

AUDIT COMMITTEE

23 June 2016

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 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 provision that it will 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/May.
- 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:
 - Funding Challenges – actions have been updated to represent the present position

- The Partnership and Integration with the NHS risk is a joint risk between Health and Adult Services and Children and Young People's Service. The emphasis of this risk has moved further towards Health and Adult Services and so the description has slightly changed to reflect this. Other minor changes relate to the actions.
- Information Governance – further work continues to minimise data breaches such as the review of information asset registers and the secure transfer of data
- Educational Outcomes – this risk has had an action added to reflect the changing landscape for schools and academies and the educational system
- Major Emergencies in the Community – an action has been added relating to developing and implementing an NYCC action plan based on the debrief report recommendations and all multi agency learning, following the flooding incident last Christmas
- Actions on risks have also been completed including:
 - 2020 North Yorkshire Change Programme – implementation of the revised financial systems, review and update of the Behaviour and Skills Framework, the LGA corporate peer review and the review of governance and areas of future focus for the 2020 Programme Board
 - Health and Safety – revision of managers' on line H&S training, 2nd stage review of the H&S function within NYCC and agreement of the new H&S structure with City of York Council for the shared service

3.4 To assist Members interpret **Appendix A**

- Risks are identified by Management Board during a prep 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 on the summary 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.

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 and construction. The major risks presently during construction are effective communications with local businesses and the public and on site Health & Safety. The project is due to complete on time in August 2016.
- Tour de Yorkshire - this register assisted in going through the planning of the event and looked at risks such as partnership working, expectation management and engagement, communications and project management and programming.
- 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. This risk register continues to assess the risks associated with the Capital Programme and includes issues such as capital funding, site and town planning constraints, procurement strategies together with volatility of pupil numbers.

5.0 KPMG LOCAL AUTHORITY CORPORATE RISK REGISTER ANALYSIS

5.1 KPMG has carried out a corporate/strategic risk register analysis from a range of local authorities covering Councils, Fire and Rescue Services and Police bodies. The outcome highlights the most frequently featured risks across local authority risk registers and changes from 2014 when a similar exercise was carried out.

5.2 KPMG also considered the arrangements in place to maintain and review risk registers, and they considered the degree to which risk registers are used as an integrated management and assurance tool.

5.3 The top three residual risks occurring most frequently are:

- Delivering the medium term financial plan/saving targets/delivering funding cuts;
- Business continuity/disaster recovery incidents/emergency planning; and
- Data loss/information security/information governance risks.

Compared to the same analysis last year, the risks new for 2015 are Asset Management and Planning and Development issues.

The most common risk for County Councils, *Delivery of the Medium Term Financial Plan*, is the same as the all authority type analysis, however *Partnership arrangements/Governance and Safeguarding vulnerable Children or adults* are more commonly seen as significant risks in County Councils and also seen in more registers in 2015 compared to 2014.

- 5.4 Based on the November 2015 Corporate Risk Register, North Yorkshire County Council's risks suggest a strong correlation to the general picture above. Along with a lot of councils, North Yorkshire County Council scores its risks, allocates them to lead officers, and identifies mitigating controls. The Council also identifies the movement on risks from the previous review period and provides information on when its risk reduction actions are due to be completed. Similar to most Councils, North Yorkshire does not allocate the risks to lead members.

6.0 RECOMMENDATIONS

That the Committee:

- (i) notes the updated Corporate Risk Register (**Appendix A**).
- (ii) notes the position on other Risk Management related matters

GARY FIELDING
Corporate Director – Strategic Resources

County Hall, Northallerton

June 2016

Author of report: Fiona Sowerby, Corporate Risk and Insurance Manager
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Background papers: None

Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – summary
Report Date: 27th May 2016 (fs)

