

NORTH YORKSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

30 November 2017

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 October/November. A six monthly review is then carried out in April.
- 3.2 An annual update of the Corporate Risk Register was carried out in November – see attached at **Appendix A**. This involved reviewing the risks, risk controls, risk reductions and risk rankings that had been identified for each of the risks and making amendments to the Register where necessary.

3.3 The significant amendments that were made to the Register since last time are as follows:

New risk

- Commercial Strategy – adding this risk reflects the need to successfully secure commercial opportunities where appropriate.

Deleted risks

- None.

Significantly Changed Risks

- Schools Organisation and Funding – the ranking of this risk has improved from 1:2 to 1:4 as it is felt that the financial impact will slightly improve.
- Health and Safety – the ranking has improved from 3:3 to 3:5 as it is felt that in the event of an incident the impact on reputation can be lowered.

The rankings of all the remaining risks stayed the same (as shown on the summary in the left hand column of **Appendix A**). However please see the table at the bottom of **Appendix A** for an explanation of the left hand column.

3.4 To assist Members interpret **Appendix A**

- Risks are identified and agreed by Management Board during a prep meeting and follow up Board meeting
- Each risk is then 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**) 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 LINKS BETWEEN CORPORATE AND DIRECTORATE RISK REGISTERS

4.1 As indicated previously, the Corporate Risk Register is the culmination of the identification of key significant risks that are identified at Directorate and Service levels. For information and out of interest, 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**.

5.0 ADDITIONAL RISK PRIORITISATION EXERCISES

- 5.1 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:
- Brierley Homes – this company has been set up to develop market housing, initially on surplus Council owned sites, with the primary aim of generating a revenue surplus that can be reinvested for the benefit of the Council’s local taxpayers. The risk register considers risks such as Planning, Procurement and Contract Management.
 - A59 Kex Gill Realignment - due to a history of landslips and instability which have in the past led to unplanned road closures, the County Council has been working to develop proposals to ensure the future resilience of the route. A risk register has been developed to support this work and key risks identified include Environmental Issues, Finance and Planning Submission/Approval.
 - Allerton Waste Recovery Park – the facility near Knaresborough will divert waste from landfill. The amount of waste sent to landfill will be less than 5% of the total waste produced, recycling rates will increase by at least 2.5% and 24MW of electricity will be exported to the National Grid. A risk register relating to the construction phase of this project has been ongoing for some time. As the facility is on schedule to be operational by the end of January

2018, an operational risk register is being developed. The key risks identified for this phase include Waste Volumes, Finance and Communications.

6.0 INSURANCE RENEWALS

6.1 The main County Council's insurance renewals are completed on 1st October each year. The main points to note from this year's renewals are as follows:

- The Liability premium which includes Employer's Liability and Public Liability has increased by 20%. This is because the Personal Injury Discount Rate set by the Government which is applied to serious injury claims has increased thereby increasing insurers' exposure on this type of claim.
- The Motor premium has increased by 15% because the Personal Injury Discount Rate which is applied to serious injury claims has increased thereby increasing insurers' exposure on this type of claim.
- The Material Damage (Property) premium rates have remained the same and although reinstatement costs have increased, the number of properties has reduced, partly because of schools converting to academies.

6.2 These increases have been exacerbated by the increase in Insurance Premium Tax. This rate was increased by the Government from 10% to 12% in the last year. Insurance Premium Tax is added to the premium charged by the insurers.

7.0 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

County Hall, Northallerton

November 2017

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

Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

Phase 1 - Identification												
Risk Number	20/207	Risk Title	20/207 - 2020 North Yorkshire Change Programme and beyond					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			2020 Vision and Strategy in place; 2020 North Yorkshire Programme Plan in place and regularly reviewed/updated; Members workshops & political group sessions completed; briefings of Cabinet; regular Mgt Board/Programme Board meetings; staff communication constantly reviewed via intranet and new 'all staff' e mail Directorate and cross cutting themes programme board continue to meet and follow the governance structure; quarterly meetings with finance ADs and programme managers to align savings against programme budgets; Oracle improvements; Behaviour & skills framework reviewed; LGA corporate peer review; review carried out of governance and areas of future focus for Programme Board; all major change programmes are captured within this Programme to better manage dependencies and resources;									
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	H	Category	I	
Phase 3 - Risk Reduction Actions												
							Action Manager	Action by	Completed			
Reduction	15/54 - Regularly review the ICT strategy in light of changes in the organisation both before and after 2020 (ongoing)						CSD SR AD T&C	Sat-31-Mar-18				
Reduction	15/245 - Embed modern council principles through engagement and delivery of Service Operation Model (SOM), implementation of technology, property and OD measures, and a robust review process to measure impact and improvement. (linked to action 20/250)						CSD SR AD T&C	Wed-31-Oct-18				
Reduction	15/394 - Monitor action plan following peer review (ongoing)						CSD AD SR (ML) CSD SR AD T&C	Sat-31-Mar-18				
Reduction	15/406 - Continue to embed cultural change and new ways of working (transformational rather than as a savings programme)						CSD SR AD T&C	Tue-31-Mar-20				
Reduction	15/429 - Continually review capacity and capability within services and the impact upon the workforce of the future						CSD SR AD T&C	Fri-31-Aug-18				
Reduction	15/831 - Continue to monitor delay of Programmes and the effect on benefits (ongoing)						CSD SR AD T&C	Fri-31-Aug-18				
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)						CSD AD PP	Fri-31-Aug-18				
Reduction	20/250 - Implement the delivery plan for rationalisation of property in line with new ways of working including further refining of plan and securing resources for Northallerton and delivery of plan in Scarborough (linked to action 15/245)						CSD AD SR (AH)	Fri-31-Aug-18				
Reduction	20/403 - Carry out monthly monitoring of communications and engagement plan including key messages and themes (ongoing)						CSD HoC	Fri-31-Aug-18				
Reduction	20/405 - Continue with the implementation plan for Customer Theme in line with new ways of working						Chief Exec	Fri-31-Aug-18				



