

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

4 December 2014

RISK MANAGEMENT – PROGRESS REPORT

Report of the Corporate Director – Strategic Resources

1.0 PURPOSE OF THE REPORT

- 1.1 To consider an updated Risk Management Policy
- 1.2 To receive details of the updated Corporate Risk Register.
- 1.3 To receive details of the recent outcome of the Casualty (Liability) Insurance and Claims Handling Tenders

2.0 BACKGROUND

- 2.1 According to the Terms of Reference of the Audit Committee, its role in risk management is:
 - (i) to assess the effectiveness of the authority's risk management arrangements and
 - (ii) to review progress on the implementation of risk management throughout the authority.
- 2.2 Following a recommendation by this Committee, the County Council formally approved a revised Corporate Risk Management Policy on 18 July 2012 with a provision that it will be reviewed and updated every two years.
- 2.3 Regular reports to this Committee therefore cover the implementation of the Policy and associated Strategy as well as other related risk management matters in order to fulfill this role.

3.0 RISK MANAGEMENT POLICY AND STRATEGY

- 3.1 The biennial update of the Corporate Risk Management Policy and Strategy is presently underway. There has been no further relevant guidance or updates since July 2012 when the **BS ISO 31000:2009 Risk Management – Principle and guidelines** document was used to carry out the last review. There have therefore only been minor amendments made to the Policy so that it links to the updated Council Plan and the vision and objectives of 2020 North Yorkshire.
- 3.2 The Committee is therefore asked to consider the updated Corporate Risk Management Policy- a “tracked changes” copy is attached at **Appendix A**. Under specific delegations in the Constitution, where there are only minor changes, the

Corporate Director - Strategic Resources can refer the Policy to the Chief Executive, in consultation with the Leader of the Council and the Executive Member for Central Services to approve the changes to the Policy. There is no requirement for the document to go to Executive and full Council.

3.3 The Strategy is in the process of being reviewed in the light of the recent Risk Management Audit report, and also taking into account the wider considerations such as present best practice and 2020 North Yorkshire.

3.4 Dependent on the significance of the changes made to the Strategy, it may be appropriate to bring the final draft Strategy to this Committee for consideration.

4.0 **CORPORATE RISK REGISTER**

4.1 The Corporate Risk Register (CRR) is fully reviewed every year and updated by the Chief Executive and Management Board in September/October. A six monthly review is then carried out in April.

4.2 An annual update of the Corporate Risk Register was carried out in November – see attached at **Appendix B**. This involved reviewing the risks, risk controls, risk reductions and risk rankings that had been identified for each of the risks and making amendments to the Register where necessary.

4.3 The significant amendments that were made to the register are as follows:

New risks

- Information Governance
- Educational Outcomes
- .Safeguarding Arrangements
- Preparedness for the Implementation of the Care Act

Deleted risks

- Inspection Outcomes
- Superfast North Yorkshire
- Schools Organisation Place Planning and Funding

Significantly Changed Risks

- Economic Development and Opportunities for Devolution in North Yorkshire – this has had the 'devolution factor' added this year

The rankings of all the remaining risks remained the same apart from Performance Management which has increased. (as shown on the summary in the left hand column of **Appendix B**). However please see the table at the bottom of **Appendix B** for an explanation of the left hand column.

4.4 To assist Members interpret **Appendix B**

- Risks are identified by Management Board during a preparation meeting and workshop
- Each risk has then to be ranked based on the following:

- existing risk controls in place
 - probability of the risk occurring (based on existing controls)
 - impact of the risk occurring (based on existing controls)
 - further risk controls which may reduce current probability or impact
- The prioritisation system follows a fairly traditional risk evaluation approach in that the **probability** and **severity** of risks is measured using High, Medium and Low categories
- However, to facilitate the assessment of the severity of each risk this is done in relation to 4 distinct **impact areas**:-
- failure to meet key **service** objectives and standards – reflecting current service plans
 - **financial** impact
 - **service** delivery
 - loss of image or **reputation**

As each risk is ranked with reference to current controls and then future controls, the risk prioritisation system can compute a “score” in the range of 1 to 5

- 1 and 2 being a ‘red’ risk
- 3 and 4 being an ‘amber’ risk and
- 5 being a ‘green’ risk

One of the key things to look for in the Register is the movement of the score (described as Classification in **Appendix B**) as between the ‘Pre’ (i.e. present stage) and ‘Post’ (i.e. after risk mitigations are in place). For certain risks, however, this does not change as the risk mitigations cannot prevent the event (e.g. severe flood) but can address/reduce its impact. Also, if a risk has been carried over from a previous year it is interesting to note whether the risk has improved/worsened since that time (see left hand column on **Appendix B**).

4.5 As previously mentioned, the Corporate Risk Register is the culmination of the identification of key significant risks that are identified at Directorate and Service levels. It is apparent that there is an increased number of risks / content identified at corporate level. This is a reflection of the current environment including financial pressures and other external factors.

5.0 TENDER FOR CASUALTY (LIABILITY) INSURANCES

5.1 The annual insurance renewals for the County Council take place on 1 October 2014. A full tender exercise has been carried out this year for Casualty (Liability including Public Liability, Employers’ Liability, Professional Indemnity) Insurance. This was due to the Council’s previous insurers Travelers, notifying all Local Authorities that they were breaking all Long Term Agreements and increasing premiums in respect of

Public Liability. The insurers advised that this decision was due to a significant deterioration in the Public Liability claims experience for all Local Authorities.

- 5.2 Various explanations for the deterioration in their claims experience over recent years include:
- an increase in the value of serious injury claims, due to improvement in medical care;
 - an increase in the number of abuse claims and
 - an increase in legal costs.

In light of the above the Council decided to tender for all Liability insurances and claims handling for a two year period from 1st October 2014.

- 5.3 The outcome of the tender is that the Council's Liability Insurers is now QBE (Europe) Insurance Limited, which is arranged via a company called Risk Management Partners. When taking into account the additional funds that would need to be paid into the internal insurance fund which pays for claims within the excess, the most economical excess level was found to be £250,000 (this was previously £100,000).
- 5.4 Finally, in conjunction with the above, the Council also had to tender for Liability claims handlers for a two year period. The new claims handlers are a company called Gallagher Bassett who will deal with all claims occurring from 1st October 2014.

6.0 **RECOMMENDATIONS**

That the Committee:

- (i) recommends the updated Corporate Risk Management Policy (**Appendix A**) to the Chief Executive and Leader for approval.
- (ii) notes the updated Corporate Risk Register (**Appendix B**).
- (iii) notes the recent outcome of the Casualty (Liability) Insurance and Claims Handling Tenders.

