

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

25 June 2015

RISK MANAGEMENT – PROGRESS REPORT

Report of the Corporate Director – Strategic Resources

1.0 PURPOSE OF THE REPORT

- 1.1 To receive details of the updated Corporate Risk Register.
- 1.2 To note the links between the Corporate Risk Register and the Directorate Risk Registers
- 1.3 To note progress on other Risk Management related matters

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 Leader of the County Council and the Executive Member for Central Services formally approved a revised Corporate Risk Management Policy on 3 March 2015 with a proviso that it be reviewed and updated every three 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 CORPORATE RISK REGISTER

- 3.1 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 March/April.
- 3.2 A 6 monthly update of the Corporate Risk Register was carried out in April/May – see attached at **Appendix A**. This involved reviewing the risks, risk controls and risk reductions that had been identified for each of the risks and making amendments to the Register where necessary.

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

- one title of a risk has changed from 'Preparedness for implementation of the Care Act' to 'Implementation of the Care Act' to reflect the current position
- the Long Term Waste Service Strategy ranking has changed from 2-3 to 3-3 to reflect that this project has moved into the construction stage (see paragraph 3.4 below for an explanation of ranking).
- many actions have been completed including:
 - Information Governance – refreshing the e learning training packages and developing a data sharing protocol.
 - Joint Planning and Delivery with the NHS – securing appropriate engagement with CCGs and PCU for commissioning that affects children and young people and their families, working closely with NHS England to ensure the safe transfer of the 0-5 Healthy Child Programme contract and developing a risk sharing agreement (Risk Share) for the Better Care Fund.
 - Organisational Performance Management – implementation of service plans on a page
 - Safeguarding arrangements – development of a new Safeguarding Board performance framework within HAS and implementation of the concordat following Winterborne View.
 - Educational Outcomes – development of the Scarborough Programme which collaboratively challenges under achievement and implementation of the 'Closing the Gap' innovation programme.
 - Health and Safety – a review of the H&S function has taken place
 - Major Emergencies in the Community – emergency plans relating to the public health of the NY population (eg e bola) have been tested.

3.4 To assist Members interpret **Appendix A**

- 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 A**) 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.

3.5 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. Each year, an exercise is carried out to identify the links between Directorate Risk Registers and the Corporate Risk Register. Please find attached a diagram showing these links at **Appendix B** for information.

4.0 ADDITIONAL RISK PRIORITISATION EXERCISES

4.1 As well as the bi-annual update of Corporate, Directorate and Service risk registers, additional workshops are also carried out to develop risk registers for specific areas of activity in the County Council. At this time these include:

- Bedale, Aiskew and Leeming Bar Bypass (BALB) – this register was developed in early 2012 and has supported the funding approval and permissions processes. As construction has now started the register is assessing aspects such as overrun of costs and Health & Safety on site.
- Developing Stronger Families - the Council has received national recognition for its excellent results for this initiative and the register has helped work through issues around data sharing, partnership working and governance.
- Basic Need - the increase in Basic Need (additional school places) has arisen as a result of a change to the planning areas adopted by the local authority in response to changed criteria used by the Department for Education to determine need. The risk register has been developed to understand the risks associated with the Capital Programme and includes

issues such as capital commissioning and delivery arrangements, site and town planning constraints together with volatility of pupil numbers.

- Extra Care – this register has supported the setting up of a framework of providers for future Extra Care projects. Risks include not achieving the required savings, procurement issues and impact of the TUPE regulations.
- Tour de Yorkshire - following on from a successful Grand Depart in 2014, this register assisted the organisation required in staging the new 3 day cycling event. The risks included partnership working and expectation management.

5.0 RISK MANAGEMENT STRATEGY AND RISK MANAGEMENT AUDIT

- 5.1 The review of the Risk Management Strategy has been carried out. This review took into account the outcome of the detailed audit that was carried out on the Risk Management process in 2013/14, together with wider considerations such as present best practice and 2020 North Yorkshire. Only minor changes were necessary and the Strategy was agreed and approved by the Corporate Risk Management Group (which is a representation of Directorate senior officers chaired by the Corporate Director – Strategic Resources) on 2 March 2015.
- 5.2 A “health check” Risk Management Audit has been carried out recently and an opinion of Substantial Assurance was given. This audit covered issues including the follow up of the actions from the 2013/14 audit and assurance that risk registers are updated at regular intervals. This confirms the views of officers which is that risk continues to be generally well managed within the Council.