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

Reduction	20/461 - Monitor joined up approach between 'Living Well', CYPS Prevention team and Stronger Communities team and escalate issues to Programme Board if necessary		CSD SR AD T&C	Fri-31-Aug-18							
Reduction	20/505 - Develop new projects (eg LED street lighting, review of winter maintenance fleet, procurement re-structure and redesign, supporting people) to cover the 4% challenge and innovate new ideas to cover the shortfall in expected savings (ongoing)		CSD Mgt Team	Sat-31-Mar-18							
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	H	Financial	H	Services	H	Reputation	H	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	20/529 - Reprioritisation of savings, further consideration of structures and ways of working									Action Manager	All Mgt Board



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

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; 2020 North Yorkshire Programme & constituent elements including service reviews; review of 2020NY in Members 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); next phase of savings ideas generated; meetings with traded services' managers completed;									
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 - Review specific high-risk base budgets such as HAS Care and Support, SEN Transport and School Improvement in 2017/18						CD SR	Sat-31-Mar-18			
Reduction	20/46 - Ensure effective consultation/communication with staff, public and Members about ongoing savings requirements						All Mgt Board	Sun-30-Sep-18			
Reduction	20/52 - Refresh and carry out a revised plan for reviewing base budgets in 2018/19 on a risk based assessment						CD SR	Sun-31-Mar-19			
Reduction	20/261 - Develop business plan for NY Education Services based on the business plans developed by services						CD SR	Sat-31-Mar-18			
Reduction	20/386 - Approve detailed business plans for each of the associated businesses: NY Education Services, Yorwaste, Property Services etc. by shareholders and put in place a monitoring regime for progress (ongoing)						CD SR	Sat-31-Mar-18			
Reduction	20/402 - Ensure that additional social care funding is used in a sustainable way (ie non recurrent). Further lobbying required with Govt to establish how this dovetails with improved BCF and additional funding post green paper.						CD HAS CD SR	Sat-31-Mar-18			
Reduction	20/491 - Identify and target additional savings through corporate Procurement Strategy (ongoing)						CD SR	Sun-30-Sep-18			
Reduction	20/1190 - Raise profile and lobby Government in relation to DSG and High Needs funding						CD SR	Sat-31-Mar-18			
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 0 (October 2017) – detailed

Next Review due: April 2018

Report Date: 2nd November 2017 (pw)

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 Dir 3/162		
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;									
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	H	Category	I
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	20/467	Test innovations around new models for personal care and support at home					HAS AD Com	Sat-31-Mar-18			
Reduction	20/468	Continue to revise and update a market position statement					HAS AD Com	Fri-31-Aug-18			
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 and info fed into engagement group; pursue opportunities for joint working between HAS and NHS					HAS AD Com	Mon-30-Apr-18			
Reduction	20/470	Re-establish quarterly Partnership and Partner Liaison meetings (market development board), market analysis and mapping and information sharing (Locality Provider Group in place); engagement processes being reviewed					HAS AD Com	Mon-30-Apr-18			
Reduction	20/471	Continue with regular engagement meetings with CQC locally and engage with CQCs national programme of identifying providers where there is significant risk of failure; being reviewed					HAS AD Com	Mon-30-Apr-18			
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; more work being done to enhance regional ways of working					HAS AD Com	Mon-30-Apr-18			
Reduction	20/474	Work with Veritau on audits of individual suppliers (ongoing)					HAS AD Com	Mon-30-Apr-18			
Reduction	20/486	Continue to implement action plan following outcome of heat map exercise and ensure inclusion of NHS and Partners (ongoing)					HAS HoHR	Fri-31-Aug-18			
Reduction	20/492	Review any opportunities to stabilise the market through additional Govt funding given to social care for this purpose (review position each year for next 3 years of funding)					CSD AD SR (AH) HAS AD Com	Sat-31-Mar-18			
Reduction	20/523	2020 Market shaping/development project					HAS AD Com	Sat-31-Mar-18			
Reduction	20/524	Workforce group to develop and support workforce across the sector					HAS HoHR	Sat-31-Mar-18			