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		
◀▶	20/1 - 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	7	31/07/2016	M	H	H	M	M	2	Y	All Mgt Board
◀▶	20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market	Major failure of provider/key providers results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention. The impact could include loss of trust in the Care Market, increased budgetary implications and issues of service user safety.	CD HAS	HAS AD Q&E	H	M	M	M	H	1	11	31/12/2015	H	M	M	M	M	2	Y	HAS AD Q&E
◀▶	20/187 - Information Governance	Ineffective information governance arrangements lead to unacceptable levels of 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	4	30/06/2016	M	L	M	L	M	4	Y	CD SR
▼	20/47 - Partnership and Integration with the NHS	Failure to achieve at least the minimum level of protection for Health and Social Care resulting in impeding the development and implementation of new models of care and full integration plans by 2017. Also this could delay the transformation of services, give rise to increased costs and impact on effective relationships with NHS Partners and the outcome for all people including children and communities.	Chief Exec	CD HAS	M	M	H	M	M	2	25	30/06/2015	M	M	H	M	M	2	Y	CD HAS



Corporate Risk Register

AC App A

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Report Date: 27th May 2016 (fs)

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
◀▶	20/207 - 2020 North Yorkshire Change Programme	Failure to successfully implement the Programme and Modern 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	16	31/10/2015	L	H	H	H	H	3	Y	All Mgt Board
▲	20/49 - Organisational Performance Management	Failure to align the performance management framework with the Council strategy and/or use the correct metrics to measure performance results in reduction in service performance, efficiency and effectiveness; reduction in value for money; loss of reputation and suboptimal financial savings	Chief Exec	CD SR	M	M	M	H	M	2	4	31/12/2015	L	H	M	M	M	3	Y	CD SR
◀▶	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	18	31/10/2015	L	H	H	M	H	3	Y	CD CYPS CD HAS
◀▶	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	8	31/07/2016	L	M	H	L	H	3	Y	CD CYPS
▼	20/334 - Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority	Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on the growth and jobs across the whole of North Yorkshire.	Chief Exec	BES AD EPU	M	L	H	L	M	2	5	31/10/2016	L	L	M	L	L	5	N	
◀▶	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	9	31/03/2016	L	M	M	M	H	3	Y	CSD SR HoHSRM

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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		
◀▶	20/8 - 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	30/06/2016	L	L	H	L	M	3	Y	Chief Exec

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

AC App A

Risk Register: month 6 (April 2016) – detailed
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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; modelling on implications of external funding levels (eg Spending Review Settlement);						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 - Carry out base budget reviews of specific services						CD SR	Sun-31-Jul-16				
Reduction	20/43 - Carry out modelling on implications of external funding levels (eg Spending Review Settlement)						CD SR	Wed-31-Aug-16	Mon-29-Feb-16			
Reduction	20/46 - Ensure effective consultation/communication with staff, public and Members about ongoing savings requirements						All Mgt Board	Wed-31-Aug-16				
Reduction	20/251 - Identify other savings to feed into the supplementary budget report						All Mgt Board	Sun-31-Jul-16				
Reduction	20/261 - SmartSolutions- attempt to increase contributions/surplus through planned development with a targeted approach						CD SR	Tue-28-Feb-17				
Reduction	20/491 - Identify further savings to feed into the February 2017 budget report						All Mgt Board	Tue-28-Feb-17				
Reduction	20/972 - Carry out intensive discussions with CCGs through the Health and Well Being Board in order to secure Better Care Fund for supporting Adult Social Care						CD HAS	Sun-31-Jul-16				
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 2016) – detailed
Report Date: 27th May 2016 (fs)