6.0 RECOMMENDATIONS

That the Committee:

- (i) notes the updated Corporate Risk Register (**Appendix A**).
- (ii) notes the links between the Corporate Risk Register and the Directorate Risk Registers (**Appendix B**).
- (iii) notes the position on other Risk Management related matters

GARY FIELDING
Corporate Director – Strategic Resources

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June 2015

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Background papers: None

HAS Risk Register
<p>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</p>
<p>Partnership and Integration with the NHS Failure, in the context of the changing NHS landscape, to develop effective partnerships with NHS Commissioners and other NHS organisations to achieve the necessary changes to the North Yorkshire Health economy that will provide better outcomes for patients and local communities.</p>
<p>Implementation of the Care Act Uncertainties in the consequences of the implementation of the new Care Act and embedding into the Operating Model including the financial impact of the Dilnot proposals on lifetime charges, revised capital limit & portable assessment</p>
<p>HAS 2020 Transformation and Efficiency Programme (incl. the MTFs) Failure of the HAS 2020 Programmes to transform services, including cultural change by providing prevention, support when and where needed and information advice and guidance that enables people to live independent lives as part of their community</p>
<p>Cultural Change Failure to change the Directorate culture at the same time as implementing the 2020 Transformation Programme for HAS resulting in financial challenges and unmet savings, staff unclear about their roles and an inability to implement new ways of working</p>
<p>Workforce Planning and Development Failure to appropriately plan workforce requirements and / or develop staff in line with transformation agenda resulting in reduction in quality of service and transformation objectives not achieved</p>
<p>Safeguarding Arrangements Failure to have a robust Safeguarding regime in place results in risk to service users, failure to reach required standard on CQC and adverse effect on Directorate reputation</p>
Central Services Risk Register
<p>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</p>
<p>Central Services Savings Plan Failure to deliver the Central Services savings plan for the duration of the Change Programme (up to 2019)</p>
<p>2020 North Yorkshire Change Programme Failure to adequately develop, plan for and commence implementation of new council ways of working</p>
<p>Organisational Performance Management Council does not operate a true performance management framework leading to misalignment of activities and services with Council mission and objectives</p>
<p>Health & Safety Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution</p>

Corporate Risk Register	Rank	
<p>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</p>	1	2
<p>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</p>	1	2
<p>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</p>	1	2
<p>Implementation of the Care Act Uncertainties in the consequences of the implementation of the new Care Act and embedding into the Operating Model including the financial impact of the Dilnot proposals on lifetime charges, revised capital limit & portable assessment</p>	1	2
<p>2020 North Yorkshire Change Programme Failure to adequately develop, plan for and commence implementation of new council ways of working</p>	2	3
<p>Organisational Performance Management Council does not operate a true performance management framework leading to misalignment of activities and services with Council mission and objectives</p>	2	3
<p>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</p>	2	3
<p>Educational Outcomes Failure to ensure positive educational outcomes for children and young people together with appropriate support for schools</p>	2	3
<p>Economic Development and Opportunities for Devolution in North Yorkshire Failure to develop the North Yorkshire economy and to capitalise on the opportunities for devolution</p>	2	4
<p>Health and Safety Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution</p>	3	3
<p>Waste Strategy Failure to deliver the long term waste service strategy</p>	3	3
<p>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</p>	4	5