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

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Reduction	20/525 - Begin scoping a market improvement team	HAS AD Com	Wed-31-May-17	Mon-31-Jul-17							
Reduction	20/526 - Introduction of the Q&M database and planning for electronic solutions; awaiting provider list renewal (provider list in place); now part of a corporate system change	HAS AD Com	Sun-31-Dec-17								
Reduction	20/1166 - Carry out recruitment for market improvement team	HAS AD Com	Thu-30-Nov-17								
Reduction	20/1188 - Monitor issues caused by the complex partner relationships, meetings and structures and raise at HASLT where appropriate	HAS AD Com	Mon-30-Apr-18								
Phase 4 - Post Risk Reduction Assessment											
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	20/548 - 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 established failure plan.									Action Manager	
										HAS AD Q&E	



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

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		Additional data governance support; Information Governance Strategy including the associated Policy and Procedure Framework; CIGG Action Plan; data breach process; messages from senior management; staff induction; Info Gov on line training; 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 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; targeted phishing campaigns; Information Sharing Protocol in place; SAR - controls include central monitoring of receipt and progress;									
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
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					CD SR CSD ACE BS	Fri-31- Aug-18				
Reduction	15/424 - Review and update service information asset registers in line with policy guidelines					CSD SR AD T&C	Tue-31- Oct-17	Tue-31-Oct-17			
Reduction	15/426 - Ensure individual information sharing agreements completed for each data sharing activity (some agreements are already in place) - (ongoing)					Ho Int Audit	Fri-31- Aug-18				
Reduction	15/431 - Work within services in a prioritised order to ensure information is secure and transferred securely (ongoing)					CSD SR AD T&C	Sat-31- Mar-18				
Reduction	15/432 - Review existing training approach and investigate additional team based reviews to embed practice					CSD SR AD T&C Ho Int Audit	Tue-31- Oct-17	Tue-31-Oct-17			
Reduction	15/433 - Continue communications to staff to ensure good Information Governance including messages from Management Board and associated campaigns (ongoing)					CSD SR AD T&C Ho Int Audit	Fri-31- Aug-18				
Reduction	20/450 - Continue to review information asset registers and target training where appropriate (ongoing)					CSD SR AD T&C Ho Int Audit	Fri-31- Aug-18				
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	L	Financial	M	Services	L	Reputation	M	Category	4



Corporate Risk Register

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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 0 (October 2017) – detailed

Next Review due: April 2018

Report Date: 2nd November 2017 (pw)

Phase 1 - Identification											
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	CD BES		
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	BES 7/174			
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;									
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	M	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/364 - Gain political support both locally and nationally (ongoing)					Chief Exec	Sun-31-Dec-17				
Reduction	20/916 - Establish the geography on which to secure Devolution					Chief Exec	Sun-31-Dec-17				
Reduction	20/917 - Develop detailed business cases for all requirements					Chief Exec	Sun-31-Dec-17				
Reduction	20/1397 - Negotiate the economic barriers and opportunities which Devolution can take advantage of with Government					CD BES	Sun-31-Dec-17				
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	L	Financial	M	Services	M	Reputation	L	Category	4
Phase 5 - Fallback Plan											
								Action Manager			
Fallback Plan	20/551 - Consider a North Yorkshire deal							Chief Exec CD BES			



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

Phase 1 - Identification											
Risk Number	20/205	Risk Title	20/205 - Schools Organisation and Funding				Risk Owner	Chief Exec	Manager	CD CYPS	
Description	Failure to assess and manage the combined effects of changes in the national school policy and funding framework, demographics (both rising and falling as a result of housing market changes) and national and local political circumstances, resulting in a fragmentation of the network of services for children, growing numbers of unsustainable and/or failing schools, insufficient school places, fragmentation due to academisation, increased public dissatisfaction, and loss of confidence in the County Council as local authority.				Risk Group	Strategic	Risk Type				
Phase 2 - Current Assessment											
Current Control Measures	Consistent monitoring of forecast numbers. Links with District Councils and developers over major housing developments (including ISDG work). Cross-directorate "Strategic Priority Schools" approach. Work with the Education Partnership, Keep up to date with current publications, email, etc. Reg review of DfE and other critical websites. Liaison with other LAs. Early assessment of resource implications on new development. Advocacy of NYCC case for funding, new procedures for grant & award acceptance, involvement in appropriate national conferences, participation in DfE priorities when possible, collaboration guidance and toolkit, review of planning areas to explore the level of need; framework for prioritisation of school organisation issues, briefings provided for elected Members and NY Education Partnership; involvement with White Paper strategic board; liaison with Education Funding Agency (EFA), DfE and Regional Schools Commissioner (RSC)										
Probability	H	Objectives	M	Financial	H	Services	M	Reputation	M	Category	I
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/538 - Continue to work with and use effective lobbying channels eg Educational Building and Development Officers Group (EBDOG)					CSD AD SR (AH) CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/539 - Develop arrangements to support the process of academisation, where it has been started, to ensure smooth transfer of schools. Assist groups of schools, where appropriate, to develop locally focused Multi Academy Trusts or other appropriate arrangements					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/540 - Assess implications for the market of changes to early years funding					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/541 - Continue to encourage, support and build capacity to enable schools to work collaboratively to seek to ensure continued viability					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/544 - Ensure consistent approach corporately to infrastructure funding, including CIL					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/545 - Continual review of the estate including maintenance requirement (ongoing)					CSD AD SR (AH)	Tue-31-Jul-18				
Reduction	20/546 - Exploit alternative sources of funding for the delivery of new school spaces and encourage free school applications where appropriate					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/547 - Develop constructive relationships with the Regional Schools Commissioner and receive their practical support					CYPS AD E&S	Tue-31-Jul-18				
Reduction	20/548 - Work with the Property team to mitigate risks to the delivery of the 2016/17 and 2017/18 capital plans arising from the transfer of the contract with Mouchel to an in-house arrangement					CYPS AD E&S	Tue-31-Jul-18				



