's and quality of Child in Need Plans is now supported by the permanent Child in Need IRO.</li> <li>• 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.</li> <li>• 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.</li> <li>• 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.</li> <li>• 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.</li> <li>• The Singe Assessment process is now well</li> </ul>
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				<p>embedded in Trafford and the quality of our assessments were seen as good by OFSTED.</p> <ul style="list-style-type: none"> <li>Children Sexual Exploitation (CSE) and children who go missing are monitored through the SEAM Panel. The Phoenix Risk Assessment tool is fully utilised and there is strong joint work with the Police through Phoenix Trafford.</li> </ul> <p>Responsibility for this risk is multi-agency and dependant on all parties to achieve successful outcomes and sustained improvement.</p>
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><b>15</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>All children have been allocated places for the 2015/16 academic year.</li> <li>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.</li> <li>A two year resource allocation has now been received from Department for Education (DfE) and a Capital Programme is planned in line with projections.</li> <li>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.</li> <li>Capital implications of the SEN review are also being implemented to meet additional demand for places.</li> </ul>
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&amp;R)/(Finance)</p>	<p><b>25</b> <b>High</b></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"> <li>Budget pressures in the form of reduced government funding of £10.1m and additional cost pressures of £14.6m.</li> <li>Additional one-off income of £3.2m from an 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.</li> <li>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.</li> </ul>



			<ul style="list-style-type: none"> <li>• There are some significant risks impacting on the delivery of the 2015/16 budget, namely the delivery of the savings above, new emerging cost pressures from demand led services and also from the prospect of in year funding reductions. The former two issues are being monitored through the Transformation Board and will also be included in monthly monitoring reports to the Executive.</li> <li>• The Government announced a first wave of funding reductions on 4 June 2015 and whilst not affecting the overall local government settlement will have an impact on the level of Public Health funding the Council will receive and the impact on the budget is being assessed.</li> <li>• A further national Budget was announced in July and subsequently “non-protected” departments have been asked to prepare for funding reductions of between 25% and 40% over the next few years. The outcome of this will be announced in the spending review on 25 November 2015.</li> <li>• At this stage the Council is due to commence public consultation on its 2016/17 budget plans where, at this stage, a further £20m budget gap is projected. This does not include the impact of the new Living Wage, although there is an expectation of new burdens funding to cover an element of this cost.</li> </ul> <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&amp;R)/(Finance)</p>	<b>20 High</b>	<ul style="list-style-type: none"> <li>• A number of interim senior posts and an acting up arrangement in the Adults Neighbourhood structure have been put in place to assist with senior capacity and professional leadership to Social Workers whilst the CFW Directorate transforms. An internal candidate has been appointed into one of the posts and an internal act-up will secure additional succession planning and aid retention of key senior Officers.</li> <li>• An assessment process was undertaken in January 2015 for the post of Corporate Director – Children, Families and Wellbeing and an internal appointment made on an acting-up basis, aiding succession planning.</li> <li>• Proposals on revised and strengthened Corporate Management Team arrangements were approved at Council on 18<sup>th</sup> February 2015; the realignment of the post of Corporate Director – Resources to incorporate increased</li> </ul>







				<p>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.</p> <ul style="list-style-type: none"> <li>• Interim internal arrangements are in place, again aiding succession planning, pending permanent appointments.</li> <li>• A leadership development programme is in place for all managers/senior managers across the organisation, to support them in leading and engaging their staff through transformational change. In addition, a 360 degree appraisal process will be undertaken initially with a small cohort of managers, with the potential to roll out wider. All of this activity supports individuals' personal development and aids retention.</li> <li>• A new linear pay structure was implemented in April 2015 that introduced a new grade to span the gap at the former top of the NJC pay spine and the Senior Manager pay structure. This will enable the recognition of increased levels of responsibility as the organisation reshapes.</li> </ul>
6	<p>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 data securely both in technology and physical terms. They also need to ensure that 3<sup>rd</sup> 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,</p>	<p><b>15</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• 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.</li> <li>• Employees, Partners, Contractors and members have the right to expect data held about them to be treated in a secure manner.</li> <li>• Trafford Council have a responsibility to protect their data and information.</li> <li>• The annual work plan is being delivered. Information Asset Owners are progressing the embedding of information in the Council's day to day activities.</li> <li>• 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.</li> <li>• A dedicated Information Governance (IG) Team has been established comprised of an IG Manager, 2 x IG Officers and an IG Apprentice.</li> </ul>

	adverse publicity and could ultimately be a breach of the Data Protection Act.  (T&R)/ (Transformation and Resources).			
7	The Reshaping Trafford Council Programme doesn't progress to plan and/or deliver its expected outcomes.  (T&R) /(Transformation and Resources)	<b>15 Medium</b>	← →	<ul style="list-style-type: none"> <li>• 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.</li> <li>• From April 2015, the Transformation Programme became the 'Reshaping Trafford Council Programme' and the budget consultation process and proposals for 2016/18 are being built around the Reshaping Trafford Council Blueprint.</li> <li>• The lessons learnt from the previous budget process have been incorporated into the process for 2016/18.</li> <li>• Workshops with CMT and Members are underway for the 2016/18 budget proposals and timelines relating to the process are under review. This takes into account the development and financial review of the business cases as well as providing the opportunity to challenge the business cases.</li> <li>• A specialist company is being selected to assist with the public consultation events (leading/facilitating events and analysing the feedback). The public events are being arranged for September and November with the latter involving service specific proposals.</li> <li>• Briefings are being arranged with the Executive, Conservative Group, Labour Group and Liberal Democrat Group prior to the public consultation events going live.</li> <li>• 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 was established within CFW in November 2014. This is providing 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.</li> <li>• A regular review of the Transformation resourcing programme is undertaken to monitor how the team are deployed. This ensures that the programme resource is utilised effectively on</li> </ul>



				the high priority activities to ensure the outcomes of the Reshaping Trafford programme are delivered.
8	<p>Failure or delay to implement new Adult Social Care System (Liquid Logic).</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	<p><b>20</b> <b>High</b></p>		<ul style="list-style-type: none"> <li>• Business continuity plan is updated to include an interim non Adult Social Care Review System for new and existing business.</li> <li>• The implementation phase one went live 9<sup>th</sup> December as planned. Phase 2 implementation for the Control OCC System went live on 1<sup>st</sup> April 15. (Its modules include: Contracts, Payments and Charging which can work together to provide a personalised framework for managing individual budgets).</li> <li>• 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.</li> <li>• Softbox will be used until phase 2 is completed and a period of embedding has occurred.</li> <li>• Manuals written to support key parts of the system and regular meetings held with users to address specific process issues. Member of HR provided support with training up to the end March 2015.</li> <li>• Review the work packages against the proposed “Go Live” and extend if possible.</li> <li>• Version 6 is being tested to accommodate changes required for the implementation of the Care Act in April 2015.</li> <li>• Programme Board meets weekly to monitor progress post-implementation.</li> <li>• 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.</li> <li>• Work is progressing to identify and build reports, this will ensure accurate reporting and closer alignment between activity and finance. This will allow more accurate planning.</li> <li>• Performance is measured against national and local performance data in line with the directorate performance framework.</li> <li>• The revision and development of performance data has commenced 30/07/2015.</li> <li>• Monitoring is in place and a range of weekly, monthly and quarterly reports are overseen by Business Delivery Programme Board and the Business Delivery Finance Board. A weekly activity to finance update has been added to the</li> </ul>