Phase 1 - Identification											
Risk Number	20/194	Risk Title	20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market				Risk Owner	CD HAS	Manager	HAS AD Q&E	
Description	Major failure of provider/key providers results in the Directorate being unable to meet service user needs. This could be caused by economic performance or resource capabilities including recruitment and retention. The impact could include loss of trust in the Care Market, increased budgetary implications and issues of service user safety.					Risk Group	Legislative	Risk Type	HAS Q&E 2/159		
Phase 2 - Current Assessment											
Current Control Measures		Regular review and monitoring contracts; standard contract terms; approvals process; regular meetings to share best practice; experienced staff; regular communication with providers; bulletins; customer feedback; Engagement Group; legal services; CQC; Financial Services & insurance consultation; market analysis; capacity planning; alerts system including brokerage; Service Unit & provider BCPs; QA Framework developed; guidance and ongoing training for purchasing staff; engage with AD ASS; reg meetings with Q&M, Health Commissioner and police; robust comms with CCGs; quality monitoring embedded in Dir perf monitoring; market position statement; reviewed the actual cost of care exercise to incorporate the impact of the national living wage;						Effectiveness			
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	H	Category	I
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/467 - Carry out Phase II of the domiciliary care procurement and ensure the national living wage issues are addressed						HAS AD Q&E	Fri-30-Jun-17			
Reduction	20/468 - Continue to produce a market position statement						HAS AD Com	Wed-31-Aug-16			
Reduction	20/469 - Jointly with Health continue to monitor baseline assessments QA framework and risk profiles of providers; targets are reviewed at quarterly officer meetings						HAS AD Q&E	Wed-31-Aug-16			
Reduction	20/470 - Ongoing quarterly Partnership and Partner Liaison meetings (market development board), market analysis and mapping and information sharing						HAS AD Q&E	Thu-30-Jun-16			
Reduction	20/471 - Continue with regular engagement meetings with CQC locally and engage with CQC's national programme of identifying providers where there is significant risk of failure						HAS AD Q&E	Wed-31-Aug-16			
Reduction	20/472 - Undertake review of the actual cost of care exercise to incorporate the impact of the national living wage						HAS AD Q&E	Thu-31-Dec-15	Thu-5-Nov-15		
Reduction	20/473 - Continue to engage in ADASS work to manage major problems occurring, such as financial issues in the care provider market and ensure robust contingency planning and to learn lessons from serious case reviews at a national level						HAS AD Q&E	Wed-31-Aug-16			
Reduction	20/474 - Work with Veritau on audits of individual suppliers						HAS AD Q&E	Thu-30-Jun-16			
Reduction	20/484 - Consider and implement the recommendations from the actual cost of care exercise						HAS AD Q&E	Tue-31-May-16			
Reduction	20/485 - Complete heat map action plan						HAS HoHR	Thu-30-Jun-16			
Reduction	20/486 - Develop joint approach with NHS to make steps towards resolving care workforce issues						HAS LT	Thu-30-Jun-16			



Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

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	20/548 - Make client safe, crisis meeting, implement relevant steps, consultation with senior staff and relevant organisations (e.g. Police CQC). Effective communication to relevant parties, utilise contingency plan(s).									HAS AD Q&E	



Corporate Risk Register

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (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 unacceptable levels of 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 associated Policy and Procedure Framework; CIGG Action Plan; data breach process; messages from senior management; on-line training; staff induction; Information Asset Owners identified; 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; 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; e learning training packages refreshed; Data Sharing Protocol in place						Effectiveness			
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	H	Category	1	
Phase 3 - Risk Reduction Actions												
Reduction	15/423 - Continue to emphasise personal responsibility of staff for all information in this area and consider disciplinary action in cases of data breaches					Action Manager	CD SRCSD ACE BS		Action by	Thu-30-Jun-16		
Reduction	15/424 - Carry out a review of the information asset registers in line with revised guidelines					Action Manager	Ho Int Audit		Action by	Wed-31-Aug-16		
Reduction	15/425 - Periodic internal review of achievement of the Information Governance Strategy Objectives - ongoing					Action Manager	Ho Int Audit		Action by	Sun-31-Jul-16		
Reduction	15/426 - Ensure all relevant Partners sign up to agreed Multi-Agency Data Sharing Protocol and individual agreements completed for each data sharing activity - (ongoing)					Action Manager	Ho Int Audit		Action by	Fri-31-Mar-17		
Phase 4 - Post Risk Reduction Assessment												
Probability	M	Objectives	L	Financial	M	Services	L	Reputation	M	Category	4	
Phase 5 - Fallback Plan												
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									Action Manager	CD SR	



Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

Phase 1 - Identification											
Risk Number	20/47	Risk Title	20/47 - Partnership and Integration with the NHS				Risk Owner	Chief Exec	Manager	CD HAS	
Description	Failure to achieve at least the minimum level of protection for Health and Social Care resulting in impeding the development and implementation of new models of care and full integration plans by 2017. Also this could delay the transformation of services, give rise to increased costs and impact on effective relationships with NHS Partners and the outcome for all people including children and communities.					Risk Group	Partnerships	Risk Type	CYPs 24/221 HAS 3/180		
Phase 2 - Current Assessment											
Current Control Measures		HAS: Effective HWB partnership with clear governance providing strategic leadership. HASLT locality delivery model in place and active membership of local transformation boards strengthening local partnerships and shaping integration. Joint programmes with CCGs inc Vanguard and Pioneer designing new service models; Better Care Fund Schemes implemented and other new models of care programmes inc Vanguard in development; CHC scope agreed; effective reporting arrangements to HWB for JHWS and BCF; new Health and Well-being Strategy developed; CYPs: Effective 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 refreshed with children's health as a priority and aligned with the CYPs Plan; JSNA; 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; Director of PH annual report focussing on children's health; scope of Health care review agreed; arrangements for services for children with speech, language and communication needs in place; specifications for 0-5 healthy child service in place;						Effectiveness			
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
Reduction	Action	Action Manager	Action by	Completed							
Reduction	20/45 - Ensure 2016/17 Better Care Fund plan signed and agreed with CCGs and Government, subject to securing protection of Adult Social Care	HAS AD Integration	Thu-30-Jun-16								
Reduction	20/60 - Ensure BCF S75 agreement signed by CCGs for at least 2016/17 (ongoing)	AD SR (HAS) & Proc	Thu-30-Jun-16								
Reduction	20/245 - Complete the scope of the CHC review	HAS AD C&S	Mon-30-Nov-15	Mon-30-Nov-15							
Reduction	20/246 - Complete the initial CHC review	HAS AD C&S	Tue-31-May-16								
Reduction	20/362 - Ensure NHS partners are fully aware of the democratic and political environment they are operating within (ongoing)	CD HAS	Wed-31-Aug-16								
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 (ongoing)	CD HAS	Wed-31-Aug-16								
Reduction	20/386 - Establish effective reporting and evaluation arrangements to HWB for JHWS and BCF	HAS AD Integration	Sun-31-Jan-16	Sun-31-Jan-16							



Corporate Risk Register

AC App A

Risk Register: **month 6 (April 2016) – detailed**
 Report Date: 27th May 2016 (fs)

Reduction	20/399 - Develop and implement integration plans with CCGs and HASLT for 2017/18	HAS AD Integration	Fri-30-Jun-17								
Reduction	20/400 - Implement board development programme for HWB (ongoing)	HAS AD Integration	Wed-31-Aug-16								
Reduction	20/450 - Ensure effective monitoring arrangements for the 0-5 contract are in place	CYPS S&C CMH	Fri-31-Mar-17								
Reduction	20/451 - Agree and implement new models of care in preparation of 2017 Integration plans in all CCG localities incl. Vanguard (HaRD) Ambitions for Health	CD HAS	Thu-30-Jun-16								
Reduction	20/452 - Engage wider HASLT in development of locality operating models	HAS AD Integration	Fri-31-Mar-17								
Reduction	20/453 - Fully engage locality delivery teams in STPs (Sustainability and Transformation Plans) to ensure inclusion of NYCC 2020 plans	HAS AD Integration	Thu-30-Jun-16								
Reduction	20/457 - Put in place affordable DToC (Delayed Transfer of Care) plans that minimise financial penalties	HAS AD C&SHAS AD Integration	Thu-30-Jun-16								
Reduction	20/458 - Consider the viability of a local Risk Share Agreement with NHS Partners	AD SR (HAS) & ProCHAS AD Integration	Thu-30-Jun-16								
Reduction	20/459 - Review delivery arrangements for Health and Wellbeing Board to support implementation of reporting and performance arrangements	HAS AD Integration	Thu-30-Jun-16								
Reduction	20/465 - Develop specifications for a recommissioned 0-5 healthy child service aligned to the 5-19 structure	CYPS S&C CMH	Sat-30-Apr-16	Mon-29-Feb-16							
Reduction	20/477 - Ensure effective monitoring of the 5-19 contracts and the in-house healthy lifestyle service	CYPS S&C CMH	Sat-31-Dec-16								
Reduction	20/478 - Ensure the arrangements for the joint commissioning of services for children with speech, language and communication needs are developed and in place	CD CYPSCYPS Incl HoIE	Sun-31-Jan-16	Sun-31-Jan-16							
Reduction	20/479 - Refresh CCG led CAMHS Local Transformation Plans to align with existing NY children's emotional and mental health strategy	CYPS S&C CMH	Mon-31-Oct-16								
Reduction	20/480 - Ensure that when the Health and Well-being Strategy is refreshed, children's health is a priority	CD CYPS	Tue-30-Jun-15	Tue-30-Jun-15							
Reduction	20/481 - Continue to 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	CD CYPS	Fri-30-Sep-16								
Reduction	20/482 - Carry out a review of the Partnership Commissioning Unit	CD CYPSCYPS Incl HoIE	Fri-30-Sep-16								
Reduction	20/483 - Review delivery arrangements for Health and Wellbeing Board to support implementation of reporting and performance arrangements (joint with HAS)	CD CYPS	Thu-30-Jun-16								
Reduction	20/909 - Carry out tender process for future contracts	CYPS S&C CMH	Wed-31-Aug-16								
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											