Corporate Risk Register

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Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	M	Category	4
Phase 5 - Fallback Plan											
										Action Manager	
Fallback Plan	20/629 - Investigate failure and resolve; member briefings; media mgt									CD CYPS	



Corporate Risk Register

Risk Register: **month 0 (October 2017) – detailed**

Next Review due: **April 2018**

Report Date: **2nd November 2017 (pw)**

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 deliver the full integration plans by 2020 with the NHS, in the context of managing 3 ST Plans and failure to develop and implement new models of care. This could result in a negative impact on Devolution proposals, fragmentation of NY partnership planning and delivery arrangements, increased costs and inconsistent / poorer service delivery to local people				Risk Group	Partnerships	Risk Type	CYPS 24/221 HAS 3/180			
Phase 2 - Current Assessment											
Current Control Measures	<p>HAS: Effective HWB partnership with clear governance providing strategic leadership with a shared performance dashboard; chief Officer representation influencing the development of STPs; HASLT locality delivery model in place actively shaping local integration plans; Joint leadership in Harrogate delivering a new model of care through Vanguard, and further developing and implementing joint commissioning and potentially delivery in Scarborough; agreement in 2016/17 to protect social care through the Better Care Fund; agreement with NY Commissioner Forum to develop joint commissioning arrangements that will include CHC and other areas; Health and Well-being Strategy in place; corporate task and finish group for DToC in place; HWB development sessions; Integration and Better Care Fund Plan 2017/19 developed with CCGs and agreed at Health and Wellbeing Board; 2020 Health Programme focussing on integration established;</p> <p>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 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' leads for children for commissioning affecting children and young people and their families; services recommissioned for 0-5 and 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; specifications for 0-5 healthy child service in place; 'Future in Mind' strategy reflects the needs of Children and Young People in N Yorkshire; tender process for future contracts; analyses of children's health in N Yorkshire, raising awareness and seeking actions from partner agencies to mitigate risks around children's physical and mental health and to inform commissioning decisions;</p>										
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
Reduction	20/60 - Ensure that we account for the BCF funding as per the Regulations on a quarterly basis					Action Manager	CSD AD SR (AH)	Action by	Fri-31-Aug-18	Completed	
Reduction	20/362 - Ensure NHS partners are fully aware of the democratic and political environment they are operating within and liaise with Scrutiny colleagues to ensure a positive outcome (ongoing)					Action Manager	CD HAS	Action by	Thu-31-May-18	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 (ongoing)					Action Manager	CD HAS	Action by	Thu-31-May-18	Completed	
Reduction	20/399 - Develop and implement outline integration plans with CCGs (development completed 10/17) and obtain approval for the Integration and Better Care Fund Plan 2017/19 from NHS England					Action Manager	HAS AD H&I	Action by	Sun-31-Dec-17	Completed	
Reduction	20/402 - Ensure that additional social care funding is used in a sustainable way (ie non recurrent). Further lobbying required with Govt to establish how this dovetails with improved BCF and additional funding post green paper.					Action Manager	CD HAS CD SR	Action by	Sat-31-Mar-18	Completed	
Reduction	20/451 - Agree and implement new models of care in all CCG localities (2 localities Harrogate and Scarborough by Sept 2017 identified and progressing, and remaining 3 localities by Sept 2018)					Action Manager	CD HAS	Action by	Sun-30-Sep-18	Completed	