CYPS Risk Register
<p>Good and Safe Governance Arrangements Failure to ensure that good and safe governance arrangements in respect of data security and health and safety are in place throughout the Directorate</p>
<p>Budget 2020 North Yorkshire Unforeseen budget overspend/underspend resulting in unfunded overspend, the need to re-prioritise and increase spend, including the risk of exposure to costs due to Central Government policies passing responsibility for areas without adequate budget</p>
<p>Joint Planning & Delivery with Health Inability, in the context of the changing NHS landscape, to develop effective partnerships with the emerging NHS Commissioners and other NHS organisations and to ensure that legislative requirements are met and the necessary health related outcomes for children and young people are achieved</p>
<p>Workforce Planning and Development incl Cultural Change Failure to appropriately plan workforce requirements and/or develop staff in line with transformation agenda</p>
<p>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</p>
<p>Educational Outcomes Failure to ensure positive educational outcomes for children and young people together with appropriate support for schools</p>
BES Risk Register
<p>Statutory Duties Failure to carry out statutory duties or meet statutory deadlines (e.g. Health and Safety, safe guarding, information governance)</p>
<p>Cultural Change including 2020 North Yorkshire programme Failure to effectively deliver the BES 2020 Programme including the required cultural change</p>
<p>Leeds City Region The Leeds City Region Area has a complex mixture of overlapping boundaries relative to economy, planning, transport and infrastructure, which may not have a positive impact or may prejudice outcomes for North Yorkshire</p>
<p>Interaction with the LEP and Delivery of the SEP Failure to fully engage with the LEP could result in the loss of potential investment for the Council</p>
<p>Local Growth Fund Accountable Body Lead Failure to put in place an adequate assurance framework to protect NYCC as the accountable body lead for the Local Growth Fund</p>
<p>Long Term Waste Service Strategy Failure to deliver the long term waste service strategy</p>

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Linking of Directorate risks to the Corporate risk register 2015

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	CS 15/161		
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; Directorate virtual group; internal audit support investigation of significant data breaches; CIGG consider reasons for data breaches and cascade lessons learned; secure physical storage and internal info transfer issues resolved; Non NYCC Network Access Policy produced;					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 SRCSD ACE BS	Tue-30-Jun-15				
Reduction	15/177 - e-learning training packages to be refreshed					Ho Int Audit	Tue-31-Mar-15	Tue-31-Mar-15			
Reduction	15/179 - Review and revise the Data Sharing Framework					CSD ACE LDS	Wed-31-Dec-14	Wed-31-Dec-14			
Reduction	15/232 - Periodic internal review of achievement of the Information Governance Strategy Objectives - ongoing					Ho Int Audit	Tue-30-Jun-15				
Reduction	15/392 - Ensure Partners sign up to agreed Data Sharing Protocol					CSD ACE LDS	Tue-31-Mar-15	Tue-31-Mar-15			
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

Risk Register: month 6 (April 2015) – detailed

Report Date: 10th June 2015 (fs)

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	Sat-28-Feb-15		
Reduction	20/43 - Carry out modelling on implications of external funding levels (eg Emergency Budget, Spending Review Settlement)						CD SR	Mon-31-Aug-15			
Reduction	20/45 - Promote rural funding challenges including feeding into DCLG rural services review						CD SR	Mon-31-Aug-15			
Reduction	20/46 - Ensure effective consultation/communication with staff, public and Members						All Mgt Board	Mon-31-Aug-15			
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			
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		

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	CYPs 24/221 HAS 3/180		
Phase 2 - Current Assessment											
Current Control Measures	HAS: H & W Board and NYDB hosted by NYCC; 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, 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; Worked closely with NHS England to ensure safe transfer of the 0 – 5 Healthy Child Programme contract; CYPLT fully briefed and up to date with the changing commissioning landscape and the different roles involved; appropriate engagement secured with CCGs and PCU for commissioning affecting children and young people and their families; services recommissioned for 5 - 19 Healthy Child Programme to ensure close alignment with Preventative Services; children's health performance reviewed at the Children's Trust Board to monitor the impact of changes on children's health outcomes in North Yorkshire; Work with Public Health to embed PH outcomes into the work of CYPs; Children's health priorities embedded in H&WB strategy and aligned with CYPs						Effectiveness				
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	M	Category	1
Phase 3 - Risk Reduction Actions											
Reduction	20/60 - Complete and implement the Governance Review of HWB and ICB (HAS)					Action Manager	HAS AD Integration	Action by	Thu-30-Apr-15	Completed	Sat-31-Jan-15
Reduction	20/245 - Complete CHC review (HAS)					Action Manager	HAS AD C&S	Action by	Wed-30-Sep-15	Completed	
Reduction	20/246 - Undertake review of management and operational delivery of social care mental health services (HAS)					Action Manager	HAS AD C&S	Action by	Thu-31-Mar-16	Completed	
Reduction	20/362 - Ensure NHS partners are fully aware of the democratic and political environment they are operating within (HAS)					Action Manager	CD HAS	Action by	Mon-31-Aug-15	Completed	
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)					Action Manager	CD HAS	Action by	Mon-31-Aug-15	Completed	
Reduction	20/386 - Develop a new Health and Well-being Strategy (HAS)					Action Manager	CD HAS	Action by	Tue-30-Jun-15	Completed	
Reduction	20/400 - Develop a risk sharing agreement (Risk Share) for the Better Care Fund					Action Manager	AD SR (HAS) & Proc	Action by	Tue-31-Mar-15	Completed	Thu-30-Apr-15
Reduction	20/909 - Develop new model for working with CCGs to co-lead transformation joint priorities and transformation (HAS)					Action Manager	HAS AD Integration	Action by	Tue-30-Jun-15	Completed	
Reduction	20/910 - Secure appropriate engagement with CCGs and PCU for commissioning that affect children and young people and their families (CYPs)					Action Manager	CYPs AD S&C Janet Probert	Action by	Tue-31-Mar-15	Completed	Mon-16-Mar-15
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)					Action Manager	CD CYPs Janet Probert	Action by	Mon-31-Aug-15	Completed	