Corporate Risk Register

Risk Register: **month 6 (April 2016) – detailed**
Report Date: 27th May 2016 (fs)

		Action Manager
Fallback Plan	20/210 - Escalation to CMB and Executive Members, further engagement with senior tiers in NHS locally, regionally and nationally.	CD HAS



Corporate Risk Register

AC App A

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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 successfully implement the Programme and Modern 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; financial systems (Oracle, BI and PBCS) revised; Reviewed Behaviour and Skills framework and other relevant key documents as part of OD workstream; LGA corporate peer review; review carried out of governance and areas of future focus for Programme Board;						Effectiveness				
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2	
Phase 3 - Risk Reduction Actions												
Reduction	15/54 - Regularly review the ICT strategy in light of changes in the organisation both before and after 2020 (ongoing)					Action Manager	CSD SR AD T&C		Action by	Wed-31-Aug-16	Completed	
Reduction	15/55 - Implement the revised financial systems (Oracle, BI and PBCS)					Action Manager	CD SR		Action by	Thu-31-Dec-15	Completed	Mon-29-Feb-16
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	Wed-31-Aug-16	Completed	Sat-30-Apr-16
Reduction	15/208 - 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	Sat-31-Oct-15	Completed	Sat-31-Oct-15
Reduction	15/393 - Conduct an LGA corporate peer review					Action Manager	AD SR (BES/CS) & PerfCSD SR AD T&C		Action by	Thu-31-Mar-16	Completed	Thu-31-Mar-16
Reduction	15/394 - Review and implement action plan following peer review					Action Manager	CSD SR AD T&C		Action by	Fri-31-Mar-17	Completed	
Reduction	15/406 - Continue to embed cultural change and new ways of working (transformational rather than as a savings programme)					Action Manager	CSD SR AD T&C		Action by	Tue-31-Mar-20	Completed	
Reduction	15/429 - Continually review capacity and capability within services and the impact upon the workforce of the future					Action Manager	CSD SR AD T&C		Action by	Wed-31-Aug-16	Completed	
Reduction	15/831 - Continue to monitor delay of Programmes and the effect on benefits					Action Manager	CSD SR AD T&C		Action by	Wed-31-Aug-16	Completed	
Reduction	15/837 - Continue to 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	Wed-31-Aug-16	Completed	



Corporate Risk Register

AC App A

Risk Register: **month 6 (April 2016) – detailed**
 Report Date: 27th May 2016 (fs)