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Reduction	20/452 - Engage wider HASLT in testing the implications of different integration models	HAS AD Com HAS AD H&I	Thu-31-May-18								
Reduction	20/453 - Continue to monitor the impact of the challenge of having 3 STPs, including through Health scrutiny	HAS AD H&I	Thu-31-May-18								
Reduction	20/457 - Improve the DToC (Delayed Transfer of Care) performance to avoid financial penalties and reputational issues. Put in place affordable DToC (Delayed Transfer of Care) plans that avoid financial penalties	HAS AD C&S HAS AD Com	Thu-31-May-18								
Reduction	20/458 - Consider the viability of local Risk Management Agreements with NHS Partners for integration plan(s), locality plan(s) and joint commissioning arrangements (ongoing)	CSD AD SR (AH) HAS AD H&I	Fri-31-Aug-18								
Reduction	20/459 - Review governance arrangements for the Health and Wellbeing Board to ensure delivery of the joint H & W Strategy	HAS AD H&I	Sat-31-Mar-18								
Reduction	20/477 - Continue to ensure Healthy Child team and Prevention team collaborate effectively to deliver improved outcomes of Children, Young People and Families	CYPS C&F HoPrev	Sun-30-Sep-18								
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 (ongoing)	CD CYPS	Sun-30-Sep-18								
Reduction	20/527 - Work with the commissioned provider to ensure Mental Health services are effective (ongoing)	CYPS C&F HoRes	Tue-31-Jul-18								
Reduction	20/528 - Address lessons learned from the SEND inspection to strengthen the partnership with Health (ongoing)	CYPS AD Incl	Tue-31-Jul-18								
Reduction	20/529 - Continuously improve partnership with CYP & Families, Health Commissioners and SEMH providers through SEMH steering group and SEMH implementation plan	CYPS Incl HoE	Tue-31-Jul-18								
Reduction	20/531 - Hold regular contract monitoring and quality assurance meetings with providers including on site commissioning visits	CYPS S&C CMH	Sat-30-Jun-18								
Reduction	20/542 - Carry out financial modelling and continue dialogue between Integration and Health (as and when required and ongoing)	CSD AD SR (HE)	Fri-31-Aug-18								
Reduction	20/565 - Develop and agree the scope for a joint commissioning programme	HAS AD Com HAS AD H&I	Sat-31-Mar-18								
Reduction	20/566 - Establish an Integrated Planning and Commissioning Board with Scarborough CCG	CSD AD SR (AH) HAS AD H&I	Thu-31-Aug-17	Sat-30-Sep-17							
Reduction	20/1161 - Review and potentially revise general capacity and resources to achieve health integration opportunities	HAS AD H&I	Thu-31-Aug-17	Thu-31-Aug-17							
Reduction	20/1189 - Carry out preparations for potential CQC area review regarding integration	HAS LT	Sun-31-Dec-17								
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 5 - Fallback Plan											
Fallback Plan	20/210 - Escalation to CMB and Executive Members, further engagement with senior tiers in NHS locally, regionally and nationally.									Action Manager	
										CD HAS	



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Phase 1 - Identification											
Risk Number	20/189	Risk Title	20/189 - Safeguarding Arrangements				Risk Owner	Chief Exec	Manager	CD HAS CD CYPS	
Description	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.					Risk Group	Safeguarding	Risk Type	CYPS 24/250 HAS 3/27		
Phase 2 - Current Assessment											
Current Control Measures		<p>CYPS – LSCB Safeguarding website; regularly reviewed procedures; practice standards issued to teams to support consistent practice; monthly performance data which is monitored regularly to seek assurance over key performance headlines; case file audit process; manager authorisation of all assessments; ICS; newly formed integrated family support service; training strategy; clear supervision process which is audited on a regular basis; strengthened Multi agency screening team (MAST); OFSTED 'good' categorisation; delivery and implementation of the VEMT approach with the LSCB; working with colleagues and the CCG lead to ensure appropriate resources available for complex young people;</p> <p>HAS - Detailed action plan; Safeguarding general manager and team; strengthening of Safeguarding policy team; case file audit and review; independent chair to Safeguarding Board in place; risk enablement panel in place and being reviewed; countywide safeguarding general manager in place; testing of initial performance metrics for Safeguarding Board has taken place further developing performance activity; initial safeguarding procedures reviewed linked to consultation in light of the Care Act and are being reviewed again; safeguarding board performance framework; Q&E [protocol for the relationship between Adults Social Care (and Children's Trust) and the Health and Wellbeing Board agreed and implemented;] information framework for serious incident data, eg drug death etc in place</p>									
Probability	M	Objectives	H	Financial	M	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	Sat-30-Jun-18			
Reduction	20/376 - Continue the new developments with the MAST to strengthen responses to children and young people who go missing or who are vulnerable to CSE by improved intelligence and information sharing arrangements [CYPS]						CYPS C&F HoS&LAC	Sat-30-Jun-18			
Reduction	20/377 - Ensure where there is a concern that a young person is being exploited that the Bedfordshire risk assessment tool is always completed [CYPS]						CYPS C&F HoS&LAC	Tue-31-Jul-18			
Reduction	20/378 - Ongoing Mgt file audit of case files against established assessment standards and staff supervision files [CYPS]						CYPS C&F SMT	Sat-30-Jun-18			
Reduction	20/379 - Monitoring and management of performance against agreed targets in the SMT action plan [CYPS]						CYPS C&F SMT	Sat-30-Jun-18			
Reduction	20/382 - Feed into review of EDT arrangements (adult lead); main submission into review made but ongoing liaison will continue [CYPS]						CYPS AD C&F	Sat-30-Jun-18			
Reduction	20/384 - Introduction of 'Practice Weeks' where managers will visit locations to observe and review practice [CYPS]						CYPS AD C&F	Sat-30-Jun-18			
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 H&I	Mon-30-Apr-18			