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	Tue-31-Mar-15							
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								
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								
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	Tue-31-Mar-15							
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	Tue-31-Mar-15							
Reduction	20/1186 - Work with Public Health to embed Public Health outcomes into the work of CYPS (CYPS)	CD CYPS	Fri-31-Jul-15	Mon-16-Mar-15							
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	Mon-16-Mar-15							
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	20/210 - Further engagement between Local Authority and NHS to decide effective plans going forward									Action Manager	
										CD HAS CD CYPS	

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

Phase 1 - Identification											
Risk Number	20/190	Risk Title	20/190 - Implementation of the Care Act					Risk Owner	CD HAS	Manager	HAS AD C&S
Description	Uncertainties in the consequences of the implementation of the new Care Act and embedding into the Operating Model including the financial impact of the Dilnot proposals on lifetime charges, revised capital limit, portable assessment leads to an increase in a number of clients requiring assessment for both care needs and finance leading to loss of reputation, under capacity and financial challenges.						Risk Group	Performance	Risk Type	HAS 3/187	
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	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/241 - Implement the workplan for delivery of the Care Act requirements						HAS AD C&S	Tue-31-Mar-15	Tue-31-Mar-15		
Reduction	20/243 - Working at regional and national level to influence the financial case for NYCC						AD SR (HAS) & Proc	Mon-31-Aug-15			
Reduction	20/397 - Develop an action plan for implementing the Operating Model to capture all Care Act requirements						HAS AD C&S	Tue-30-Sep-14	Tue-30-Sep-14		
Reduction	20/401 - 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			
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 5 - Fallback Plan											
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.								Action Manager		
									HAS AD C&S		

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	CS 15/11		
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); Stronger Communities programme developed to mitigate against budget cuts and promote resilience; resource requirements agreed					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	Mon-31-Aug-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	Mon-31-Aug-15	Completed	
Reduction	15/174 - Implement the revised financial systems					Action Manager	CD SR	Action by	Thu-30-Apr-15	Completed	Tue-7-Apr-15
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	Mon-31-Aug-15	Completed	
Reduction	15/258 - Identify potential for critical friends/corporate peer review					Action Manager	CD SR	Action by	Wed-30-Sep-15	Completed	
Reduction	15/834 - Approve and implement the ICT strategy					Action Manager	CSD SR AD T&C	Action by	Tue-30-Jun-15	Completed	
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	Tue-30-Sep-14
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	
Reduction	20/403 - Carry out monthly monitoring of communications and engagement plan including key messages and themes (ongoing)					Action Manager	CSD HoC	Action by	Wed-30-Sep-15	Completed	
Reduction	20/404 - Set out initial delivery plan for rationalisation of property in line with new ways of working to Programme Board					Action Manager	CD SR	Action by	Wed-30-Sep-15	Completed	
Reduction	20/405 - Set out initial implementation plan for Customer Themes in line with new ways of working to Programme Board					Action Manager	CSD ACE Selby	Action by	Fri-31-Jul-15	Completed	
Phase 4 - Post Risk Reduction Assessment											