GARY FIELDING
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November 2014

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Background papers: None

NORTH YORKSHIRE COUNTY COUNCIL

**CORPORATE RISK MANAGEMENT
POLICY**

DRAFT v1

April 20122014

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CORPORATE RISK MANAGEMENT POLICY

1.0 Introduction

1.1 The Vision of the County Council is that ~~“We want North Yorkshire to be an even better place for everyone to live, work or visit”~~We want North Yorkshire to be a thriving county which adapts to a changing world and remains a special place for everyone to live, work and visit”.

To lead the achievement of our Vision we aim to:

- ~~→ ensure good access for all~~
- ~~→ help people to live in safe communities~~
- ~~→ help all children and young people to develop their full potential~~
- ~~→ promote a flourishing economy~~
- ~~→ maintain and enhance our environment and heritage, and~~
- ~~→ improve health and wellbeing and give people effective support when they need it.~~
- ~~→ ensure that the key issues for people and places in North Yorkshire are identified and understood.~~
- ~~→ ensure that there are strategies, developed with communities and partners, in place to tackle these.~~

To enable individuals, families and communities to do the best for themselves we aim to:

- ~~→ support empowered and vibrant communities to provide a range of services for local people that fully utilise all local assets, prevent loneliness and troubled families, and contribute to healthier lifestyles.~~
- ~~→ provide self service facilities and ready access to relevant information and signposting – enabling customers to access information, check eligibility, carry out a self-assessment, make appointments, make online payments, and request simple services themselves.~~

We also aim to ensure the delivery of:

- ~~→ services to the most vulnerable people.~~
- ~~→ high priority services that enable a thriving county.~~

1.2 Risk, uncertainty and change create a challenging dynamic as the County Council strives to meet these objectives. Risks, whether recognised or unforeseen, create a threat to achieving performance targets and change. This may result, for example, in ~~delays to service delivery or~~ reductions in service quality or delay in project delivery. Uncertainty and change, when considered thoroughly however, can also provide the opportunity to introduce new, innovative and effective ways of delivering services and act as the catalyst for developing services with better outcomes and fewer risks for our staff and our local communities.

- 1.3 Risk Management is integral to all aspects of our innovation and service delivery as well as the management of all our staff, physical assets and financial resources. As such it is reflected in all Council policies, new initiatives and Service Plans where appropriate.
- 1.4 This Risk Management Policy has been developed jointly by the Management Board, the Leader of the Council and the Executive.
- 1.5 Implementation of this Risk Management Policy and associated management systems contributes to ~~improving our corporate and best value performance~~ protecting and modernising frontline services during this period of austerity and great change.

2.0 Definition of Risk and Enterprise Risk Management

- 2.1 **Risk** is the chance or possibility of loss, damage, injury or failure to achieve objectives caused by an unwanted or uncertain action or event.
- 2.2 Enterprise **Risk Management** is the approach to managing all of the County Council's key service risks and opportunities with the intent of maximising ~~stakeholder value~~ service delivery effectiveness and efficiency.

3.0 Principles

- 3.1 For risk management (RM) to be effective the County Council will aspire to the following principles:
- ➔ RM **creates and protects value** – we will ensure that RM contributes to the demonstrable achievement of our objectives and improvement of our performance such as human health and safety, security, project management, efficiency in operations, governance and reputation.
 - ➔ RM is an **integral part of all organisational processes** – we will ensure that RM is part of the responsibilities of our management and part of our activities and processes including strategic planning, and all project and change management.
 - ➔ RM is **part of decision making** – we will ensure that RM helps our decision makers make informed choices, prioritise actions and distinguish among alternative courses of action.
 - ➔ RM explicitly **addresses uncertainty** – we will ensure that RM takes account of uncertainty, the nature of that uncertainty and how it can be addressed, including the fact that some risks can never be eliminated.
 - ➔ RM is **systematic, structured and timely** – we will ensure that RM contributes to our efficiency and to consistent, comparable and reliable results.
 - ➔ RM is **based on the best available information** – we will ensure that the inputs to the process of managing risk are based on reliable information but will always take into account any limitations of data or modelling or the possibility of divergence of opinions.

- RM is **tailored** – we will ensure that we reflect the contemporary situation in our risk management arrangements.
- RM **takes human and cultural factors into account** – we will ensure that we recognise the capabilities, perceptions and intentions of external and internal people that can facilitate or hinder achievement of our objectives.
- RM is **transparent and inclusive** – we will ensure the appropriate and timely involvement of stakeholders and, in particular, decision makers at all levels of the County Council, in order that RM remains relevant and up to date.
- RM is **dynamic, iterative and responsive to change** – we will ensure that risk management continually anticipates and responds to change, including ensuring that the process used is not burdensome and/or overly bureaucratic.
- RM **facilitates continual improvement** of the County Council – we will develop and implement processes to improve our risk management maturity alongside all other aspects of the County Council.
- RM will be **adequately resourced** – we will ensure that the necessary resources are in place in order to deliver excellent risk management.

4.0 Objectives

4.1 The objectives of this Risk Management Policy are to:

- continue to embed risk management into the culture of the County Council
- manage risk in accordance with best practice and support well considered risk taking
- anticipate and respond to changing social, environmental and legislative requirements
- minimise loss, disruption, damage and injury and reduce the cost of risk, thereby maximising the resources available for service delivery
- inform policy and operational decisions by identifying risks and their likely impact
- continue to raise awareness of the need for risk management by all those involved with the delivery of County Council services

4.2 These objectives will be achieved by:

- establishing clear roles, responsibilities and reporting lines for risk management throughout the County Council
- providing opportunities for shared learning on risk management across the County Council
- providing risk management training and awareness sessions
- using a consistent methodology to develop, monitor and review Risk Registers
- incorporating risk management considerations into the County Council's management processes (eg business planning, project management, service reviews) and decision making (eg Executive reports)
- effective communication with, and the active involvement of, staff
- effective communication with, and the active involvement of partners
- monitoring arrangements on an on-going basis

- operating a Corporate Risk Management Group, led by a Corporate Director, that will be proactive in implementing and developing all the above
- delivering a Corporate Risk Management Strategy that is consistent with, and embedded within, the County Council's overall strategic policies and practices.

5.0 Benefits

5.1 We expect that when the above principles and objectives are being met that the following benefits will be realised:

- strengthened ability to deliver against objectives and targets
- improved stakeholder confidence and trust
- an established and reliable basis for decision making and improved governance
- assurance to Members and management on the adequacy of arrangements for the conduct of business and use of resources
- improved operational effectiveness and efficiencies including a reduction in interruptions to service delivery
- reduction in management time spent dealing with the consequences of a risk event having occurred
- improved health and safety of those employed, and those affected, by the County Council's undertakings
- ability to be more flexible and responsive to new pressures and external demands
- avoids surprises and minimises loss and waste
- better informed financial decision-making
- enhanced financial control
- reduction in the financial costs associated with losses due to service interruptions, litigation, etc
- reduce, or maintain constant levels of, insurance premiums
- minimal service disruption to customers and a positive external image as a result of all of the above

6.0 Framework and Process

6.1 In order to aspire to the Principles referred to in this Policy (see Section 3) it is necessary to have a conceptual Framework for Risk Management from which a Risk Management Process can be developed. The relationship between these three components is shown diagrammatically in **Appendix A**.