				<p>reporting schedule to give an early indication of potential spending pressures.</p> <ul style="list-style-type: none"> <li>• Ensure that the roll out of the new operating model/ integration of health and social care continues to address key personalisation/ integration performance indicators.</li> <li>• Final phase of finance system (Controcc) completed 30/07/15.</li> </ul> <p>Planning commenced and project groups developed for the all age and children's developments, children's controcc, single view, ICS upgrade (children), new releases for information and advice, social care and financial self-assessment processes etc. social care and financial self-assessment processes etc.</p>
9	<p>Failure of the Adult Safeguarding Service.</p> <p>(CFW)/(Adult Social Services and Community Wellbeing)</p>	<p><b>12</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• Refresh of the Safeguarding Policy and procedures are due to commence in March 2015.</li> <li>• Adult Safeguarding Board has been refreshed and a revised governance process in place, introducing a strategic operational board which is jointly chaired.</li> <li>• An Independent Chair is to be appointed.</li> <li>• Joint Children's and Adult safeguarding committee now in place.</li> <li>• Senior Learning and Development post vacant. Impact on sustaining competency in relation to implementation of practice both internal and external agencies.</li> <li>• The Clinical Safeguarding Nurse is currently not in work, this is being covered two days a week by the CCG.</li> <li>• Serious Case Review Panel reviewed and in place.</li> <li>• Recent court judgements lowering the threshold for Deprivation of Liberty Orders. Increased resources agreed.</li> <li>• Additional Capacity agreed.</li> <li>• Annual Safeguarding Plan completed. Serious Case Review Plan is in place. Annual Report completed.</li> <li>• Work commencing re – independent chair of Adult Safeguarding Board.</li> <li>• New safeguarding development manager post being advertised.</li> <li>• Policy &amp; procedure reviews completed.</li> <li>• SAR working group is in place and operational.</li> </ul>
10	<p>Breach of health and safety legislation leading to prosecution under the Corporate</p>	<p><b>10</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• Refreshed Health &amp; Safety Policy and comprehensive arrangements available via the intranet.</li> <li>• Compliance Audit programme in place across all</li> </ul>

	<p>Manslaughter Act and other Health and Safety Regulations.</p> <p>(T&amp;R)/(Transformation and Resources)</p>			<p>Directorates and schools. This programme includes proactive monitoring of health &amp; safety law and internal H&amp;S management arrangements.</p> <ul style="list-style-type: none"> <li>• Policy, arrangements, protocols and guidance updated to reflect legislative changes (in addition, a three year rolling programme is ongoing).</li> <li>• Arrangements for Construction and Contractor Management have been amended following changes to the CDM Regulations in April 2015.</li> <li>• Training calendar in place – to support managers ensure staff are competent to undertake tasks/role.</li> <li>• HSU continue to assist procurement in vetting and selection of contractors.</li> <li>• The H &amp; S service will be monitoring and auditing the health and safety provisions in place at Amey LG under the contract performance management arrangements.</li> </ul>
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><b>8</b> <b>Low</b></p>		<ul style="list-style-type: none"> <li>• The effectiveness of controls and performance will only be fully tested when new contract in operation and governance arrangements established.</li> <li>• Contract signed on 7<sup>th</sup> May.</li> <li>• Contract commenced on 4<sup>th</sup> July 2015.</li> <li>• First 5 weeks of contract operated successfully across all services. No service standard issues.</li> <li>• First payment application due in August.</li> </ul>
12	<p>The Transformation Programme savings will not be delivered in full.</p> <p>(T&amp;R)/ (Transformation and Resources)</p>	<p><b>15</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• 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.</li> <li>• The Transformation Portfolio savings target are reviewed and monitored monthly.</li> <li>• For 2015/16 the revenue budget requires a further £(21.584) million to be saved, which is the largest savings target in a single year in the Council's history.</li> <li>• Unlike previous years, savings have not been categorised into Transformation or Other Business as the achievement of the entire savings programme is crucial to the financial base of the Council.</li> <li>• The largest risk is with the extent of CFW savings. In recognition of this a team has been assembled to ensure delivery of the savings programme and to identify further opportunities as part the Council's MTFP. Progress on the</li> </ul>

				<p>achievement of savings is reported regularly to the CFW Programme Board which is chaired by the Chief Executive.</p> <ul style="list-style-type: none"> <li>• From September 2015 the Transformation and CFW Programme Boards will merge so that the entire savings programme involves all of CMT.</li> <li>• Another important element of the Reshaping Trafford programme is the Council's Joint Venture arrangement with Amey LG. A total of £(2.250)m is expected to be delivered in the current year (£3.0)m in a full year). The client team to manage this contract is being assembled and the project has its own governance arrangements to ensure delivery of the expected outcomes including savings.</li> <li>• The savings are being monitored via the usual monthly monitoring arrangements.</li> </ul>
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><b>16 High</b></p>		<ul style="list-style-type: none"> <li>• 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.</li> <li>• Contractual requirements on external providers to have business continuity plans in place.</li> <li>• Business continuity review (Adult Social care) commenced following integration of ASC with Pennine Care.</li> <li>• Business Continuity Plans exist for emergency/front-line children's services. MARAT/Children in Care staff have lap-tops and mobiles so can maintain a basic service working from home. Emergency Duty Team in place for out of hours provision. Council emergency plan enacted in case of total emergency/critical event.</li> </ul>
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&amp;R)/(Transformation and Resources)</p>	<p><b>10 Medium</b></p>		<ul style="list-style-type: none"> <li>• The Council's Audit and Assurance Service completed an audit of the Business Continuity function in March 2015. An action plan was developed and a report was submitted to CMT in May 2015. The report was referred to the TPR meeting in late May. An action plan was agreed to help improve our business resilience and drive forward the business continuity agenda. Also approved was a new Corporate Business Continuity Policy and a draft Corporate Business Continuity plan. (The Plan can be finalised when all Services identify their priorities.)</li> <li>• In the summer of 2013 the Business Impact</li> </ul>

				<p>Analysis (BIA) and the Business Continuity Plan (BCP) templates were completely revised; and have since been issued with other guidance, as a <i>BC Toolkit</i> hosted on the Council's Intranet site. The Emergency Planning Manager, the Principal Audit and Assurance Officer and the Head of ICT have met to discuss a review of the BIA in order to obtain further details about the service ICT requirements and how the service would be affected by a business interruption. A revised BIA is being researched and prepared; and forms part of the action plan referred to above. Once this is complete the Head of ICT will be better prepared to examine what is required in order to develop an ICT Disaster Recovery (BC) plan.</p> <ul style="list-style-type: none"> <li>• The Council's web pages are kept up to date with further information and guidance and continue to comply with the Civil Contingencies Act in regard to providing advice to the public and businesses.</li> <li>• Amendments to the Intranet and web-site pages are completed as necessary by the Emergency Planning Manager and are currently up to date.</li> <li>• 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, but no date has currently been set for completion. (This is now included in the action plan referred to above.)</li> <li>• Under the Reshaping Trafford banner the Council will need to ensure that outsourced Council Services have robust BCPs. As part of the JVC, Amey have provided the Council with their 'Contingency and Back-Up arrangements.</li> <li>• Over the past few months all BIAs, and where necessary BC plans, have been under review. This is fully complete across a large proportion of the Council, but some services are waiting until their structural changes embed and others are yet to engage. (This all forms part of the action plan referred to above.) Once the BIA has been amended in line with ICT requirements, services will need to undertake a further review of their BIAs.</li> <li>• 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.</li> </ul>
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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>	<p><b>12</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• Well established governance arrangements.</li> <li>• Local offer and Policies designed and implemented.</li> <li>• EHC conversion plan in place</li> <li>• New SEN Policy Approved and published</li> <li>• New 0 – 25 EHC Team being developed.</li> <li>• Additional staff resources approved to support conversion process.</li> </ul>
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><b>15</b> <b>Medium</b></p>		<ul style="list-style-type: none"> <li>• 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.</li> <li>• Regular monitoring of budget at SLT and service level.</li> <li>• CFW Transformation Programme Board to monitor delivery of savings proposals on a monthly basis.</li> <li>• CFW Transformation Team in place including Benefits Realisation Manager, including detailed action plans developed to deliver all budget savings proposals.</li> <li>• Updated benefits realisation monitoring process is being implemented based on regular highlight reports and tracking of savings achievements.</li> <li>• Performance data required to identify trends in take up of service. There are some issues regarding production of data which are currently being addressed.</li> <li>• Market management and intelligence role of CWF Commissioning Officers.</li> <li>• The Budget Monitoring Investigation Action Plan arising from the 2013-14 accounts investigation is in place and being monitored regularly and reported to Accounts and Audit Committee.</li> <li>• 2015-16 budgets have been realigned to reflect the national Zero Based Review reporting arrangements.</li> <li>• Controcc –the financial part of liquid logic went live at the end of July 2015 and regular client care cost reports are now available to support management of the care package budgets. Cleansing work continues within the controcc system as the Directorate develops its understanding of the system capability.</li> <li>• Work is underway to further develop client cost forecasting from Liquid Logic /Controcc to exploit the benefits of the new system.</li> </ul>