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**
 Report Date: 10th June 2015 (fs)

Probability	L	Objectives	H	Financial	H	Services	H	Reputation	H	Category	3
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/529 - Reprioritisation of savings, further consideration of structures and ways of working									All Mgt Board	



Corporate Risk Register

Risk Register: month 6 (April 2015) – detailed

Report Date: 10th June 2015 (fs)

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	CS 15/166		
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	Tue-31-Mar-15	Tue-31-Mar-15			
Reduction	15/233 - Implement a plain English performance development language for the council					AD SR (BES/CS) & Perf	Thu-31-Dec-15				
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	Thu-31-Dec-15				
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	H	Reputation	M	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	20/533 - Fundamental review of approach								CD SR		

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	CYPS 24/250 HAS 3/27			
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, Safeguarding procedures reviewed in line with consultation on the Care Act					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				
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				
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				
Reduction	20/377 - Ensure all cases of children at risk of CSE are flagged on LCS (CYPS)					CYPS CSC HoS	Wed-30-Sep-15				
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				
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				
Reduction	20/381 - Continue to ensure partners are fully engaged with Safeguarding boards centrally and locally, particularly new health partners (CCGs) (HAS)					HAS AD C&S	Wed-30-Sep-15				
Reduction	20/382 - Continue to work with Quality and Engagement team to improve quality assurance including development of risk assessment tool (HAS)					HAS AD C&S HAS AD Q&E	Tue-30-Jun-15				
Reduction	20/383 - Develop and implement new safeguarding board performance framework (HAS)					HAS AD C&S	Thu-30-Apr-15	Thu-30-Apr-15			
Reduction	20/384 - Carry out review of approach to domestic abuse and Prevent (HAS)					HAS AD C&S	Wed-30-Sep-15				
Reduction	20/385 - Implement the concordat following Winterbourne View (HAS)					HAS AD C&S	Thu-30-Apr-15	Thu-30-Apr-15			
Reduction	20/1176 - Ongoing work following agreement of the concordat (Winterbourne View) (HAS)					HAS AD C&S	Wed-30-Sep-15				
Phase 4 - Post Risk Reduction Assessment											

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Risk Register: **month 6 (April 2015) – detailed**

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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	



Corporate Risk Register

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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	CYPS 24/249	
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; alternative models of school leadership including mergers, federations and informal partnerships promoted;						Effectiveness		
Probability	M	Objectives	M	Financial	H	Services	L	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/402 - Implement the 'Scarborough Programme' which collaboratively challenges underachievement (ongoing)						CD CYPS	Wed-30-Sep-15			
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	Mon-31-Aug-15			
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	Sat-31-Jan-15		
Reduction	20/1166 - Ensure effective implementation of the local 'Closing the Gap' innovation programme (complete) and monitoring of the impact of the projects funded through this programme						CYPS AD E&S	Fri-31-Jul-15			
Reduction	20/1187 - Continue to implement and evaluate impact of the Achievement for All Programme						CYPS AD E&S	Sat-31-Oct-15			
Reduction	20/1188 - Implement plans to further improve Looked After Children educational outcomes (strategy in place, monitoring taking place)						CYPS Ho ELAC	Fri-31-Jul-15			
Reduction	20/1189 - Develop a new Skills Strategy based on robust assessment of needs						CYPS AD E&S	Mon-31-Aug-15			
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 (ongoing)						CYPS AD E&S	Wed-30-Sep-15			
Reduction	20/1197 - Establish stronger links with Further and Higher Education establishments (ongoing)						CYPS AD E&S	Wed-30-Sep-15			
Reduction	20/1199 - Develop the "Scarborough Programme" which collaboratively challenges underachievement						CD CYPS	Thu-30-Apr-15	Thu-30-Apr-15		
Reduction	20/1200 - Establish the North Yorkshire Education Partnership						CD CYPS	Thu-30-Apr-15	Thu-30-Apr-15		
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	L	Reputation	H	Category	3



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Phase 5 - Fallback Plan		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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Risk Register: month 6 (April 2015) – detailed

Report Date: 10th June 2015 (fs)