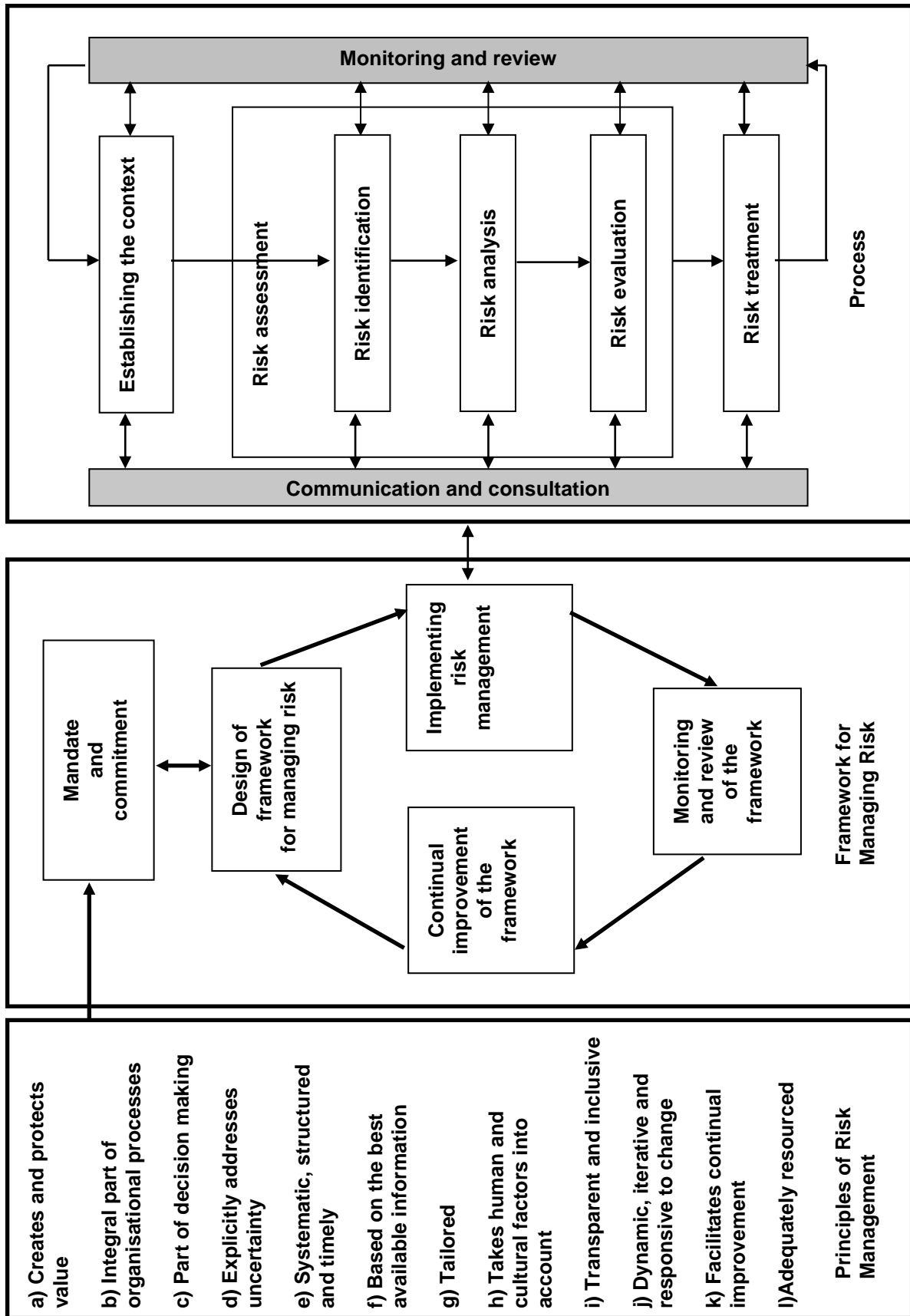
6.2 Details of the Framework and the consequential Process are provided in the Risk Management Strategy.

7.0 Responsibilities

Appendix A

- 7.1 The County Council accepts and recognises that it is the responsibility of all Members and staff to have regard for risk in carrying out their duties. If left unidentified and therefore uncontrolled, risk can result in a drain on resources that would better be directed to front line service provision, and to the meeting of the County Council objectives and community needs.
- 7.2 The Chief Executive, Corporate Directors, Service Heads and all line managers have the responsibility and accountability for managing the risks within their own work areas. All staff have a duty to work safely, avoid unnecessary waste of resources and contribute to risk management initiatives in their own area of activities. The co-operation and commitment of all staff is required to ensure that County Council resources are not squandered as a result of uncontrolled risk.
- 7.3 This Policy has the full support of the County Council which recognises that any reduction in injury, illness, loss or damage ultimately benefits the whole community of North Yorkshire.
- 8.0 **Review**
- 8.1 This Policy and other supporting documents such as the Risk Management Strategy will be reviewed at least every ~~two~~three years.

Relationships between Risk Management Principles, Framework and Process



Corporate Risk Register

Appendix B

Risk Register: **month 0 (Oct 2014) – summary**

Report Date: 19th November 2014 (cpc)

Identity			Person		Classification												Fallback Plan			
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR		Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		
- new -	20/187 - Information Governance	Ineffective information governance arrangements lead to unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies resulting in loss of reputation, poor decision making, fine, etc	Chief Exec	CD SR	H	M	M	M	H	1	7	31/12/2014	M	M	M	M	H	2	Y	CD SR
◀▶	20/47 - Joint Planning and Delivery with the NHS	Inability, in the context of the changing NHS landscape, to develop effective partnerships with NHS Commissioners and other NHS organisations to ensure better health outcomes for adults, children and young people and local communities resulting in poorly integrated services and lost opportunities relating to joint commissioning and provision.	Chief Exec	CD HAS CD CYPS	H	M	H	M	M	1	19	31/03/2015	H	M	M	M	M	2	Y	CD HAS CD CYPS
◀▶	20/1 - Funding Challenges	Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade resulting in legal challenge, unbalanced budget and public dissatisfaction	Chief Exec	CD SR	H	H	H	H	H	1	5	28/02/2015	M	H	H	M	M	2	Y	All Mgt Board
- new -	20/190 - Preparedness for Implementation of the Care Act	Failure to prepare for the implementation of the new Care Act including the financial impact of the Dilnot proposals on lifetime charges, revised capital limit, portable assessment, increase in a number of clients requiring assessment for both care needs and finance leading to loss of reputation and under capacity	CD HAS	HAS AD ASCO	M	H	H	H	H	2	3	30/09/2014	M	H	H	H	H	2	Y	HAS AD ASCO
◀▶	20/207 - 2020 North Yorkshire Change Programme	Failure to adequately develop, plan for and commence implementation of new council ways of working resulting in inability to meet financial savings requirements, sub-optimal decision making and poorer quality of services.	Chief Exec	CSD SR AD T&C	M	H	H	H	H	2	10	31/03/2015	L	H	H	H	H	3	Y	All Mgt Board