Reduction	20/250 - Develop (by Feb 2015) and implement an outline delivery plan for rationalisation of property in line with new ways of working (ongoing)	CD SR	Wed-31-Aug-16								
Reduction	20/403 - Carry out monthly monitoring of communications and engagement plan including key messages and themes (ongoing)	CSD HoC	Wed-31-Aug-16								
Reduction	20/405 - Continue with the implementation plan for Customer Theme in line with new ways of working	CSD ACE Selby	Wed-31-Aug-16								
Reduction	20/461 - Ensure joined up approach is taken between 'Living Well', CYPs Prevention team and Stronger Communities team	Chief Exec	Wed-31-Aug-16								
Reduction	20/462 - Carry out review of governance and areas of future focus for Programme Board	CSD SR AD T&C	Thu-31-Dec-15	Thu-31-Mar-16							
Reduction	20/463 - Revisit the 2020 Vision and Strategy and produce a draft which replaces the previous version and the Council Plan	Chief Exec	Fri-30-Sep-16								
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	H	Services	H	Reputation	H	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/529 - Reprioritisation of savings, further consideration of structures and ways of working									Action Manager	
										All Mgt Board	



Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

Phase 1 - Identification											
Risk Number	20/49	Risk Title	20/49 - Organisational Performance Management					Risk Owner	Chief Exec	Manager	CD SR
Description	Failure to align the performance management framework with the Council strategy and/or use the correct metrics to measure performance results in reduction in service performance, efficiency and effectiveness; reduction in value for money; loss of reputation and suboptimal financial savings						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, benchmarking exercises, Corporate Performance Management Group, review of Q performance reports, self-assessment (initial findings 24/11/15) conducted in advance of corporate peer review and collate an action plan, LGA corporate peer review,						Effectiveness		
Probability	M	Objectives	M	Financial	M	Services	H	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	15/393 - Conduct an LGA corporate peer review						AD SR (BES/CS) & Perf CSD SR AD T&C	Thu-31-Mar-16	Thu-31-Mar-16		
Reduction	15/430 - Carry out strategic support review which includes: - Review of governance arrangements for performance management - Develop a plan aligning strategy with performance to enable effective measurement						AD SR (BES/CS) & Perf	Sun-31-Jul-16			
Reduction	20/464 - Conduct self-assessment (initial findings 24/11/15) in advance of corporate peer review and collate an action plan						AD SR (BES/CS) & Perf	Thu-31-Dec-15	Sun-31-Jan-16		
Reduction	20/466 - Issue guidance for service plans for 2016/17						AD SR (BES/CS) & Perf	Tue-31-May-16			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	M	Services	M	Reputation	M	Category	3
Phase 5 - Fallback Plan											
									Action Manager		
Fallback Plan	20/533 - Fundamental review of approach								CD SR		



Corporate Risk Register

AC App A

Risk Register: **month 6 (April 2016) – detailed**
 Report Date: 27th May 2016 (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; LCS; family intervention team; training strategy; clear supervision process which is audited on a regular basis; customer contact screening team; OFSTED 'good' categorisation; delivery and implementation of the Child Sexual Exploitation (CSE) strategy with the LSCB; HAS - Detailed action plan; Safeguarding review for the County; revised Safeguarding Boards and sub groups linked to new Care Act provisions; 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 in place; risk enablement panel developed; countywide safeguarding general manager in place; testing of initial performance metrics for Safeguarding Board has taken place; safeguarding procedures reviewed linked to consultation in light of the Care Act; safeguarding board performance framework; protocol for the relationship between Adults Social Care (and Children's Trust) and the Health and Wellbeing Board agreed and implemented; risk assessment tool launched;					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 and Families' procedures [CYPS]					CYPS AD C&F	Sun-31-Jul-16					
Reduction	20/375 - Contribute to the delivery and implementation of the Child Sexual Exploitation (CSE) strategy with the LSCB [CYPS]					CYPS C&F HoS&LAC	Sat-31-Oct-15	Sat-31-Oct-15				
Reduction	20/376 - Continue to raise awareness of the escalation procedures relating to children missing and at risk of CSE [CYPS]					CYPS C&F HoS&LAC	Sun-31-Jul-16					
Reduction	20/377 - Ensure all cases of children at risk of CSE are flagged on LCS [CYPS]					CYPS C&F HoS&LAC	Sun-31-Jul-16					
Reduction	20/378 - Ongoing Mgt file audit of case files against established assessment standards and staff supervision files [CYPS]					CYPS C&F SMT	Sun-31-Jul-16					
Reduction	20/379 - Monitoring and management of performance against agreed targets in the SMT action plan [CYPS]					CYPS C&F SMT	Sun-31-Jul-16					
Reduction	20/381 - Agree partnership strategy for Child Sexual Exploitation (CSE) through the LSCB (CYPS)					CYPS C&F HoS&LAC	Thu-30-Jun-16					
Reduction	20/382 - Review of EDT arrangements on a partnership basis (adults, children, Y&NY) (CYPS)					CYPS AD C&F	Thu-30-Jun-16					
Reduction	20/384 - Review of planning structure for Local Safeguarding Board (CYPS)					CYPS C&F SUM	Sat-31-Dec-16					
Reduction	20/385 - Develop an information framework for serious incident data, eg drug death etc [HAS]					HAS AD C&S	Thu-30-Jun-16					