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Reduction	20/487 - Continue to work with Quality and Engagement team to improve quality assurance; including work with CQC, Health and Healthwatch [HAS]	HAS AD C&S HAS AD H&I	Thu-31-May-18								
Reduction	20/489 - Ongoing joint work with CYPS to carry out review of approach to domestic abuse and Prevent [HAS]	HAS AD H&I	Sat-31-Mar-18								
Reduction	20/490 - Complete training in respect of safeguarding policies and procedures and wider awareness training for groups such as elected Members; Member awareness training still to consider; new policies and procedures now in place and to be worked through in the coming year [HAS]	HAS AD C&S	Thu-31-May-18								
Reduction	20/532 - Bringing in further experienced staff whenever possible to address significant vacancies in the structure [HAS]	HAS AD C&S	Thu-31-May-18								
Reduction	20/534 - Carry out the supervisory body role for DoLS to ensure the system is as effective as possible within existing resources [HAS]	HAS AD H&I	Mon-30-Apr-18								
Reduction	20/535 - Continue to ensure partners are fully engaged with Safeguarding boards centrally and locally, particularly new health partners (CCGs) - ongoing, two board development days held [HAS]	HAS AD C&S HAS AD H&I	Thu-31-May-18								
Reduction	20/536 - Embedding safeguarding work to deliver the Transforming Care programme incl. embedding the care act role of Principal Social Worker and Safeguarding Board Manager [HAS]	HAS AD C&S	Thu-31-May-18								
Reduction	20/595 - Ensure in house provider workforce have appropriate training and development in this area [HAS]	HAS C&S Ho PS	Thu-31-May-18								
Reduction	20/596 - Ensure we have the ability to embed the lessons learned from serious case reviews including identification of authors of independent reports [HAS]	HAS AD C&S	Thu-31-May-18								
Reduction	20/597 - External audit (ADASS review) of safeguarding activities to assist with benchmarking and identifying areas of improvement [HAS]	HAS AD C&S	Thu-31-May-18								
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	H	Financial	M	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		



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Phase 1 - Identification											
Risk Number	20/219	Risk Title	20/219 - Commercial Strategy				Risk Owner	Chief Exec	Manager	CSD Mgt Team	
Description	Failure to successfully secure commercial opportunities within the Council resulting in lost net income to support budget savings, unresilient service, unskilled and insecure workforce.					Risk Group		Risk Type			
Phase 2 - Current Assessment											
Current Control Measures		Commercial services to Schools Board; Commercial Board; draft strategy approved by Commercial Board; action plan in place; initial commercial challenge sessions have taken place; website with ability of customers to buy on line; relationship managers liaise between the Heads of Traded Services and customers; external critical friend; Shareholder Sub Committee of Executive created; Shareholder Board created to support Shareholder Sub Committee;									
Probability	H	Objectives	M	Financial	M	Services	M	Reputation	L	Category	2
Phase 3 - Risk Reduction Actions											
							Action Manager	Action by	Completed		
Reduction	15/208 - Collective meeting of Brierley Group to be arranged to share Vision and direction						CSD AD SR (ML)	Sun-31-Dec-17			
Reduction	15/246 - Finalise Commercial Strategy and communicate to stakeholders including staff						CSD AD SR (ML)	Sun-31-Dec-17			
Reduction	15/247 - Production of Brierley Group Annual report						CSD AD SR (ML)	Mon-30-Apr-18			
Reduction	15/503 - Carry out commercial challenge sessions to monitor progress against commercial targets in the Autumn and at the end of the financial year						CSD AD SR (ML)	Sat-31-Mar-18			
Reduction	15/521 - Invest cash in commercial opportunities where appropriate						CSD AD SR (KI)	Sat-31-Mar-18			
Reduction	15/522 - Determine selection criteria to win bids for commercial opportunities to optimise rewards						CSD AD SR (ML)	Sat-31-Mar-18			
Reduction	20/245 - Production of Brierley Group Business Plan						CSD AD SR (ML)	Sat-31-Mar-18			
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	L	Category	4
Phase 5 - Fallback Plan											
								Action Manager			
Fallback Plan	15/550 - Review financial position and invoke budget cuts as necessary								CSD Mgt Team		