Corporate Risk Register

Appendix B




Risk Register: **month 0 (Oct 2014) – summary**

Report Date: 19th November 2014 (cpc)

Identity			Person		Classification												Fallback Plan			
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR		Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Next Action	Prob	Obj	Fin	Serv	Rep	Cat		
▲	20/49 - Organisational Performance Management	Council does not operate a true performance management framework leading to misalignment of activities and services with Council mission and objectives, poorer service delivery, public dissatisfaction, criticism, suboptimal working and lost opportunities and reduced ability to meet savings requirements	Chief Exec	CD SR	M	M	M	H	M	2	4	31/12/2014	L	M	M	H	M	3	Y	CD SR
◀▶	20/45 - Long Term Waste Service Strategy	Failure to deliver the long term waste service strategy	Chief Exec	CD BES	M	L	H	L	H	2	15	31/10/2014	L	L	H	L	H	3	Y	CD BES
- new -	20/189 - Safeguarding Arrangements	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.	Chief Exec	CD HAS CD CYPS	M	H	H	M	H	2	12	31/10/2014	L	H	H	M	H	3	Y	CD CYPS CD HAS
- new -	20/188 - Educational Outcomes	Failure to ensure positive educational outcomes for children and young people together with appropriate support for schools to be good or outstanding results in lower achievement levels for pupils, and NY children's life chances being determined by geography or family circumstances rather than being in their own hands.	Chief Exec	CD CYPS	M	M	H	L	H	2	11	31/01/2015	L	M	H	L	H	3	Y	CD CYPS
- new -	20/334 - Economic Development and Opportunities for Devolution in North Yorkshire	Failure to develop the North Yorkshire economy and to capitalise on the opportunities for devolution resulting in reduced investment and impact on the growth and jobs across North Yorkshire.	Chief Exec	BES AD EPU	M	L	H	L	M	2	9	30/11/2014	M	L	M	L	L	4	Y	CD BES
◀▶	20/389 - Health and Safety	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution	Chief Exec	CD SR	L	M	M	M	H	3	6	31/12/2014	L	M	M	M	H	3	Y	CSD SR HoHSRM
◀▶	20/8 - Major Emergencies in the Community	Failure to plan, respond and recover effectively to major emergencies in the community resulting in risk to life and limb, impact on statutory responsibilities, impact on financial stability and reputation	Chief Exec	Chief Exec	L	L	H	L	H	3	3	31/12/2014	L	L	H	L	M	3	Y	Chief Exec



Risk Register: **month 0 (Oct 2014) – summary**
Report Date: 19th November 2014 (cpc)

Key	
	Risk Ranking has worsened since last review.
	Risk Ranking has improved since last review
	Risk Ranking is same as last review
- new -	New or significantly altered risk



Corporate Risk Register

Appendix B

Risk Register: **month 0 (Oct 2014) – detailed**

Report Date: 19th November 2014 (cpc)

Phase 1 - Identification											
Risk Number	20/187	Risk Title	20/187 - Information Governance				Risk Owner	Chief Exec		Manager	CD SR
Description	Ineffective information governance arrangements lead to unauthorised disclosure of personal and sensitive data, poor quality or delayed responses to FoI requests, and inability to locate key data upon which the Council relies resulting in loss of reputation, poor decision making, fine, etc					Risk Group	Legislative		Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			Information Governance Strategy including the Policy and Procedure Framework; CIGG Action Plan; application of the Maturity model quality assurance methodology; data breach process; messages from senior management; on-line training; staff induction; information asset registers; DIGCs; posters; intranet information; regular monitoring of electronic communication by ICT; series of unannounced security compliance visits by internal audit; application of all the features of the Information Security Management System (ISMS); FoI – controls include central monitoring of receipt and progress, regular review by Veritau and review of outstanding cases by the Chief Exec on a monthly basis; proactive monitoring of all data; Records Management Policy & Strategy reviewed and revised; terms of reference reviewed; virtual group;						Effectiveness		
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	15/175 - Continue to emphasise personal responsibility of staff for all information in this area and consider disciplinary action in cases of data breaches						CD SR CSD ACE BS	Tue-30-Jun-15		0%	
Reduction	15/176 - Internal audit to support investigation of significant data breaches. Reasons for significant data breaches to be considered by CIGG and lessons learnt to be cascaded to information asset owners.						Ho Int Audit	Tue-30-Sep-14	Tue-30-Sep-14	100%	
Reduction	15/177 - e-learning training packages to be refreshed						Ho Int Audit	Tue-31-Mar-15		0%	
Reduction	15/178 - Resolve issues around secure physical storage and internal transfer of information						CD SR	Tue-30-Sep-14	Tue-30-Sep-14	100%	
Reduction	15/179 - Review and revise the Data Sharing Framework						CSD ACE LDS	Wed-31-Dec-14		0%	
Reduction	15/231 - Produce the Non NYCC Network Access Policy						CSD SR AD T&C	Tue-30-Sep-14	Tue-30-Sep-14	100%	
Reduction	15/232 - Periodic internal review of achievement of the Information Governance Strategy Objectives - ongoing						Ho Int Audit	Tue-30-Jun-15		0%	
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	H	Category	2
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	15/514 - Review Action Plan and new technology and continue to raise awareness. Invite ICO to carry out an audit of NYCC IG systems									CD SR	



Corporate Risk Register

Appendix B

Risk Register: month 0 (Oct 2014) – detailed

Report Date: 19th November 2014 (cpc)