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; SEP developed to maximise investment from Government and EU to stimulate growth					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				
Reduction	20/398 - Directors of Development Group to support development of Combined Authority Model and improve engagement with the LEP					CD BES	Tue-30-Jun-15				
Reduction	20/916 - Deliver the strategic economic plan					BES AD EPU	Tue-31-Mar-20				
Reduction	20/917 - Negotiate with Government for further funding and powers (ongoing)					BES AD EPU	Wed-31-Mar-21				
Reduction	20/918 - Continue to ensure LEP Secretariat is fit for purpose					BES AD EPU	Thu-31-Mar-16				
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				
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	Sun-30-Nov-14			
Reduction	20/1175 - Negotiate effective Partnership model for NYCC (with Local Authority partners) to capture benefits from devolution					CD BES	Thu-31-Dec-15				
Reduction	20/1267 - Commission consultants to develop a Combined Authority proposal					CD BES	Sun-30-Nov-14	Sat-31-Jan-15			
Reduction	20/1397 - Identify the economic barriers and opportunities which a Combined Authority can take advantage of					CD BES	Tue-30-Jun-15				
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	CS 15/183	
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			
Reduction	15/249 - Develop and implement the directorate H&S action plans and report performance						AD SR (CYPS) & Prop	Tue-30-Jun-15			
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			
Reduction	15/255 - Promote directorate programmes of health & safety risk assessment and monitor completion						AD SR (CYPS) & Prop	Tue-30-Jun-15			
Reduction	15/256 - Carry out review of health and safety function within NYCC						AD SR (CYPS) & Prop	Tue-31-Mar-15	Tue-31-Mar-15		
Reduction	15/257 - Revision of the corporate H&S policies and procedures						CSD SR HoHSRM	Sun-31-May-15			
Reduction	15/407 - Work with City of York Council to agree the new structure for the shared service						AD SR (CYPS) & Prop	Sat-31-Oct-15			
Reduction	15/408 - Implement arrangements for H&S function following and depending on the agreement of the structure for shared services with City of York Council						AD SR (CYPS) & Prop	Thu-31-Mar-16			
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	20/45	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	BES 7/18	
Phase 2 - Current Assessment											
Current Control Measures			Strategic group; officer group (strat and proc); PPP group; project plan and indicators; adopted waste strategy; business case approved; contract awarded; waste flow and MTF5 position monitored; IAA with CYC signed; ongoing close liaison with CYC; CYC and NYCC Council approvals to award PPP Contract; contractor appointed; planning permission granted; soft market testing of interim solutions carried out; Teckal with Yorwaste agreed; interim arrangements procured; AWRP under construction; contract management group formed with CoYC and Amey Cespa; construction manager in place; community liaison committee; Continual review of waste flow;						Effectiveness		
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/37 - Continue to ensure sufficiency of budget provision and strategy for Waste PPP (ongoing review)						Waste Strategy Financial Lead	Mon-31-Aug-15			
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	Tue-31-Mar-15		
Reduction	20/980 - Implement a Teckal approach to the Waste Services Procurement 2015						BES AD W&CS	Thu-30-Apr-15			
Reduction	20/1167 - Procurement &/or delivery of agreed front end facilities						BES AD W&CS	Fri-31-Mar-17			
Reduction	20/1168 - Work with and monitor Amey Cespa contract (construction)						BES AD W&CS	Sat-31-Mar-18			
Reduction	20/1169 - Ensure effective contract management arrangements are in place (management of construction phase in place)						BES AD W&CS	Sat-31-Mar-18			
Reduction	20/1170 - Monitor and act upon any outcomes from community liaison committee						BES AD W&CS	Sat-31-Mar-18			
Reduction	20/1171 - Implement working arrangements for Teckal to optimise input to AWRC						BES AD W&CS	Fri-31-Aug-18			
Reduction	20/1172 - Monitor the Amey Cespa PPP project risk register						BES AD W&CS	Sat-31-Mar-18			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	20/206 - Rely short term on newly procured arrangements from April 2015, review strategy, media management								CD BES		

Corporate Risk Register

Risk Register: **month 6 (April 2015) – detailed**

Report Date: 10th June 2015 (fs)

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	Wed-31-Dec-14			
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				
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				
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			