				<ul style="list-style-type: none"> <li>• Monthly Budget period monitoring reports now contain up to date information on client costs and details of assumptions made in forecasting in year</li> <li>• The Monitoring report for Month 4 2015-16 shows a projected underspend of £450k and a forecast that the overall savings target for Adults will be achieved.</li> <li>• Managing demand is a critical part of the delivery of a balanced budget and the actions below are the ways in which this is being addressed.</li> <li>• Front door programme work commenced to manage demand and reduce duplication.</li> <li>• Managing demand strategy work is underway with public health.</li> <li>• Reshaping Trafford Social Care Programme commenced April 2015.</li> </ul>
17	<p>Inability to meet Trafford residents' requests to have burials within the local area due to insufficient land.</p> <p>(EGEI)/(Environment and Operations)</p>	<p><b>8</b> <b>Low</b></p>	<p>← →</p>	<ul style="list-style-type: none"> <li>• Terms agreed to purchase additional land from the National Trust at Whitehouse Lane Dunham Massey.</li> <li>• Executive Member decision taken on 05 May 2015.</li> <li>• The anticipated final purchase date is subject to obtaining a change of use consent. Planning application is anticipated in the first week in September 2015.</li> </ul>

\* 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 (September 2015)**

<b>STRATEGIC RISK REGISTER 2015/16</b>			<b>Risk Number</b>		<b>1</b>	
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	
<b>RISK</b>		<b>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.</b>				
Consequences		<ul style="list-style-type: none"> <li>• Failure to deliver on promise to community.</li> <li>• Negative impact on reputation.</li> <li>• Adverse impact on urban regeneration.</li> <li>• Failure to deliver the Core Strategy housing and employment growth targets.</li> <li>• Negative impact on economic and housing growth in the borough.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>• Lead officers identified.</li> <li>• Consultants in advisory role where appropriate.</li> <li>• Officer/ member steering groups in place.</li> <li>• Regular performance meetings with developer/ key stakeholders.</li> <li>• Detailed project plans in place.</li> <li>• Altrincham Forward.</li> </ul>				
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
<b>RISK LEVEL</b>			<b>Low Risk (Average)</b>			
Risk Performance Indicators		<p><b>Altair</b></p> <ul style="list-style-type: none"> <li>• CPO confirmed, developer proposals being finalised.</li> <li>• Funding strategy dependent upon pre-letting key parts of development.</li> <li>• Outline planning consent granted and development agreement signed.</li> </ul> <p><b>Altrincham</b></p> <ul style="list-style-type: none"> <li>• Altrincham Forward Board reviews – quarterly.</li> <li>• Delivery of pipeline developments, including Graftons (on site), new hospital complete, interchange complete, and planning application received for old hospital site and Altair (see above).</li> <li>• Support of local traders/ organisations/residents.</li> <li>• Altrincham Town Team in place (July 2013).</li> <li>• Altrincham Strategy approved.</li> </ul> <p><b>OTMP</b></p> <ul style="list-style-type: none"> <li>• Essex Way development complete.</li> <li>• Tamworth refurbishment and demolition works complete.</li> <li>• Hullard refurbishments complete.</li> <li>• HCA funding for Shrewsbury Street scheme approved. Project governance structure agreed and in place.</li> <li>• Land Pool Agreement approved by Council Executive.</li> <li>• Soft market testing undertaken for developer for Tamworth site.</li> </ul> <p><b>Carrington</b></p> <ul style="list-style-type: none"> <li>• Sale of site by Shell to developer complete (2013), with further sale to Himor complete.</li> </ul>				

	<ul style="list-style-type: none"> <li>• Outline of spatial concepts being developed.</li> <li>• Engagement with key stakeholders' on-going.</li> <li>• Flixton Road junction improvements complete.</li> <li>• New project governance structure in place and partnership agreement signed with Himor.</li> </ul>				
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"> <li>• G Pickering, Corporate Director PPD. April 2009</li> <li>• J Valentine, Head of Asset Management. October 2009</li> <li>• P Harvey, Director of Environment. February 2010 and July 2010</li> <li>• D Smith/ J Valentine, Head of Strategic Planning &amp; Houses/ Head of Asset Management. May 2010 and January 2011</li> <li>• D Challis, Asset manager. June 2011</li> <li>• N Gerrard, Corporate Director EGP &amp; Steph Everett, Growth Delivery Manager. September 2011; and February 2012</li> <li>• R Haslam, Acting Strategic Planning Manager and J Steward, Interim Economic Growth Lead. August 2012.</li> <li>• S James, Economic Growth Manager. February 2013.</li> <li>• H Jones, Corporate Director EGP. August 2013.</li> </ul>					
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
Risk Review Date	August 2015	Completed By	Richard Roe	Designation	Director of Growth and Regulatory Services

<b>STRATEGIC RISK REGISTER 2015/16</b>			<b>Risk Number</b>	<b>2</b>
Corporate Priorities	Services focused on the most vulnerable people.	Link(s) to Community Strategy Key Objectives	Bright Futures	
<b>RISK</b>	<p>The OFSTED Inspection Report published in May 2015 judged our services to be Good with Outstanding areas. The TSCB was also rated as Good. However Safeguarding children 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 early help, identification, assessment and support of services. It is therefore imperative that the Local Authority maintains high levels of compliance with legislation, procedures and follows good practice principles in its delivery of statutory services to children and that compliance is consistently monitored and quality assured.</p> <p>The TSCB also must maintain the capacity and support to ensure practice is delivered at the highest level, compliance with standards and targets is closely monitored and deficiencies or concerns are suitably challenged and addressed.</p>			

Consequences		<ul style="list-style-type: none"> <li>• Harm or abuse of children.</li> <li>• Sanctions/penalties against Service.</li> <li>• Legal liability claims.</li> <li>• Negative impact on reputation.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>• Monthly meetings of the Director of Children's Services Safeguarding Group.</li> <li>• Rigorous Performance management and Quality Assurance</li> <li>• Experienced Independent Chair of TSCB in place with Safeguarding Development Manager supporting a rigorous TSCB Business Planning and monitoring process.</li> </ul>				
Risk Assessment	Likelihood	4	Impact	3	Exposure	12
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators		<ul style="list-style-type: none"> <li>• Responsibilities for the risks are multi-agency and depend on all parties to achieve successful outcomes and sustained improvement.</li> </ul>				
Effectiveness of controls and performance indicators		<ul style="list-style-type: none"> <li>• OFSTED conducted a full Inspection of services for children in Need, children in Need of Protection and Looked after children and the report was published on 12<sup>th</sup> May 2015. At the same time OFSTED conducted an inspection of the TSCB and the report of their performance was also published on 12<sup>th</sup> May 2015.</li> <li>• Services for children in need and children in need of protection were judged to be Good</li> <li>• Services for Looked After Children were judged to be Good.</li> <li>• Adoption Service was judged to be Good.</li> <li>• Aftercare was judged to be Outstanding.</li> <li>• Leadership &amp; Management was judged to be Outstanding.</li> <li>• The TSCB Was judged to be Good.</li> <li>• There were no areas of immediate action required.</li> <li>• The LA report listed 6 Areas for Improvement. An Action Plan is being developed to address these and this will be sent to OFSTED before the deadline of 18<sup>th</sup> August.</li> <li>• The Trafford Safeguarding Children's Board (TSCB) remains independently chaired and made good progress against its 2014/15 business plan and is developing its 15/16 Business Plan. The work of the TSCB sub-groups is robust and they are monitoring and quality assuring safeguarding outcomes for children.</li> <li>• OFSTED described Multi-agency preventative work with children in need as well developed and effective. The number of new children coming into care has recently increased which is largely due to changes in procedures and young people staying in care for longer, however the children in care numbers are rigorously monitored and each child independently reviewed by the IRO's. The number of child protection plans have reduced while child in need plans have increased, this was seen as positive by OFSTED. Quality of Child in Need Plans is monitored by the IRO's and quality of Child in Need Plans is now supported by the permanent Child in Need IRO.</li> <li>• 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.</li> <li>• 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.</li> <li>• 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</li> </ul>				

	<p>level of experience.</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Single Assessment process is now well embedded in Trafford and the quality of our assessments were seen as good by OFSTED.</li> <li>• CSE and children who go missing are monitored through the SEAM Panel. The Phoenix Risk Assessment Tool is fully utilised and there is strong joint work with the Police through Phoenix Trafford.</li> </ul>
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• An Action Plan is now being developed following the recent OFSTED Inspection and will be sent to OFSTED before the deadline of 18<sup>th</sup> August.</li> </ul>

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 Baker-Longshaw). February 2014.
- CFW SLT May 2015.