Phase 1 - Identification											
Risk Number	20/47	Risk Title	20/47 - Joint Planning and Delivery with the NHS				Risk Owner	Chief Exec	Manager	CD HAS CD CYPS	
Description	Inability, in the context of the changing NHS landscape, to develop effective partnerships with NHS Commissioners and other NHS organisations to ensure better health outcomes for adults, children and young people and local communities resulting in poorly integrated services and lost opportunities relating to joint commissioning and provision.					Risk Group	Partnerships	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures		HAS: H & W Board and ICB; HASLT members on some CCG Boards; Engagement in local Partnership arrangements with CCGs and Providers; CHC review set up internally; Plans for use of the Better Care Fund; New Health & Wellbeing Strategy being developed CYPS: H&W Board; Children's Trust Board; Public Health team; CYPLT; Dir of partnership Commissioning; joint post of Commissioning Manager; joint post of Public Health analyst; CYPS Plan; Health and Well-being Strategy; JSNA						Effectiveness			
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	M	Category	I
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed	%		
Reduction	20/41 - Ensure S75 agreement signed by CCGs (HAS)					AD SR (HAS) & Proc	Wed-31-Dec-14	Fri-31-Oct-14	100%		
Reduction	20/57 - Ensure Better Care Fund plan signed and agreed with Government (HAS)					HAS AD Integration	Thu-30-Apr-15	Fri-31-Oct-14	100%		
Reduction	20/60 - Complete and implement the Governance Review of HWB and ICB (HAS)					HAS AD Integration	Thu-30-Apr-15		0%		
Reduction	20/245 - Complete CHC review (HAS)					HAS AD ASCO	Wed-30-Sep-15		0%		
Reduction	20/246 - Undertake review of management and operational delivery of social care mental health services (HAS)					HAS AD ASCO	Thu-30-Apr-15		0%		
Reduction	20/362 - Ensure NHS partners are fully aware of the democratic and political environment they are operating within (HAS)					CD HAS	Mon-31-Aug-15		0%		
Reduction	20/363 - Actively monitor relationships, priorities and communications and ensure that HAS managers are fully engaged at appropriate level and review at HAS WLT on a regular basis (HAS)					CD HAS	Mon-31-Aug-15		0%		
Reduction	20/386 - Develop a new Health and Well-being Strategy					CD HAS	Tue-30-Jun-15		0%		
Reduction	20/909 - Develop new model for working with CCGs to co-lead transformation joint priorities and transformation (HAS)					HAS AD Integration	Tue-30-Jun-15		0%		
Reduction	20/910 - Secure appropriate engagement with CCGs and PCU for commissioning that affect children and young people and their families (CYPS)					CYPS AD P&C Janet Probert	Tue-31-Mar-15		0%		
Reduction	20/967 - Ensure the arrangements for the joint commissioning of services for children with speech, language and communication needs are developed and in place (CYPS)					CD CYPS Janet Probert	Mon-31-Aug-15		0%		



Corporate Risk Register

Appendix B

Risk Register: **month 0 (Oct 2014) – detailed**

Report Date: 19th November 2014 (cpc)

Reduction	20/1180 - Work closely with NHS England to ensure safe transfer of the 0 – 5 Healthy Child Programme contract. (CYPS)	Jt Comm Mgr Public Health Consultant	Wed-30- Sep-15		0%						
Reduction	20/1181 - Ensure that when the Health and Well-being Strategy is refreshed, children's health is a priority (CYPS)	CD CYPS	Tue-30- Jun-15		0%						
Reduction	20/1182 - Embed children's health priorities within the Health and Well-being Strategy and ensure strategic alignment between that strategy and the Children and Young People's Plan. (CYPS)	CD CYPS	Mon-31- Mar-14	Sun-31-Aug- 14	100%						
Reduction	20/1183 - Contribute to the delivery of the workplan for the Health and Well-being Board in relation to children's health priorities and ensure strategic decision making in Health is influenced through alignment with the JSNA and the Children and Young People's Plan (CYPS)	CD CYPS	Fri-31-Jul- 15		0%						
Reduction	20/1184 - Recommission services for 5 - 19 Healthy Child Programme to ensure close alignment with Preventative Services (CYPS)	Jt Comm Mgr Public Health Consultant	Tue-31- Mar-15		0%						
Reduction	20/1185 - Review children's health performance at the Children's Trust Board to monitor the impact of changes on children's health outcomes in North Yorkshire. (CYPS)	CD CYPS	Fri-31-Jul- 15		0%						
Reduction	20/1186 - Work with Public Health to embed Public Health outcomes into the work of CYPS (CYPS)	CD CYPS	Fri-31-Jul- 15		0%						
Reduction	20/1268 - Ensure CYPLT are fully briefed and up to date with the changing commissioning landscape and the different roles involved in that landscape (CYPS)	Jt Comm Mgr	Tue-31- Mar-15		0%						
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/210 - Further engagement between Local Authority and NHS to decide effective plans going forward									CD HAS CD CYPS	



Corporate Risk Register

Appendix B

Risk Register: **month 0 (Oct 2014) – detailed**

Report Date: 19th November 2014 (cpc)

Phase 1 - Identification											
Risk Number	20/1	Risk Title	20/1 - Funding Challenges				Risk Owner	Chief Exec		Manager	CD SR
Description	Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade resulting in legal challenge, unbalanced budget and public dissatisfaction					Risk Group	Resources		Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			Existing MTFS; Members Budget seminars; modelling carried out on implications of CSR and other funds; agreed Budget 2; 2020 North Yorkshire Programme & constituent elements including service reviews; review of 2020NY in Member Seminars, Cabinet, and Overview and Scrutiny Committees where Directorate based; 2020NY Programme Management Office; 2020NY Programme Governance						Effectiveness		
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	20/42 - Ongoing review of existing MTFS including assurance on existing budget savings and feeding into Budget for 2015/16						CD SR	Sat-28-Feb-15		0%	
Reduction	20/43 - Carry out modelling on implications of external funding levels						CD SR	Mon-31-Aug-15		0%	
Reduction	20/45 - Promote rural funding challenges including feeding into DCLG rural services review						CD SR	Mon-31-Aug-15		0%	
Reduction	20/46 - Ensure effective consultation/communication with staff, public and Members						All Mgt Board	Mon-31-Aug-15		0%	
Reduction	20/972 - Agree and monitor Plan with CCGs through the Health and Well Being Board in order to secure Better Care Fund for supporting Adult Social Care						CD HAS	Mon-31-Aug-15		0%	
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/504 - Further fundamental review in order to discharge statutory responsibilities								All Mgt Board		



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Phase 1 - Identification											
Risk Number	20/190	Risk Title	20/190 - Preparedness for Implementation of the Care Act				Risk Owner	CD HAS	Manager	HAS AD ASCO	
Description	Failure to prepare for the implementation of the new Care Act including the financial impact of the Dilnot proposals on lifetime charges, revised capital limit, portable assessment, increase in a number of clients requiring assessment for both care needs and finance leading to loss of reputation and under capacity					Risk Group	Performance	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures		AD in place; Lead Manager in post; Programme Plan developed; Workshop with Leadership Forum, Integrated Transformation Plan including requirements for the Care Act and Dilnot, HAS Operating Model.					Effectiveness				
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed	%		
Reduction	20/241 - Working at regional and national level to influence the financial case for NYCC					AD SR (HAS) & Proc	Mon-31-Aug-15		0%		
Reduction	20/242 - Develop an action plan for implementing the Operating Model to capture all Care Act requirements					HAS AD ASCO	Tue-30-Sep-14		0%		
Reduction	20/243 - Ensure HASLT in Transformation Board mode continue to receive monthly updates and hold 'confirm and challenge' sessions with lead managers on all workstreams					CD HAS HAS LT	Fri-31-Jul-15		0%		
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 5 - Fallback Plan											
						Action Manager					
Fallback Plan	20/544 - Tighten controls on who can receive services. Utilise BCF to support core activity. Re-allocate other work to prioritise the statutory requirements of the Act.					HAS AD ASCO					