Corporate Risk Register

AC App A

Risk Register: **month 6 (April 2016) – detailed**
 Report Date: 27th May 2016 (fs)

Reduction	20/454 - Agree and implement a protocol for the relationship between Adults Social Care (and Children's Trust) and the Health and Wellbeing Board [HAS]	HAS AD Integration	Wed-31-Aug-16	Mon-30-Nov-15							
Reduction	20/455 - Implementation of new policies and procedures reflecting new Care Act duties; training to complete [HAS]	HAS AD Q&E	Sat-31-Dec-16								
Reduction	20/456 - Continued vigilance to ensure our supervisory body role adheres to good practice and national guidance, evidenced by regular reports to HASLT and members [HAS]	HAS AD Q&E	Thu-30-Jun-16								
Reduction	20/487 - Continue to work with Quality and Engagement team to improve quality assurance; including work with CQC, policies, Health and Healthwatch [HAS]	HAS AD C&S	Wed-31-Aug-16								
Reduction	20/488 - Continue to work with Quality and Engagement team to improve quality assurance; risk assessment tool to be launched [HAS]	HAS AD C&SHAS AD Q&E	Wed-31-Aug-16								
Reduction	20/489 - Ongoing joint work with CYPS to carry out review of approach to domestic abuse and Prevent [HAS]	AD SR (HAS) & ProCHAS AD Q&E	Thu-30-Jun-16								
Reduction	20/490 - Complete training on, and implementation of, new safeguarding procedures (links with action 2/85) above) (HAS)	HAS AD C&S	Thu-30-Jun-16								
Reduction	20/1176 - Ongoing work to implement the concordat following Winterbourne View [HAS]	HAS AD C&S	Tue-31-May-16								
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	H	Services	M	Reputation	H	Category	3
Phase 5 - Fallback Plan											
Fallback Plan	20/545 - Carry out necessary review of approach, target underperforming areas and take on lessons learned from any serious case reviews									Action Manager	CD CYPS CD HAS



Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

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; the North Yorkshire Education Partnership established;					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 - Develop and implement the "Scarborough Education Summit" which collaboratively challenges underachievement						CD CYPS	Fri-30-Sep-16			
Reduction	20/492 - Work closely with the education community to ensure changes proposed in the White Paper neither distract from current improvement activity or result in a deterioration in educational outcomes (ongoing)						CD CYPS	Thu-31-Aug-17			
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	Wed-31-Aug-16			
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	Tue-28-Feb-17			
Reduction	20/1188 - Implement plans to further improve Children in Care educational outcomes						CYPS Ho ELAC	Fri-30-Sep-16			
Reduction	20/1189 - Develop a skills strategy and assessment of needs beginning with Scarborough then roll out to remaining districts in preparation for area review						CYPS AD E&S	Fri-30-Sep-16			
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	Sun-31-Jul-16			
Reduction	20/1197 - Establish stronger links with Further and Higher Education establishments						CYPS AD E&S	Sun-31-Jul-16			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	H	Services	L	Reputation	H	Category	3
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			