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
Risk Review date	May 2015	Completed by	Cathy Rooney	Designation	Acting Joint Director – Children’s Social Care
Risk Review date	August 2015	Completed by	Cathy Rooney	Designation	Acting Joint Director – Children’s Social Care

<b>STRATEGIC RISK REGISTER 2015/16</b>			<b>Risk Number</b>		<b>3</b>	
Corporate Priorities		Excellence in Education		Link(s) to Community Strategy Key Objectives		Bright Futures
<b>RISK</b>		<b>Demand for school places underestimated and/ or additional school places are not delivered to satisfy increased demand.</b>				
Consequences		<ul style="list-style-type: none"> <li>• Statutory duty not discharged.</li> <li>• Negative impact on reputation.</li> <li>• Ad hoc expensive provision required.</li> <li>• Disruption to pupils’ education.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>• Thorough review based on most recent birth rates undertaken each year taking into account recent and planned housing developments.</li> <li>• 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.</li> <li>• Secondary School Sufficiency Review completed and reported to the Council Executive to plan for 2017 and beyond.</li> </ul>				
Risk Assessment	Likelihood	3	Impact	5	Exposure	15
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
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 205/16 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"> <li>• Continue to update the review undertaken on most recent birth rates and taking into account recent and planned housing developments.</li> <li>• Monitor the pupil's flows to the independent sectors and non-Trafford schools.</li> <li>• A two year resource allocation has now been received from the Department for Education (DfE) and a Capital Programme is planned in line with projections.</li> <li>• Capital implications of the SEN Review are also being implemented to meet additional demand for places.</li> <li>• 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 projections suggest that from 2017 the number of secondary school places will be a major issue. An implementation Plan is being developed following approval of outcomes by the Council Executive and Secondary Schools.</li> <li>• 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.</li> <li>• Update the Executive when Spending Review allocations are published.</li> <li>• Subject to approval, implement the Comprehensive Plan.</li> </ul>

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
Risk Review Date	August 2015	Completed By	John Pearce	Designation	Corporate Director CFW

<b>STRATEGIC RISK REGISTER 2015/16</b>		<b>Risk Number</b>	<b>4</b>
Corporate Priorities	All Corporate Priorities	Link(s) to Community Strategy Key Objectives	
<b>RISK</b>	<p><b><u>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.</u></b></p> <p><b>In June the outturn performance for 2014/15 was reported to the Executive showing that for the 11<sup>th</sup> successive year the Council contained expenditure within its budget. Outturn expenditure of £150.627m was incurred compared to an adjusted budget of £156.134m.</b></p>		

The Council has agreed the 2015/16 budget at £148.914m, a reduction of £5.638m or 3.6% on 2014/15. This included a requirement to make £21.5m savings and it is important the Council has a firm financial footing to allow it to confidently construct its 2016/17 budget plans. At this stage of the year delivery of the savings target is broadly in line with those expectations.

Since the general election the new Government has set out an approach to extinguish the structural deficit by 2020 and this means further austerity for local government. 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 for the next few years.

The Chancellor has asked "non-protected" departments like local government to prepare for funding reductions of between 25% and 40% over the next few years. The outcome will be included in the comprehensive spending review which is due to be announced on 25 November 2015. As a consequence the Council won't know its overall financial position until mid-December 2015.

The Council cannot wait for this announcement therefore is due to launch a public consultation on its high level budget options in September with firm propositions to follow in November. It is currently forecast the Council will need to bridge a funding gap of £20m in 2016/17 rising to £32m in the following year. These figures do not include any allowance for the new Living Wage which is due to be introduced in April 2016.

In addition to reducing funding there continues to be cost pressures and demands on the budget which will be considered when setting the 2016/17 budget including:

- 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.

Since 2010 the Council has had to find savings of £96m and after five years of austerity budgets are becoming more difficult to find. 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.

To offset these pressures resources have been identified from a combination of increase in the council taxbase, dividend from the Manchester Airport Group and increase in retained business rates and in drafting budget proposals for 2016/17 it is assumed that these latter two will be recurring income streams.

In respect of business rates there remains a number of forecasting and other issues such as:

- 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"> <li>Reducing level of services across the Authority.</li> <li>Adverse perception of the Authority.</li> <li>Negative impact on reputation.</li> <li>Potential political impact.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>Likely gross deficit based on best data available for 2016/17 budget year and 2016/19 MTFP period has been updated.</li> <li>Budget and financial management information systems in place.</li> <li>Regular budget monitoring reports including a Council Tax and Business Rate projections.</li> <li>Government safety net will limit any losses on business rates in a particular year (current annual maximum liability is £2.4m).</li> <li>Reshaping projects widening the scope of realising potential efficiencies through income generation, sharing overheads, introducing technology and investment through partner or contract arrangements.</li> <li>Provisions maintained for anticipated costs of organisational change (employment rationalisation).</li> <li>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.</li> <li>Minimum level of reserves established to provide short term cover for losses.</li> </ul>				
Risk Assessment	Likelihood	5	Impact	5	Exposure	25
<b>RISK LEVEL</b>			<b>High Risk</b>			
Risk Performance Indicators		<ul style="list-style-type: none"> <li>Director of Finance monitoring Council's current year budget.</li> <li>Regular budget/ financial monitoring (Directorates).</li> <li>Business Delivery Group established to review and challenge CFW budget monitoring</li> <li>TPR monitoring transformation and all other savings.</li> </ul>				
Effectiveness of controls and performance indicators		3				
Improvement Actions (ref to action plans)		<ul style="list-style-type: none"> <li>Improvements to robustness and monitoring processes being actioned.</li> <li>Financial management training of budget holders fully rolled out to all budget holders between February and July 2015.</li> <li>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. Consultation on the 2016/17 budget proposals to commence in September.</li> </ul>				
Person or Group Responsible for management of risk			Director of Finance			
Previous risk reviews completed: <ul style="list-style-type: none"> <li>I Duncan, Director of Finance. April 2009; October 2009; February 2010; July 2010, January 2011, September 2012, February 2013 and March 2014.</li> <li>I Kershaw, Head of Financial Management. August 2011 and January 2012.</li> <li>D Muggerridge, Finance Manager. August 2013.</li> </ul>						
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	