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Phase 1 - Identification													
Risk Number	20/207	Risk Title	20/207 - 2020 North Yorkshire Change Programme					Risk Owner	Chief Exec		Manager	CSD SR AD T&C	
Description	Failure to adequately develop, plan for and commence implementation of new council ways of working resulting in inability to meet financial savings requirements, sub-optimal decision making and poorer quality of services.						Risk Group	Strategic		Risk Type			
Phase 2 - Current Assessment													
Current Control Measures			Initial service reviews largely completed; 2020 North Yorkshire Programme Plan in place and regularly reviewed/updated; Members workshops & political group sessions completed; briefings of Cabinet; regular Mgt Board discussions; Mgt Board to sit as Programme Board; AD Tech & Change appointed to programme manage 2020 North Yorkshire; staff messages; opportunities to involve staff further; middle manager sessions with Chief Exec; Stronger Communities programme; Blueprint produced; recruitment of support required for Programme; governance arrangements agreed; standard approaches to project management and business change employed (eg Lean workshops)							Effectiveness			
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2		
Phase 3 - Risk Reduction Actions													
Reduction	15/56 - Review of Behaviour and Skills framework and other relevant key documents as part of OD workstream						Action Manager	CSD ACE BS		Action by	Sat-31-Jan-15	Completed	%
Reduction	15/101 - Ongoing restructure of Business Support and administrative service staff to meet BS savings target which are dependent on 2020 service changes						Action Manager	CSD ACE BS		Action by	Thu-30-Apr-15	Completed	0%
Reduction	15/174 - Implement the 2020 Finance programme						Action Manager	CD SR		Action by	Thu-30-Apr-15	Completed	0%
Reduction	15/240 - Consider staffing resource and impact upon the workforce of the future on an ongoing basis (Workforce Strategy 2020 was agreed and implemented in the summer but work is ongoing)						Action Manager	CSD ACE BS		Action by	Thu-30-Apr-15	Completed	0%
Reduction	15/258 - Leading practice to be identified in each area of change (including potential for critical friends)						Action Manager	CD SR		Action by	Tue-31-Mar-15	Completed	0%
Reduction	15/262 - Develop 'stronger communities' programme to mitigate against proposed budget cuts and promote community and individual resilience						Action Manager	CSD AD PP		Action by	Sun-31-Aug-14	Completed	Tue-30-Sep-14 100%
Reduction	15/834 - Approve and implement the ICT strategy						Action Manager	CSD SR AD T&C		Action by	Tue-30-Jun-15	Completed	0%
Reduction	15/835 - Agree overall communications and engagement strategy and develop ongoing plan for activity						Action Manager	CSD HoC		Action by	Thu-30-Apr-15	Completed	0%
Reduction	15/836 - Agree resource requirements (also agreed process for any additional ones)						Action Manager	CD SR CSD ACE BS		Action by	Tue-30-Sep-14	Completed	Tue-30-Sep-14 100%
Reduction	15/837 - Implement the Stronger Communities programme to mitigate against proposed budget cuts, support communities to take over local services, and promote community and individual resilience (ongoing)						Action Manager	CSD AD PP		Action by	Mon-31-Aug-15	Completed	0%
Phase 4 - Post Risk Reduction Assessment													
Probability	L	Objectives	H	Financial	H	Services	H	Reputation	H	Category	3		
Phase 5 - Fallback Plan													



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		Action Manager
Fallback Plan	20/529 - Reprioritisation of savings, further consideration of structures and ways of working	All Mgt Board



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Phase 1 - Identification											
Risk Number	20/49	Risk Title	20/49 - Organisational Performance Management				Risk Owner	Chief Exec	Manager	CD SR	
Description	Council does not operate a true performance management framework leading to misalignment of activities and services with Council mission and objectives, poorer service delivery, public dissatisfaction, criticism, suboptimal working and lost opportunities and reduced ability to meet savings requirements					Risk Group	Performance	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures			Corporate Performance Management Framework including service planning, quarterly reports to Exec, participation in benchmarking exercises, Corporate Performance Management Group, team performance management matrix, internal peer review of performance management matrix, review of Q performance reports					Effectiveness			
Probability	M	Objectives	M	Financial	M	Services	H	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed	%		
Reduction	15/201 - Implement revised Corporate Performance Management Framework					AD SR (BES/CS) & Perf	Wed-31-Dec-14		0%		
Reduction	15/202 - Determine and implement a robust vfm framework for the authority that is integral to 2020 North Yorkshire					CD SR	Wed-31-Dec-14		0%		
Reduction	15/233 - Implement a plain English performance development language for the council					AD SR (BES/CS) & Perf	Wed-31-Dec-14		0%		
Reduction	15/237 - Develop future shape of performance management support; options of central team, directorate specialist teams, combinations, hub and spoke, etc. Develop this through CPMG and directorate management teams and report to MB					AD SR (BES/CS) & Perf	Wed-31-Dec-14		0%		
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	H	Reputation	M	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/533 - Fundamental review of approach							Action Manager		CD SR	