Corporate Risk Register

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Phase 1 - Identification											
Risk Number	20/206	Risk Title	20/206 - Growth			Risk Owner	Chief Exec	Manager	CD BES		
Description	Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage, and within the context of two-tier local government structure and wider macro-economic policy and processes. This results in an inability to attract, retain and grow businesses, increase the house building rate, raise living standards and increase spending power.				Risk Group	Strategic	Risk Type	BES 7/232			
Phase 2 - Current Assessment											
Current Control Measures			Direct contribution and support, including through provision of accountable body function, to the YNYER Local Enterprise Partnership; Establishment of an Economic Growth Function within BES; Proactive engagement in LGNY partnership working including through Directors of Development, Chief Housing Officers, and Economic Development Officer Groups; Lead role in enabling and developing YNYER Spatial Framework; Lead role in supporting and developing the NYCC Infrastructure Delivery Steering Group/Growth Plan Steering Group; Lead role in initiating and developing the NYCC Economic Growth Plan; Work to secure Combined Authority / Devolution deal with Government; NYCC Economic Growth Plan completed and approved by Executive; collaborative working arrangements with District Councils in place; the YNYERH Spatial Framework is in place as a basis for further development work								
Probability	M	Objectives	M	Financial	H	Services	H	Reputation	H	Category	2
Phase 3 - Risk Reduction Actions											
					Action Manager	Action by	Completed				
Reduction	20/549 - Carry out corporate implementation of NYCC Economic Growth and Delivery Plan (annual review of progress); growth plan approved now need to produce, implement and monitor an action plan				BES AD GP&TS BES GP&TS HoSP&EG	Sun-31-Dec-17					
Reduction	20/550 - Embed enhanced collaborative working arrangements with District Councils (annual review of progress) - ongoing				BES AD GP&TS	Sun-30-Sep-18					
Reduction	20/551 - Ensure further detailed stakeholder engagement and development of the YNYER Spatial Framework to enable effective long-term planning and investment of infrastructure for growth.				BES AD GP&TS	Sat-31-Mar-18					
Reduction	20/552 - Maintain good working relationship with the LEP (ongoing)				CD BES	Sun-30-Sep-18					
Reduction	20/553 - Understand and investigate any impacts of Brexit and ensure opportunities are taken				BES AD EPU CD BES	Sun-30-Sep-18					
Reduction	20/598 - Deliver the natural capital investment strategy environmental enhancement project via the Local Nature Partnership				BES AD GP&TS	Sat-31-Mar-18					
Reduction	20/599 - Continue to monitor the Devolution agenda and communication with stakeholders to maximise opportunities (ongoing)				BES AD GP&TS	Sun-30-Sep-18					
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	M	Category	4



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Phase 5 - Fallback Plan		Action Manager
Fallback Plan	20/553 - Review and revise existing arrangements for sustainable economic growth	CD BES



Corporate Risk Register

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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; managers' and employees' online H&S training and other modules revised; health and safety function within NYCC (3rd stage) reviewed; new structure for the shared service with City of York Council agreed and implemented;										
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)						CSD AD SR (AH)	Fri-31-Aug-18			
Reduction	15/249 - Implement the revised directorate H&S action plans in line with the top 10 risks agreed at CRMG and report performance on key priorities						CSD AD SR (AH)	Fri-31-Aug-18			
Reduction	15/255 - Ensure appropriate operating standards of H&S risk assessments exist and are being implemented locally (linked to 15/249 above)						CSD AD SR (AH)	Fri-31-Aug-18			
Reduction	15/257 - Review and revise the corporate H&S procedures alongside alignment with the safety management system						CSD SR HoHSRM	Fri-31-Aug-18			
Reduction	15/408 - Implement arrangements for H&S function following the agreement of the structure for shared services with City of York Council						CSD AD SR (AH)	Mon-31-Jul-17	Sat-1-Jul-17		
Reduction	15/417 - Consider H&S implications of significant changes for delivery of services within the Council and factor into Directorate H&S action plans						CSD AD SR (AH)	Fri-31-Aug-18			
Phase 4 - Post Risk Reduction Assessment											
Probability	L	Objectives	M	Financial	M	Services	M	Reputation	M	Category	5
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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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 and beyond	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	H	H	H	H	H	1	12	31/03/2018	M	H	H	H	H	2	Y	All Mgt Board
◀▶	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	8	31/03/2018	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	H	M	H	1	16	30/11/2017	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	7	31/03/2018	M	L	M	L	M	4	Y	CD SR
◀▶	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	CD BES	H	M	H	M	M	1	4	31/12/2017	M	L	M	M	L	4	Y	Chief Exec CD BES



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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		
▼	20/205 - Schools Organisation and Funding	Failure to assess and manage the combined effects of changes in the national school policy and funding framework, demographics (both rising and falling as a result of housing market changes) and national and local political circumstances, resulting in a fragmentation of the network of services for children, growing numbers of unsustainable and/or failing schools, insufficient school places, fragmentation due to academisation, increased public dissatisfaction, and loss of confidence in the County Council as local authority.	Chief Exec	CD CYPS	H	M	H	M	M	1	9	31/07/2018	M	M	M	M	M	4	Y	CD CYPS
◀▶	20/47 - Partnership and Integration with the NHS	Failure to deliver the full integration plans by 2020 with the NHS, in the context of managing 3 ST Plans and failure to develop and implement new models of care. This could result in a negative impact on Devolution proposals, fragmentation of NY partnership planning and delivery arrangements, increased costs and inconsistent / poorer service delivery to local people	Chief Exec	CD HAS	M	M	H	M	M	2	24	31/12/2017	M	M	H	M	M	2	Y	CD HAS
◀▶	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	M	M	H	2	19	31/03/2018	L	H	M	M	H	3	Y	CD CYPS CD HAS
- new -	20/219 - Commercial Strategy	Failure to successfully secure commercial opportunities within the Council resulting in lost net income to support budget savings, unresilient service, unskilled and insecure workforce.	Chief Exec	CSD Mgt Team	H	M	M	M	L	2	7	31/12/2017	M	M	M	M	L	4	Y	CSD Mgt Team



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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
◀▶	20/206 - Growth	Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage, and within the context of two-tier local government structure and wider macro-economic policy and processes. This results in an inability to attract, retain and grow businesses, increase the house building rate, raise living standards and increase spending power.	Chief Exec	CD BES	M	M	H	H	H	2	7	31/12/2017	M	M	M	M	M	4	Y	CD BES
▼	20/389 - Health and Safety	Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution	Chief Exec	CD SR	L	M	M	M	H	3	7	31/08/2018	L	M	M	M	M	5	Y	CSD SR HoHSRM