Risk Review Date	August 2015	Completed By	Ian Duncan	Designation	Director of Finance
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STRATEGIC RISK REGISTER 2015/16			Risk Number	5	
Corporate Priorities	Reshaping Trafford Council	Link(s) to Community Strategy Key Objectives	Strong Economy		
<b>RISK</b>	<b>Loss / absence and retention of senior managers to the organisation.</b>				
Consequences	<ul style="list-style-type: none"> <li>• Adverse impact on the delivery of the Reshaping Trafford Council programme.</li> <li>• Lack of direction / leadership.</li> <li>• Negative impact on reputation.</li> <li>• Increased demand on those managers remaining in the organisation.</li> <li>• De-motivated workforce / low morale.</li> </ul>				
Controls	<ul style="list-style-type: none"> <li>• Executive Search Framework in place, enabling the prompt sourcing of experienced interims.</li> <li>• Opportunity for permanent recruitment for critical posts, with relocation available to ensure the widest candidate base.</li> <li>• Further senior interim posts created to support transition to new delivery models in CFW.</li> <li>• Investment in skills development, through the 'Supporting Change to Happen' programme / change strategy.</li> <li>• Recognition of high performers through the Employee Recognition Awards and SOLACE development programme for rising stars to aid succession planning and talent management.</li> <li>• Organisational Development (OD) recovery plan in place, providing additional skills development.</li> <li>• Further employee survey to assess levels of engagement.</li> </ul>				
Likelihood	4	Impact	5	Exposure	20
<b>RISK LEVEL</b>			<b>High Risk</b>		
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• Turnover</li> <li>• Absence</li> <li>• Employee survey results</li> </ul>				
Effectiveness of controls and performance indicators	3				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• Robust monitoring of the OD recovery plan through monthly CMT meetings.</li> <li>• Change Strategy Steering Group in place and the Year 2 strategy in development, with a focus on succession planning and talent management.</li> <li>• Phase 2 (coaching, negotiating and commercial skills training) of the 'Supporting Change to Happen' development programme delivered January - June 2015.</li> <li>• Employee Survey conducted and feedback being analysed and feeding into further workforce development initiatives – Phase 3 'Supporting Change to Happen' programme in development.</li> <li>• Executive Search Framework due to be re-tendered, providing the opportunity to select providers that meet the changing demands of the organisation.</li> <li>• Appointment made (on an acting basis) to the Corporate Director, Children, Families and Wellbeing post.</li> <li>• Proposals on revised and strengthened Corporate Management Team arrangements approved at 18<sup>th</sup> February 2015 Council</li> </ul>				
Person or Group Responsible for management of	Lisa Hooley, Acting Director of HR				

risk					
Risk Review Date	March 2015	Completed By	Lisa Hooley	Designation	Acting Director of HR
Risk Review Date	August 2015	Completed By	Lisa Hooley	Designation	Acting Director of HR

STRATEGIC RISK REGISTER 2015/16		Risk Number	6 (Previously Risk 19)			
Corporate Priorities	<ul style="list-style-type: none"> <li>Services focused on the most vulnerable people</li> <li>Reshaping Trafford Council</li> </ul>	Link(s) to Community Strategy Key Objectives				
<b>RISK</b>	<p><b>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 3<sup>rd</sup> 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&amp;R)/(T&amp;R).</b></p>					
Consequences	<ul style="list-style-type: none"> <li>Statutory duty not discharged.</li> <li>Negative impact on reputation.</li> <li>Unforeseen financial implications</li> <li>Emotional damage to service users</li> <li>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.</li> </ul>					
Controls	<ul style="list-style-type: none"> <li>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.</li> <li>We are suggesting quarterly reporting to CMT on data breaches is carried out with mitigating measures to address these.</li> <li>Mandatory training is being rolled out to all staff and is being reviewed to ensure compliance. This process is on-going and with the aim of procuring further IG training for Council staff.</li> <li>Specific role related training is being rolled out to specialist staff.</li> <li>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.</li> <li>An annual work plan has been developed to improve on current processes and to monitor and enforce best practice with completion dates for all activities.</li> <li>An IG team was established in March 2015 to deal with IG activities both across the Council and with external partners and contractors.</li> <li>Monthly meetings with other AGMA authorities to discuss current IG issues.</li> </ul>					
Risk Assessment	Likelihood	3	Impact	5	Exposure	15
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators						
Effectiveness of controls and performance	<ul style="list-style-type: none"> <li>An Information Governance Project Board has been set up to oversee the Information Governance work.</li> </ul>					

indicators	<ul style="list-style-type: none"> <li>• The project to develop policies and procedures has been completed.</li> <li>• Training Needs Assessments have been carried out to identify the training requirements of staff, partners, consultants and members.</li> <li>• 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.</li> <li>• An IG team has been established with a full complement of staff by the end of March 2015.</li> </ul>				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• Continue to update the Information Governance Board on progress.</li> <li>• Communication will take the form of informing, education and enforcing over the coming 12 months.</li> <li>• 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.</li> <li>• The Senior Information Risk Owner (SIRO) will regularly update CMT on the progress of the work plans.</li> </ul>				
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
Risk Review Date	25 August 2015	Completed By	Paul Fox	Designation	Information Governance Manager

STRATEGIC RISK REGISTER 2015/16			Risk Number	7
Corporate Priorities	<ul style="list-style-type: none"> <li>• Low Council Tax.</li> <li>• Value for Money.</li> <li>• Reshaping Trafford Council.</li> </ul>	Link(s) to Community Strategy Key Objectives		
<b>RISK</b>	<b>The Reshaping Trafford Council Programme doesn't progress to plan and/or deliver its expected outcomes.</b>			
Consequences	<ul style="list-style-type: none"> <li>• Reshaping Trafford is not delivered.</li> <li>• Adverse impact on reputation.</li> <li>• Increased pressure on budgets as a result of securing additional, sustainable savings immediately or in the subsequent year via new initiatives.</li> <li>• Unplanned budget and service impact adversely affecting service provision levels, quality and performance.</li> <li>• Adverse impact on other programme activity, due to the significant interdependencies across the programme.</li> <li>• Reshaping Trafford is not underpinned by a shaping demand strategy.</li> </ul>			
Controls	<ul style="list-style-type: none"> <li>• Transformation Board/CMT.</li> <li>• Transformation, Resources and Performance Group.</li> <li>• Transformation Programme monthly monitoring, exception reporting and benefits realisation monitoring.</li> <li>• Supporting Change to Happen Steering Group/Change Management Group.</li> <li>• Resource planning.</li> <li>• Provision of sufficient budget to resource the programme.</li> </ul>			

		• CFW Programme Board.				
Risk assessment	Likelihood	3	Impact	5	Exposure	15
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators	<ul style="list-style-type: none"> <li>Budget monitoring.</li> <li>Project monitoring.</li> <li>Executive key decision 1 September 2014.</li> <li>Executive key decision 18 February 2015.</li> </ul>					
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> <li>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.</li> <li>The programme is still on track to deliver its objectives and is routinely monitored by TPR, CMT and Members. From April 2015, the Transformation Programme became the 'Reshaping Trafford Council Programme' and all projects actively planned links to it.</li> <li>Workshops with CMT and Members are underway for the 2016/18 budget proposals and timelines relating to the process are under review. This takes into account the development and financial review of the business cases as well as providing the opportunity to challenge the business cases.</li> <li>The public consultation events for the general public, residents and local businesses are arranged for September and November.</li> <li>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. From September 2015, the CFW and Transformation Boards are merging and governance has been put in place.</li> </ul>					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>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.</li> <li>Work closely with Senior Responsible Officers to identify risk to projects at the earliest opportunity and identify appropriate and considered mitigations plans.</li> <li>Escalation of exceptions to plan to CMT/Transformation Board at the earliest opportunity.</li> </ul>					
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	
Risk Review Date	17 August 2015	Completed By	Dianne Geary	Designation	Acting Transformation Programme Manager	