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Phase 1 - Identification											
Risk Number	20/45	Risk Title	20/45 - Long Term Waste Service Strategy				Risk Owner	Chief Exec		Manager	CD BES
Description	Failure to deliver the long term waste service strategy					Risk Group	Performance		Risk Type		
Phase 2 - Current Assessment											
Current Control Measures	Strategic group; officer group (strat and proc); PPP group; project plan and indicators; adopted waste strategy; adopted local plan (waste); strategy for sites and planning developed; business case approved; approval of Treasury (FBC); contract awarded; waste flow and MTFs position monitored; monitoring of sites and planning strategies; IAA with CYC signed; ongoing close liaison with CYC to agree decision making process; CYC and NYCC Council approvals to award PPP Contract; planning advisor; contractor appointed; planning permission granted subject to Judicial Review; soft market testing of interim solutions carried out; Teckal with Yorwaste agreed; Exec agreed recommendation to council; Plan for procurement of interim arrangements; County Council sign off; Technical review incl. engineering to minimise long term contract costs with Amey Cespa; Project funding and explored all alternatives & options with Amey Cespa; Continual review of waste flow; Section 151 officer sign off;							Effectiveness			
Probability	M	Objectives	L	Financial	H	Services	L	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed	%		
Reduction	20/35 - Carry out Technical review including engineering to minimise long term contracts costs, demonstrate value compared with alternative options - with Amey Cespa					BES AD W&CS	Thu-31-Jul-14	Sat-31-May-14	100%		
Reduction	20/37 - Continue to ensure sufficiency of budget provision and strategy for Waste PPP (ongoing review)					Waste Strategy Financial Lead	Mon-31-Aug-15		0%		
Reduction	20/38 - Progress project funding with Amey Cespa and fully explore all alternative and options - with Amey Cespa					Waste Strategy Financial Lead	Thu-31-Jul-14	Sat-31-May-14	100%		
Reduction	20/39 - Continue to do soft market testing and scope options for interim solutions assuming delays in the long term					BES AD W&CS	Mon-31-Aug-15		0%		
Reduction	20/891 - Obtain Members' sign off based on detailed VFM assessment and details of the business case					CD BES	Wed-24-Sep-14	Wed-24-Sep-14	100%		
Reduction	20/980 - Procurement &/or delivery of agreed front end facilities					BES AD W&CS	Tue-31-Mar-15		0%		
Reduction	20/981 - Continual review of waste flow to inform future strategy (ongoing)					CD BES	Thu-31-Jul-14	Sun-31-Aug-14	100%		
Reduction	20/1167 - Implement a Teckal approach to the Waste Services Procurement 2015					BES AD W&CS	Tue-31-Mar-15		0%		
Reduction	20/1168 - Continue with procurement of interim arrangements (4 years)					BES AD W&CS	Mon-31-Aug-15		0%		
Reduction	20/1169 - Publish OJEU notice and review any challenge					BES AD W&CS	Fri-31-Oct-14		0%		
Reduction	20/1170 - Start a financial close 'dry run' process including affordability and VFM					BES AD W&CS	Fri-31-Oct-14		0%		
Reduction	20/1171 - Work with and monitor Amey Cespa contract (construction)					BES AD W&CS	Sat-31-Mar-18		0%		



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Reduction	20/1172 - Ensure effective contract management arrangements are in place	BES AD W&CS	Tue-31-Mar-15		0%						
Reduction	20/1175 - Obtain Section 151 officer sign off from CYC and NYCC	CD BES	Mon-30-Jun-14	Thu-31-Jul-14	100%						
Reduction	20/1176 - Maintain PPP project risk register	BES AD W&CS	Mon-31-Aug-15		0%						
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/206 - Rely short term on newly procured arrangements from April 2015, review strategy, media management									Action Manager	CD BES



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Phase 1 - Identification											
Risk Number	20/189	Risk Title	20/189 - Safeguarding Arrangements				Risk Owner	Chief Exec		Manager	CD HAS CD CYPS
Description	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.					Risk Group	Safeguarding		Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			CYPS – Safeguarding website; regularly reviewed procedures; monthly performance data for monitoring; audit regime; manager authorisation of all assessments; ICS; family intervention team; training strategy; clear supervision process which is audited on a regular basis; customer contact screening team; HAS - Detailed action plan, Safeguarding review for the County, revised Safeguarding Boards and sub groups, Safeguarding general manager and team, strengthening of Safeguarding policy team, case file audit and review, training plan, best interest assessors in post, better understanding & embedding of Mental Capacity Act. Independent chair to Safeguarding Board appointed, risk enablement panel developed, countywide safeguarding general manager appointed,						Effectiveness		
Probability	M	Objectives	H	Financial	H	Services	M	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	20/374 - Ensure compliance with Safeguarding Board and Children's Social Care procedures (CYPS)					CYPS AD CSC		Wed-30-Sep-15		0%	
Reduction	20/375 - Contribute to the delivery and implementation of the Child Sexual Exploitation (CSE) strategy with the LSCB (CYPS)					CYPS CSC HoS		Wed-30-Sep-15		0%	
Reduction	20/376 - Raise awareness of the escalation procedures relating to children missing and at risk of CSE (CYPS)					CYPS CSC HoS		Wed-30-Sep-15		0%	
Reduction	20/377 - Ensure all cases of children at risk of CSE are flagged on LCS (CYPS)					CYPS CSC HoS		Wed-30-Sep-15		0%	
Reduction	20/378 - Ongoing Mgt file audit of case files against established assessment standards and staff supervision files (CYPS)					CYPS CSC SMT		Wed-30-Sep-15		0%	
Reduction	20/379 - Monitoring and management of performance against agreed targets in the SMT action plan and team action plans (CYPS)					CYPS CSC SMT		Wed-30-Sep-15		0%	
Reduction	20/380 - Review of safeguarding procedures linked to consultation in light of the Care Act (HAS)					HAS AD ASCO		Fri-31-Oct-14		0%	
Reduction	20/381 - Continue to ensure partners are fully engaged with Safeguarding boards centrally and locally, particularly new health partners (CCGs) (HAS)					HAS AD ASCO		Thu-30-Apr-15		0%	
Reduction	20/382 - Continue to work with Procurement, Partnerships and Quality Assurance team to improve quality assurance (HAS)					HAS AD ASCO HAS AD PP&QA		Thu-30-Apr-15		0%	
Reduction	20/383 - Develop and implement new safeguarding board performance framework (HAS)					HAS AD ASCO		Thu-30-Apr-15		0%	
Reduction	20/384 - Carry out review of approach to domestic abuse, Prevent and serious incident data (HAS)					HAS AD ASCO		Thu-30-Apr-15		0%	
Reduction	20/385 - Implement the concordat following Winterbourne View (HAS)					HAS AD ASCO		Thu-30-Apr-15		0%	



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Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	H	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/545 - Carry out necessary review of approach, target underperforming areas and take on lessons learned from any serious case reviews									CD CYPs CD HAS	



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Phase 1 - Identification											
Risk Number	20/188	Risk Title	20/188 - Educational Outcomes				Risk Owner	Chief Exec		Manager	CD CYPs
Description	Failure to ensure positive educational outcomes for children and young people together with appropriate support for schools to be good or outstanding results in lower achievement levels for pupils, and NY children's life chances being determined by geography or family circumstances rather than being in their own hands.						Risk Group	Performance		Risk Type	
Phase 2 - Current Assessment											
Current Control Measures			Cross-directorate "Strategic Priority Schools" approach; work with Schools Forum; detailed analysis of data; joint annual performance review and target settings with schools; effective targeted intervention; 'Closing the Gap' strategy; School Improvement strategy including monitoring groups for vulnerable children; Achievement for All Programme;						Effectiveness		
Probability	M	Objectives	M	Financial	H	Services	L	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	20/1161 - Ensure leadership and release of commissioning capacity in the context of the Commission for School Improvement and School Improvement restructure						CYPs AD E&S	Tue-31-Mar-15		0%	
Reduction	20/1165 - Continue to promote alternative models of school leadership including mergers, federations and informal partnerships						CYPs AD E&S	Sat-31-Jan-15		0%	
Reduction	20/1166 - Ensure effective implementation of the local 'Closing the Gap' innovation programme and monitoring of the impact of the projects funded through this programme						CYPs AD E&S	Sat-31-Jan-15		0%	
Reduction	20/1177 - Monitor and evaluate outcomes around the vulnerable groups in all schools						CYPs AD E&S	Sat-31-Jan-15		0%	
Reduction	20/1187 - Continue to implement and evaluate impact of the Achievement for All Programme						CYPs AD E&S	Sat-31-Oct-15		0%	
Reduction	20/1188 - Implement plans to further improve Looked After Children educational outcomes						CYPs Ho ELAC	Fri-31-Jul-15		0%	
Reduction	20/1189 - Develop a new Skills Strategy based on robust assessment of needs						CYPs AD E&S	Thu-30-Apr-15		0%	
Reduction	20/1190 - Establish stronger links with businesses and employers re apprenticeships, internships and traineeships and use NYCC as a role model itself in this area						CYPs AD E&S	Thu-30-Apr-15		0%	
Reduction	20/1197 - Establish stronger links with Further and Higher Education establishments						CYPs AD E&S	Thu-30-Apr-15		0%	
Reduction	20/1199 - Develop and implement the "Scarborough Programme" which collaboratively challenges underachievement						CD CYPs	Thu-30-Apr-15		0%	
Reduction	20/1200 - Establish the North Yorkshire Education Partnership						CD CYPs	Thu-30-Apr-15		0%	
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	L	Reputation	H	Category	3
Phase 5 - Fallback Plan											