Phase 1 - Identification



Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

Risk Number	20/334	Risk Title	20/334 - Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority				Risk Owner	Chief Exec		Manager	BES AD EPU	
Description	Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on the growth and jobs across the whole of North Yorkshire.					Risk Group	Strategic		Risk Type			
Phase 2 - Current Assessment												
Current Control Measures		Devolution proposals submitted to Govt., LEP strategic economic plan in place; NYCC retains the Infrastructure Delivery Steering Group; NYCC wide co-ordination of development needs linked to District plans; local authorities are moving towards a joint committee & considering a combined authority; LA Director group in place; plan detailing powers and funding developed;							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 (ongoing)						Chief Exec	Mon-31-Oct-16				
Reduction	20/398 - Directors of Development Group to support the Devolution deal						CD BES	Mon-31-Oct-16				
Reduction	20/916 - Establish the geography on which to secure Devolution						Chief Exec	Mon-31-Oct-16				
Reduction	20/917 - Develop detailed business cases for all requirements						Chief Exec	Mon-31-Oct-16				
Reduction	20/1397 - Negotiate the economic barriers and opportunities which Devolution can take advantage of with Government						CD BES	Mon-31-Oct-16				
Phase 4 - Post Risk Reduction Assessment												
Probability	L	Objectives	L	Financial		M	Services	L	Reputation	L	Category	5
Phase 5 - Fallback Plan												
Fallback Plan										Action Manager		



Corporate Risk Register

AC App A

Risk Register: month 6 (April 2016) – detailed
Report Date: 27th May 2016 (fs)

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; managers' online H&S training and other modules revised; health and safety function within NYCC (2nd stage) reviewed; Work with City of York Council to agree the new structure for the shared service;						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 (ongoing)						AD SR (CYPS) & Prop	Sun-31-Jul-16			
Reduction	15/249 - Implement the revised directorate H&S action plans in line with the top 10 risks agreed at CRMG and report performance						AD SR (CYPS) & Prop	Sun-31-Jul-16			
Reduction	15/254 - Revise the managers' online H&S training and other modules.						CSD SR HoHSRM	Thu-31-Mar-16	Thu-31-Mar-16		
Reduction	15/255 - Ensure appropriate operating standards of H&S risk assessments exist and are being implemented locally						AD SR (CYPS) & Prop	Sun-31-Jul-16			
Reduction	15/256 - Carry out review of health and safety function within NYCC - 2nd stage						AD SR (CYPS) & Prop	Thu-31-Mar-16	Mon-9-May-16		
Reduction	15/257 - Review and revise the corporate H&S procedures						CSD SR HoHSRM	Sun-31-Jul-16			
Reduction	15/407 - Work with City of York Council to agree the new structure for the shared service						AD SR (CYPS) & Prop	Thu-31-Mar-16	Mon-9-May-16		
Reduction	15/408 - Implement arrangements for H&S function following the agreement of the structure for shared services with City of York Council						AD SR (CYPS) & Prop	Thu-30-Jun-16			
Reduction	15/417 - Carry out review of the health and safety function – 3rd stage						AD SR (CYPS) & Prop	Fri-31-Mar-17			
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		

Phase 1 - Identification



Corporate Risk Register

Risk Register: **month 6 (April 2016) – detailed**
 Report Date: 27th May 2016 (fs)

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 and RMCI; 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 and robustness of resilience plans relating to the public health and social care of the NY population tested;							Effectiveness		
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	H	Category	3
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/460 - Develop and implement an NYCC action plan based on the debrief report recommendations and all multi agency learning (including the flood reporting tool and simplification of information flow) following the Christmas 2015 flooding incident					CSD EPM	Sat-31-Dec-16				
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	Mon-31-Oct-16				
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	Mon-31-Oct-16				
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	L	Financial	H	Services	L	Reputation	M	Category	3
Phase 5 - Fallback Plan											
								Action Manager			
Fallback Plan	20/207 - Review and prioritise resources dependent on nature and impact of event (inc effective media management)							Chief Exec			