<b>STRATEGIC RISK REGISTER 2015/16</b>			<b>Risk Number</b>	<b>8 (Previously Risk 20)</b>
Corporate Priorities	Services focused on the most	Link(s) to Community	Health and Improved	

	vulnerable people.	Strategy Key Objectives	Quality of Life
<b>RISK</b>	<b>Failure or delay to implement new Adult Social Care System (Liquid Logic (LL))</b>		
Consequences	<ul style="list-style-type: none"> <li>• Impact on service provision, payment to providers, billing, care assessments and reviews.</li> <li>• Major capacity issues and increase the risk to service users as the processes would be manual and paper based rather than electronic.</li> <li>• Negative impact on the delivery of the Council's Corporate Priorities and the Community Strategy.</li> </ul>		
Controls	<ul style="list-style-type: none"> <li>• Business Continuity Plan (BCP) is updated to include an interim non Adult Social Care Review System for new and existing business.</li> <li>• Next data migration round (DM6) will be a full data push and will confirm the length of the data freeze.</li> <li>• LL and Oxford Computer Consultants Risks, Assumptions, Issues and Dependencies Log updated weekly during project to identify problems and provide solutions. Escalation process established to communicate issues and risks.</li> <li>• Softbox will be used until Phase 2 has been completed and a period of embedding has occurred.</li> <li>• 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.</li> <li>• Communicate regularly with supplier to minimise risks and identify issues early.</li> <li>• 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.</li> <li>• Review the work packages against the proposed "Go Live" and extend if possible. Go Live of ContrOCC delayed until April 2015.</li> <li>• Version 6 is being tested to accommodate changes required for the implementation of the Care Act in April 2015.</li> <li>• Programme Board meets weekly to monitor progress post-implementation.</li> <li>• 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.</li> <li>• Project Plan in place to deliver Phase 2 of the implementation.</li> <li>• Governance changed to reflect the children's and adults liquid logic changes in phase 2. Board now to be chaired by Corporate Director.</li> </ul>		
Risk assessment	Likelihood	4	Impact 5 Exposure 20
<b>RISK LEVEL</b>		<b>High Risk</b>	
Risk Performance Indicators	Detailed project plan and periodical milestones.		
Effectiveness of controls and performance indicators	This risk 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"> <li>• Develop plan and milestones.</li> <li>• Share and shape plans with stakeholders.</li> <li>• Coproduce delivery.</li> <li>• Monitor capacity of Project Team.</li> <li>• Monitor milestones and risk.</li> </ul>		
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
Risk Review Date	August 2015	Completed By	John Pearce	Designation	Corporate Director CFW

<b>STRATEGIC RISK REGISTER 2014/15</b>			<b>Risk Number</b>		<b>9</b>	
Corporate Priorities	Services focussed on the most vulnerable people.	Link(s) to Community Strategy Key Objectives	<ul style="list-style-type: none"> <li>• Strong Communities</li> <li>• Health &amp; Improved Quality of Life for All</li> </ul>			
<b>RISK</b>	<b>Failure of the Adult Safeguarding Service.</b>					
Consequences	<ul style="list-style-type: none"> <li>• Potential harm to vulnerable individuals.</li> <li>• Legal action against the Council.</li> <li>• Adverse impact on reputation.</li> </ul>					
Controls	<ul style="list-style-type: none"> <li>• Updated Safeguarding strategy in place.</li> <li>• Discrete Safeguarding team.</li> <li>• Training provided to all key staff.</li> <li>• Working with a wide range of partners.</li> <li>• Robust management information and quarterly monitoring in place</li> <li>• Regular multi-agency safeguarding management meeting in place.</li> <li>• Additional capacity agreed.</li> <li>• Safeguarding management post created and in process in recruitment.</li> <li>• Changes to management within DOLS team agreed.</li> </ul>					
Risk Assessment	Likelihood	3	Impact	4	Exposure	12
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• SMT reporting.</li> <li>• Reports to Safeguarding Board.</li> </ul>					
Effectiveness of controls and performance indicators	3					
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• Multi-agency review re: extending safeguarding role and responsibilities completed.</li> <li>• Reports on safeguarding incidents, by individual provider, to be introduced.</li> <li>• Implement quality assurance arrangements.</li> <li>• Re-launch communications with public and partners.</li> <li>• Annual Safeguarding plan completed.</li> <li>• Annual report completed.</li> <li>• Serious case review plan in place.</li> <li>• Operational safeguarding group in place.</li> <li>• Increased resources agreed for deprivation of Liberty activity.</li> <li>• New reports from liquid logic now built and available for use by the board.</li> </ul>					
Person or Group Responsible for management of risk	CFW Senior Leadership Team					
<b>Previous risk reviews completed:</b>						
<ul style="list-style-type: none"> <li>• D Hanley, Deputy Director CWB. April 2009; October 2009; July 2010 and January 2011</li> <li>• J Walker, Performance &amp; Partnerships Manager. February 2010 and August 2011</li> <li>• D Wagstaff, Senior Business Relationship Partner. January 2012</li> </ul>						

- 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
Risk Review Date	August 2015	Completed By	John Pearce	Designation	Corporate Director CFW

<b>STRATEGIC RISK REGISTER 2015/16</b>				<b>Risk Number</b>	<b>10</b>	
Corporate Priorities	Value for Money	Link(s) to Community Strategy Key Objectives				
<b>RISK</b>	<b>Breach of health and safety legislation leading to prosecution under the Corporate Manslaughter Act.</b>					
Consequences	<ul style="list-style-type: none"> <li>• Possible personal conviction of Officers and/ or Members.</li> <li>• Adverse impact on reputation.</li> <li>• Financial consequences of fines/ legal claims.</li> </ul>					
Controls	<ul style="list-style-type: none"> <li>• Health and Safety Policy.</li> <li>• Procedures in place to ensure legal compliance.</li> <li>• Risk assessments and safe systems of work.</li> <li>• Health and Safety Advisors aligned to each Directorate to provide expertise and support.</li> <li>• Member awareness.</li> <li>• Management and staff training.</li> <li>• Support to schools provided via SLA.</li> <li>• Audit and Assurance review of the Council's corporate health and safety arrangements.</li> </ul>					
Risk Assessment	Likelihood	2	Impact	5	Exposure	10
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• Health and Safety team track all accidents/ near misses.</li> <li>• Six month report to CMT/ Executive and Annual Report to Council.</li> <li>• Targets set for accident reduction.</li> <li>• Corporate Health and Safety Improvement Plan reviewed annually.</li> </ul>					
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 following Corporate health and safety guidance has been reviewed and up dated: risk assessment, display screen equipment, lone working, health and safety monitoring, violence and aggression, selection and monitoring of contractors/service providers. Training is ongoing for staff involved in manual handling, working at height, risk assessment and first aid.</p>					
Person or Group Responsible for management of risk	All					
Risk reviews completed:	<ul style="list-style-type: none"> <li>• G Pickering, Corporate Director PPD. April 2009</li> <li>• P Valentine, IBU Manager. October 2009</li> <li>• C Hay, Workforce &amp; Core Strategy Officer. August 2012</li> <li>• J Arnold, Health &amp; Safety Manager. February 2010; July 2010, January 2011, August 2011, February 2013,</li> </ul>					

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
Risk Review Date	August 2015	Completed By	L Hooley	Designation	Acting Director of HR