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

Linking of Directorate risks to the Corporate risk register November 2017

Health and Adult Services Risk Register
<p>Cultural Change</p> <p>Failure to change the Directorate culture at the same time as implementing the HAS Vision and the 2020 Transformation Programme for HAS by 2020 resulting in financial challenges and unmet savings, staff unclear about their roles and an inability to implement new ways of working.</p>
<p>Financial Pressures</p> <p>Financial pressures arising from difficulties in delivering HAS2020 Savings requirements, managing in year financial overspends, Better Care Fund contributions, market pressure and complexity of client needs.</p>
<p>Major Failure due to Quality and/or Economic Issues in the Care Market</p> <p>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.</p>
<p>Information Governance and Health and Safety</p> <p>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>Partnership and Integration with the NHS</p> <p>Failure to deliver the full integration plans by 2020 with the NHS, and in the context of managing 3 ST Plans. This could result in a negative impact on Devolution proposals, fragmentation of NY partnership planning and delivery arrangements and inconsistency in service delivery to local people.</p>
<p>Safeguarding Arrangements</p> <p>Failure to have an effectively monitored, robust, Safeguarding regime and partnership arrangements in place and ensure that we fulfil our wider lead authority role (under the Care Act).</p>

Central Services Risk Register
<p>2020 North Yorkshire Programme and beyond</p> <p>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.</p>
<p>Central Services Savings Plan</p> <p>Failure to deliver the Central Services savings plan for the duration of the programme (up to 2019) resulting in inability to meet the budget, rationalise support services and enable the programme.</p>
<p>Information Governance</p> <p>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.</p>
<p>Commercial Strategy</p> <p>Failure to successfully secure commercial opportunities within the Council resulting in lost net income to support budget savings, unresilient service, unskilled and insecure workforce.</p>
<p>Health & Safety</p> <p>Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution.</p>

Corporate Risk Register		Rank	
2020 North Yorkshire Change Programme and beyond			
Failure to successfully implement the Programme and Modern Council ways of working.	1	2	
Funding Challenges	1	2	
Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade.			
Major Failure due to Quality and/or Economic Issues in the Care Market	1	2	
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.			
Schools Organisation and Funding	1	4	
Failure to assess and manage the combined effects of changes in the national school policy and funding framework, demographics and national and local political circumstances.			
Information Governance	1	4	
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			
Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority	1	4	
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.			
Partnership and Integration with the NHS	2	2	
Failure to deliver the full integration plans by 2020 with the NHS, in the context of managing 3 ST Plans and failure to develop and implement new models of care.			
Safeguarding Arrangements	2	3	
Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.			
Commercial Strategy	2	4	
Failure to successfully secure commercial opportunities within the Council resulting in lost net income to support budget savings, unresilient service, unskilled and insecure workforce.			
Growth	2	4	
Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage.			
Health and Safety	3	5	
Major Corporate Health and Safety failure resulting in injuries, claims, reputational and service delivery impact and possible prosecution.			

Children and Young People's Service Risk Register
<p>Planning and Cultural Change with CYPS to deliver 2020 North Yorkshire and Address National Changes</p> <p>Failure to embed a strong change culture, processes and supporting capacity within CYPS to deliver 2020 North Yorkshire and address national funding and policy changes.</p>
<p>Schools Organisation and Funding</p> <p>Failure to assess and manage the combined effects of changes in the national school policy and funding framework, demographics (both rising and falling as a result of housing market changes) and national and local political circumstances.</p>
<p>Information Governance</p> <p>Failure to ensure that good information governance arrangements are in place throughout the Directorate resulting in data breach, possible prosecution, claims, media attention, fines.</p>
<p>Partnership and Integration with Health</p> <p>Failure to develop and implement new models of care that will provide better outcomes for children and young people and local communities. This failure would have a negative impact on the development of integrated services, give rise to increased costs to CYPS and cause the loss of opportunities that joint provision may offer.</p>
<p>Safeguarding Arrangements</p> <p>Failure to have a robust approach to Safeguarding is in place results in risk to vulnerable children, adults and families and not protecting them from harm.</p>

Business and Environmental Services Risk Register
<p>Delivering Change Programmes within BES</p> <p>Failure to embed a strong change culture, processes and supporting capacity to deliver ongoing programmes of change in BES e.g. the BES 2020 Change Programme.</p>
<p>Statutory Duties</p> <p>Failure to carry out statutory duties or meet statutory deadlines (e.g. Health and Safety, safe guarding, information governance, prevention of waste pollution, planning responsibilities, statutory property related issues, driver/vehicle guidance) resulting in Corporate Manslaughter, increased cost/claims, fines/prosecution and criticism.</p>
<p>Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority</p> <p>Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on the growth and jobs across North Yorkshire.</p>
<p>Growth</p> <p>Failure to deliver the ambition of Sustainable Economic Growth through the delivery of the right housing, transport, and connectivity infrastructure, whilst protecting the outstanding environment and heritage</p>