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		Action Manager
Fallback Plan	20/542 - Continually review via internal mechanisms and the new NY Education Partnership and challenge Programmes and Strategies in order to ensure better educational outcomes	CD CYPs



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Phase 1 - Identification											
Risk Number	20/334	Risk Title	20/334 - Economic Development and Opportunities for Devolution in North Yorkshire					Risk Owner	Chief Exec	Manager	BES AD EPU
Description	Failure to develop the North Yorkshire economy and to capitalise on the opportunities for devolution resulting in reduced investment and impact on the growth and jobs across North Yorkshire.					Risk Group	Strategic	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures		Supporting the LEP to deliver its strategic economic plan; Infrastructure Delivery Steering Group: NYCC wide co-ordination of development needs linked to District plans; Broadband; circa £200m Local Growth and EU funding; support to create a Combined Authority model;						Effectiveness			
Probability	M	Objectives	L	Financial	H	Services	L	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	20/364 - Gain political support both locally and nationally						Chief Exec	Sun-31-May-15		0%	
Reduction	20/915 - Develop the strategic economic plan to maximise investment from Government and EU to stimulate growth						BES AD EPU	Mon-30-Jun-14	Thu-31-Oct-13	100%	
Reduction	20/916 - Deliver the strategic economic plan						BES AD EPU	Tue-31-Mar-20		0%	
Reduction	20/917 - Secure further funding from Government and EU & obtain approval for spending						BES AD EPU	Thu-30-Apr-15		0%	
Reduction	20/918 - Ensure LEP Secretariat is fit for purpose						BES AD EPU	Mon-31-Aug-15		0%	
Reduction	20/975 - Develop a LEP wide plan on what powers and influence we would like devolved and the added value that we can deliver						CD BES	Sun-31-May-15		0%	
Reduction	20/976 - Create a Directors of Development Group to support development of the Combined Authority Model and improve engagement with the LEP						CD BES	Sun-30-Nov-14		0%	
Reduction	20/1267 - Commission consultants to develop a Combined Authority proposal						CD BES	Sun-30-Nov-14		0%	
Reduction	20/1397 - Identify the economic barriers and opportunities which a Combined Authority can take advantage of						CD BES	Tue-31-Mar-15		0%	
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	L	Financial	M	Services	L	Reputation	L	Category	4
Phase 5 - Fallback Plan											
Fallback Plan	20/596 - Consider membership of Leeds City Region Combined Authority							Action Manager	CD BES		



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Phase 1 - Identification											
Risk Number	20/389	Risk Title	20/389 - Health and Safety				Risk Owner	Chief Exec		Manager	CD SR
Description	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution					Risk Group	Legislative		Risk Type		
Phase 2 - Current Assessment											
Current Control Measures			HSRM Service Plan feeding into Directorate Action Plans; H&S team; Corporate H&S Policy; Corporate and Directorate H&S procedures; intranet and cyps.info sites; Directorate RM groups; RM Working groups; H&S Champions and lead officers; reporting on a regular basis; on-going H&S risk assessment, training, monitoring and audit; corporate H&S training matrix						Effectiveness		
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed	%	
Reduction	15/248 - Continue delivery of the programme of H&S monitoring					AD SR (CYPS) & Prop		Tue-30-Jun-15		0%	
Reduction	15/249 - Develop and implement the directorate H&S action plans and report performance					AD SR (CYPS) & Prop		Tue-30-Jun-15		0%	
Reduction	15/254 - Update online health and safety training materials and improve the identification of Health & Safety training needs					CSD SR HoHSRM		Tue-30-Jun-15		0%	
Reduction	15/255 - Promote directorate programmes of health & safety risk assessment and monitor completion					AD SR (CYPS) & Prop		Tue-30-Jun-15		0%	
Reduction	15/256 - Review of Health and Safety service					AD SR (CYPS) & Prop		Wed-31-Dec-14		0%	
Reduction	15/257 - Revision of the corporate H&S policies and procedures					CSD SR HoHSRM		Wed-31-Dec-14		0%	
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/628 - Liaise with HSE, media management, implement fatal/serious injury response guide								CSD SR HoHSRM		

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Phase 1 - Identification											
Risk Number	20/8	Risk Title	20/8 - Major Emergencies in the Community				Risk Owner	Chief Exec	Manager	Chief Exec	
Description	Failure to plan, respond and recover effectively to major emergencies in the community resulting in risk to life and limb, impact on statutory responsibilities, impact on financial stability and reputation					Risk Group	Performance	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures		NYLRF; experience and resources of partners; existing plans incl public health (training and exercises); EPU; partnership working with District Councils; community resilience; silver response in the County Council major incident plan tested; approach to BCP refreshed to strengthen service resilience; Resilience Direct portal; regional multi agency pandemic exercise held;						Effectiveness			
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed	%		
Reduction	20/249 - Test effectiveness and robustness of emergency plans relating to the public health of the NY population - final review and lessons learned following multi agency exercise to complete					Chief Exec	Wed-31-Dec-14		0%		
Reduction	20/970 - Continue to ensure effective co-ordination and communication with County and District/Borough Council services & NYLRF in light of reduction in resources					Chief Exec	Sat-31-Oct-15		0%		
Reduction	20/971 - Continue to ensure effective and efficient processes are embedded amongst all partners to prioritise workstreams (incl. plans, training and exercises)					Chief Exec	Sat-31-Oct-15		0%		
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	M	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/207 - Review and prioritise resources dependent on nature and impact of event (inc effective media management)							Action Manager	Chief Exec		