<b>STRATEGIC RISK REGISTER 2015/16</b>				<b>Risk Number</b>	<b>11</b>
Corporate Priorities		Economic Growth and Development Reshaping Trafford Council	Link(s) to Community Strategy Key Objectives	Positive Environment Impact Better homes Strong economy	
<b>RISK</b>	<b>New Joint Venture partner fails to deliver services to the required standard or fails to deliver required efficiency savings</b>				
Consequences	<ul style="list-style-type: none"> <li>Failure to deliver key front line services, including domestic waste collection, street cleaning, grounds maintenance, highway maintenance and street lighting maintenance</li> <li>Negative impact on reputation</li> <li>Failure to meet budget savings targets</li> <li>Negative impact on economic growth and environmental and public health</li> </ul>				
Controls	<ul style="list-style-type: none"> <li>Award of contract(s) subject to Executive approval on the 16<sup>th</sup> March 2015</li> <li>Robust procurement exercise followed</li> <li>External legal advisers appointed</li> <li>New Contracts Director appointed and contract management team have been / are being recruited</li> <li>Governance structure is agreed to oversee service delivery at a strategic and operational level</li> <li>Business Continuity Plan provided by Service Provider in place prior to Go Live date</li> <li>Local authority has retained control of strategy and policy approval</li> <li>Performance and payment mechanisms in place</li> <li>Contract commenced on 4<sup>th</sup> July 2015</li> </ul>				
Likelihood	2	Impact	4	Exposure	8
<b>RISK LEVEL</b>			<b>Low Risk</b>		
Risk Performance Indicators	<ul style="list-style-type: none"> <li>Performance Indicator suite adopted covers all services delivered through the contract</li> <li>Price Performance Mechanism links performance to payments to the service provider</li> </ul>				
Effectiveness of controls and performance indicators	<p>3 (will only be fully tested when new contract in operation and governance arrangements established) First 5 weeks of the contract have gone smoothly with no impact on service delivery.</p>				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>Governance provisions agreed as per the contract and being established</li> </ul>				
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	27 July 2015	Completed By	C Hindle	Designation	Contracts Director
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STRATEGIC RISK REGISTER 2015/16				Risk Number	12 (Previously 21)
Corporate Priorities	<ul style="list-style-type: none"> <li>• Low Council Tax</li> <li>• Value for Money</li> <li>• Reshaping Trafford Council</li> </ul>	Link(s) to Community Strategy Key Objectives			
<b>RISK</b>	<b>The Transformation Programme savings will not be delivered in full</b>				
Consequences	<ul style="list-style-type: none"> <li>• Increased pressure on budgets as a result of securing additional, sustainable savings immediately or in the subsequent year.</li> <li>• Unplanned budget and service impact adversely affecting service provision levels, quality and performance.</li> <li>• Adverse impact on reputation.</li> <li>• In year revision of other project activity which may have adverse consequences.</li> </ul>				
Controls	<ul style="list-style-type: none"> <li>• Transformation Board/CFW Programme Board/CMT.</li> <li>• Transformation, Resources and Performance Group.</li> <li>• Transformation Programme monthly monitoring, exception reporting and benefits realisation monitoring.</li> </ul>				
Risk assessment	Likelihood	3	Impact	5	Exposure 15
<b>RISK LEVEL</b>			<b>Medium Risk</b>		
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• Budget monitoring.</li> <li>• Project monitoring.</li> </ul>				
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"> <li>• The Transformation Portfolio savings target are reviewed and monitored monthly.</li> <li>• For 2015/16 the revenue budget requires a further £(21.584) million to be saved, which is the largest savings target in a single year in the Council's history.</li> <li>• Unlike previous years, savings have not been categorised into Transformation or Other Business as the achievement of the entire savings programme is crucial to the financial base of the Council.</li> <li>• At June 2015, the current forecast is that £(21.9092) million, which is 97.7% of target, will be achieved in the year with the shortfall being met from either service carry forward reserves, alternative savings or progressed through the Directorates' medium term financial plan.</li> </ul>				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• Work closely with Senior Responsible Officers to identify risk to savings at the earliest opportunity and identify appropriate and considered mitigation plans.</li> <li>• Escalate exceptions to the Transformation Board accordingly.</li> </ul>				
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
Risk Review Date	17 August 2015	Completed By	Dianne Geary	Designation	Acting Transformation Programme Manager

<b>STRATEGIC RISK REGISTER 2015/16</b>				<b>Risk Number</b>		<b>13</b>
Corporate Priorities		Services focused on the most vulnerable people		Link(s) to Community Strategy Key Objectives		Health & Improved Quality of Life for All
<b>RISK</b>		<b>Major event leading to inability to deliver critical services to vulnerable people.</b>				
Consequences		<ul style="list-style-type: none"> <li>• Interruption to service provision to vulnerable people.</li> <li>• Financial loss to the organisation.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>• 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.</li> <li>• Contractual requirements on external providers to have business continuity plans in place.</li> <li>• Plan development with providers.</li> <li>• Business continuity plans under review for ASC.</li> <li>• Two Events dealt with effectively.</li> </ul>				
Risk Assessment	Likelihood	4	Impact	4	Exposure	16
<b>RISK LEVEL</b>			<b>High Risk</b>			
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			
<b>Previous risk reviews completed:</b>						
<ul style="list-style-type: none"> <li>• D Hanley, Deputy Director CWB. April 2009; July 2010 and January 2011</li> <li>• J Walker, Performance &amp; Partnerships Manager. October 2009, February 2010 and August 2011</li> <li>• D Wagstaff, Senior Business Relationship Partner. January 2012</li> <li>• CWB SMT (A Higgins, J Wilmott, J Kay &amp; M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J Wilmott &amp; J Kay). February 2013 and August 2013.</li> <li>• CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden &amp; C Baker-Longshaw). February 2014.</li> </ul>						
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	
Risk Review Date	August 2015	Completed By	John Pearce	Designation	Corporate Director CFW	
<b>STRATEGIC RISK REGISTER 2015/16</b>			<b>Risk Number</b>		<b>14</b>	
Corporate Priorities		All corporate priorities		Link(s) to Community		• Health & Improved Quality

		Strategy Key Objectives	of Life for All <ul style="list-style-type: none"> <li>• Better Homes</li> <li>• Positive Environmental Impact</li> <li>• Strong Economy</li> </ul>
<b>RISK</b>	<b>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.</b>		
Consequences	<ul style="list-style-type: none"> <li>• Failure to meet requirements of the Civil Contingencies Act, good practice and Use of Resources Assessment criteria.</li> <li>• 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.</li> <li>• Failure to continue the delivery of critical Council services including those vital to human welfare during disruption.</li> <li>• Failure to ensure that services commissioned under Reshaping Trafford, have robust BC plans.</li> <li>• Impact on Council reputation.</li> </ul>		
Controls	<ul style="list-style-type: none"> <li>• A set of templates are available on the council's Intranet pages, together with Business Continuity guidance and tips, under the 'Business Continuity Toolkit'.</li> <li>• 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.</li> <li>• 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.</li> <li>• The Emergency Planning Manager offers support to individual services to review plans if required.</li> </ul>		
Risk Assessment	Likelihood	2	Impact 5 Exposure 10
<b>RISK LEVEL</b>		<b>Medium Risk</b>	
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• All services to undertake a BIA and where the risk level is a one or two, they must complete a BC plan.</li> <li>• Annual Reviews of BIAs and BC plans.</li> <li>• Corporate BC Plan is in draft form.</li> <li>• Service level and Corporate BC Plans to be tested.</li> </ul>		
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> <li>• In late 2013 BIAs were conducted across service areas and BC plans written where necessary.</li> <li>• These are now due for review and an updated 'RAG' spreadsheet has been updated to reflect the current position.</li> <li>• Some of the services reviewed their BC plans and BIAs during 2014 and 2015. Not all services have complied.</li> <li>• BIAs and BC plans are the responsibility of individual service areas.</li> <li>• The Emergency Planning Manager updates the BC Intranet Site as necessary and maintains a spread sheet of the status of service planning.</li> </ul>		
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• 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.</li> <li>• The Emergency Planning Manager has through HR and AGMA, gained agreement to use</li> </ul>		

	<p>an on-line learning package developed by Risk and Resilience at Manchester City Council. Currently HR is looking at placing this on their work programme.</p> <ul style="list-style-type: none"> <li>• CMT has directed that TPR will deal with Business Continuity.</li> <li>• Following the Business Continuity Audit in March 2015, an action plan was agreed by TPR to help improve our business resilience and drive forward the business continuity agenda. (The action above for HR is included in the action plan.)</li> <li>• TPR have approved a new Corporate Business Continuity Policy and a draft Corporate Business Continuity Plan. (This can be finalised when all services identify their priorities.)</li> <li>• The Emergency Planning Manager, the Principal Audit and Assurance Officer and the Head of ICT have met to discuss a review of the BIA in order to obtain further details about the service ICT requirements and how the service would be affected by a business interruption. A revised BIA is being researched and prepared and forms part of the action plan referred to above.</li> </ul>
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Person or Group Responsible for management of risk	Head of Partnerships and Communities
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Previous risk reviews completed:
<ul style="list-style-type: none"> <li>• A Harrison, Temporary Business Continuity Lead. February 2010; May 2010; July 2010 and January 2011.</li> <li>• J Stephenson, Head of Partnerships &amp; Performance. August 2011, August 2012, February 2013, August 2013 and February 2014.</li> </ul>

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

STRATEGIC RISK REGISTER 2015/16			Risk Number	15		
Corporate Priorities			Link(s) to Community Strategy Key Objectives			
<b>RISK</b>	<b>Implementation of the Special Educational Needs and Disabilities (SEND) reforms set out in the Children and Families Act 2014.</b>					
Consequences	<ul style="list-style-type: none"> <li>• Lack of integrated planning leading to a failure to meet the needs of children and young people.</li> <li>• Unable to meet statutory duties set out in the Special Educational Needs (SEN) Code of Practice.</li> <li>• Financial impact on the Dedicated Schools Grant (DSG) High Needs Block.</li> <li>• Potential legal/tribunal challenge to Education, Health and Care (EHC) Plans.</li> <li>• Political and reputational damage to the Council.</li> </ul>					
Controls	<ul style="list-style-type: none"> <li>• Trafford has been a Special Educational Needs and Disabilities Pathfinder since 2011.</li> <li>• Well established governance arrangements.</li> <li>• Local offer and Policies designed and implemented.</li> <li>• EHC conversion plan in place.</li> <li>• New SEN Policy Approved.</li> <li>• New 0 – 25 EHC Team being developed.</li> <li>• Additional staff resources approved to support conversion process.</li> </ul>					
Risk Assessment	Likelihood	3	Impact	4	Exposure	12
<b>RISK LEVEL</b>			<b>Medium Risk</b>			
Risk Performance Indicators	<ul style="list-style-type: none"> <li>• Measures monitored through governance arrangements with headlines to Business Development Group and SLT.</li> <li>• Number of EHC Plans.</li> <li>• Number of conversions.</li> </ul>					

	<ul style="list-style-type: none"> <li>• Number of dispute resolutions and mediations.</li> <li>• Number of tribunals.</li> </ul>				
Effectiveness of controls and performance indicators	<ul style="list-style-type: none"> <li>• Conversions plan on target.</li> <li>• Local Offer available from September 2014.</li> <li>• New SEN Policy approved.</li> <li>• Good engagement from parents and other stakeholders in governance arrangements.</li> <li>• Independent mediation service commissioned from April 2015</li> </ul>				
Improvement Actions (ref to action plans)	<ul style="list-style-type: none"> <li>• 0-25 EHC assessment to be established from April 2015.</li> <li>• Progress against all key actions identified in the implementation plan.</li> </ul>				
Person or Group Responsible for management of risk	CFW SLT				
<b>Previous risk reviews completed:</b>					
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
Risk Review date	May 2015	Completed by	Cathy Rooney	Designation	Acting Joint Director – Children’s Social Care
Risk Review date	August 2015	Completed by	Cathy Rooney	Designation	Acting Joint Director – Children’s Social Care

<b>STRATEGIC RISK REGISTER 2015/16</b>				<b>Risk Number</b>		<b>16</b>	
Corporate Priorities		Services focussed on the most vulnerable people		Link(s) to Community Strategy Key Objectives		Health & Improved Quality of Life for all	
<b>RISK</b>		<b>Adult Social Care Budget 2015/16: Ability to implement approved savings proposals in the current economic conditions.</b>					
Consequences		<ul style="list-style-type: none"> <li>• Difficulty of implementing wide range of budget savings proposals destabilises provision with potential that people may not receive the services they are eligible for.</li> <li>• Not delivering budget savings within agreed timescales leading to an overspend.</li> <li>• Potential risk to destabilising the social care market in Trafford arising from implementing wide range of budget savings proposals.</li> </ul>					
Controls		<ul style="list-style-type: none"> <li>• Regular monitoring of budget at SLT and service level.</li> <li>• CFW Transformation Programme Board to monitor delivery of savings proposals on a monthly basis.</li> <li>• CFW Transformation Team in place including Benefits Realisation Manager.</li> <li>• Detailed action plans developed to deliver all budget savings proposals.</li> <li>• Updated benefits realisation monitoring process being implemented based on monitoring of key actions linked to activity and unit costs.</li> <li>• Business Delivery Programme Board to monitor and manage savings delivery.</li> <li>• Performance data in place to identify trends in take up of service.</li> <li>• Market management and intelligence role of CWF Commissioning Officers.</li> </ul>					
Risk Assessment	Likelihood	3	Impact	5	Exposure	15	
<b>RISK LEVEL</b>				<b>Medium Risk</b>			
Risk Performance Indicators		<ul style="list-style-type: none"> <li>• Budget monitoring.</li> <li>• SLT reporting.</li> <li>• Business Delivery Programme Board’s role in monitoring and managing savings proposals delivery.</li> </ul>					

Effectiveness of controls and performance indicators	<p>3</p> <ul style="list-style-type: none"> <li>• Each proposal has agreed business case and risk rating.</li> <li>• Consultation exercise was completed.</li> <li>• Delivery plan developed for each savings proposal.</li> <li>• Benefits realisation/ savings proposals being closely monitored.</li> <li>• Performance data being collected on an on-going basis.</li> </ul>				
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 is taking place to ensure agreed actions are implemented.</p> <p>A new operating process is being developed for CFW to be fully implemented by 1<sup>st</sup> April 2016:</p> <ul style="list-style-type: none"> <li>• <u>Phase 1</u> (1<sup>st</sup> February to 30<sup>th</sup> 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.</li> <li>• <u>Phase 2</u> (1<sup>st</sup> May to 31<sup>st</sup> 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"> <li>- Medium term forecasts of costs and activity</li> <li>- Restructured budgets based on commissioning: provider split, and</li> <li>- Robust monitoring processes linking activity, cost and performance developed.</li> </ul> </li> </ul>				
Person or Group Responsible for management of risk	CFW Senior Leadership Team				
<b>Previous risk reviews completed:</b>					
<ul style="list-style-type: none"> <li>• J Kay, Finance Manager and D Wagstaff, Senior Business Relationship Partner. March 2012</li> <li>• CWB SMT (A Higgins, J Wilmott, J Kay &amp; M Grimes). August 2012 and CWB SMT (D Brownlee, L Harper, J Wilmott &amp; J Kay). February 2013 and August 2013.</li> <li>• CFW SLT (D Brownlee, L Harper, J Pearce, C Ramsden &amp; C Baker-Longshaw). February 2014.</li> </ul>					
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
Risk Review Date	August 2015	Completed By	John Pearce	Designation	Corporate Director CFW

STRATEGIC RISK REGISTER 2015/16			Risk Number	17		
Corporate Priorities		<ul style="list-style-type: none"> <li>• Low Council Tax and Value for Money</li> <li>• Economic Growth and Development</li> </ul>	Link(s) to Community Strategy Key Objectives	Positive Environmental Impact		
<b>RISK</b>		<b>Inability to meet Trafford residents' requests to have burials within the local area due to insufficient land.</b>				
Consequences		<ul style="list-style-type: none"> <li>• Impact on MTFP.</li> <li>• Reputational damage to the Council.</li> <li>• Council does not acquire the required additional burial land.</li> </ul>				
Controls		<ul style="list-style-type: none"> <li>• On-going negotiations to acquire new land.</li> <li>• Effective project management of land acquisition and development.</li> <li>• Capital monies available for purchase.</li> </ul>				
Risk Assessment	Likelihood	2	Impact	4	Exposure	8
<b>RISK LEVEL</b>			<b>Low Risk</b>			
Risk Performance Indicators		<ul style="list-style-type: none"> <li>• Project deadlines for land re-aligned.</li> <li>• Compliance with development plan deadlines (to be established).</li> <li>• Monitor available burial space in all Council cemeteries.</li> </ul>				
Effectiveness of controls and performance indicators		2				
Improvement Actions (ref to action plans)		<ul style="list-style-type: none"> <li>• Agreement in principle reached to purchase additional land.</li> <li>• Decision on acquisition made May 15.</li> <li>• Final purchase date dependent on planning approval.</li> <li>• Additional possibilities also being looked at adjacent Urmston Cemetery.</li> <li>• Layout and design worked up.</li> <li>• Planning application to be submitted in first week of September 2015.</li> </ul>				
Person or Group Responsible for management of risk			T&R (Traded Services)			
<b>Previous risk reviews completed:</b>						
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	
Risk Review Date	27 July 15	Completed By	C Hindle	Designation	Contracts Director	