

**AUDIT COMMITTEE**

20 December 2019

**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 and Chief Executive of the County Council formally approved a revised Corporate Risk Management Policy earlier this year 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 also carried out in March/May.
- 3.3 Since the last report to this Committee in December 2018, 2 reviews and updates of the Corporate Risk Register have been carried out. There have been changes made and particularly at the six monthly review in April – see attached at **Appendix A**. The updates 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.  
At the annual review in November, we also reviewed and revised the corporate financial impact thresholds/risk appetite of the Council. In the present financial

climate and Council's landscape of activities it seemed appropriate to increase them. The financial thresholds/risk appetite have/has changed as follows:

	<b>Previously</b>		<b>Current</b>
Low	up to £500,000	→	up to £2m
Medium	up to £2.5m	→	up to £5m
High	over £2.5 m	→	over £5m

3.3 The significant amendments that were made to the Register since December 2018 are as follows:

#### **New risks**

- Schools Funding Challenges – this risk was added to the register in April as a result of the funding pressures facing schools, although this risk dovetails with the overall Funding Challenges risk for the Council. It is worth noting that the ranking has decreased at the review in November as the financial impact for the Council is now considered Medium.

#### **Deleted risks**

- Schools Organisation and Funding – this risk has been retained at Directorate level, and the emphasis at corporate level is on the funding challenges for schools.

#### **Significantly Changed Risks**

- None.....although the Committee may wish to note the following:
  - The Information Governance risk has increased its 2<sup>nd</sup> ranking to 2 due to an increase in the impacts to High, as it is considered necessary to move the probability to High because breaches continue to occur.
  - The Transformation Programme risk is moving into the Beyond 2020 stage with transformational themes and business cases of Assess and Decide; Resilience and Wellbeing; Modern Council + and Environment being developed.

The rankings of all the remaining risks stayed the same (as shown on the summary in the left hand column of **Appendix A**). 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 by Management Board during a prep meeting and further discussion
- 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 risk from happening 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:

- UCI Cycling World Championships - the hosting of the prestigious championships centred on Harrogate in September was supported by regular risk workshops throughout the planning period. Key risks identified were communication and engagement with local residents and businesses, preparation and management of the race route and ensuring that essential council services continued to be provided throughout the event.
- Highways Teckal - support was provided to the project management team in developing the risk management arrangements for this key development involving the setting up of a Teckal company to provide highways maintenance services throughout the county. Key risks identified were timescales to ensure the services would be ready in time for the ending of the existing contract, communication with internal and partner staff, TUPE issues and project budget.
- Harrogate Care Village - a risk register was developed to be included in the business case for building a facility for dementia patients in partnership with

Tees Esk Wear Valley NHS Trust. Initial risks included access to appropriately skilled internal resources, considerations of staffing arrangements for the facility given local care labour market issues and ensuring effective partnership working with the NHS Trust.

## 6.0 RISK MANAGEMENT BENCHMARKING EXERCISE

6.1 The Council took part in a risk management benchmarking exercise this year. The comparison was made with 5 other similar Benchmarking Club members. This exercise has been designed as a performance improvement tool and its purpose is to help to raise the standards of risk management within an organisation. The model used breaks down risk management activity into seven strands:

- A. Leadership and management
- B. Policy and strategy
- C. People
- D. Partnerships and shared resources
- E. Processes
- F. Risk handling and assurance
- G. Outcomes and delivery

6.2 The results can be interpreted as the basis of evidence and assurance of the standard of risk management that the Council has reached, along with a comparison with others within the public sector.

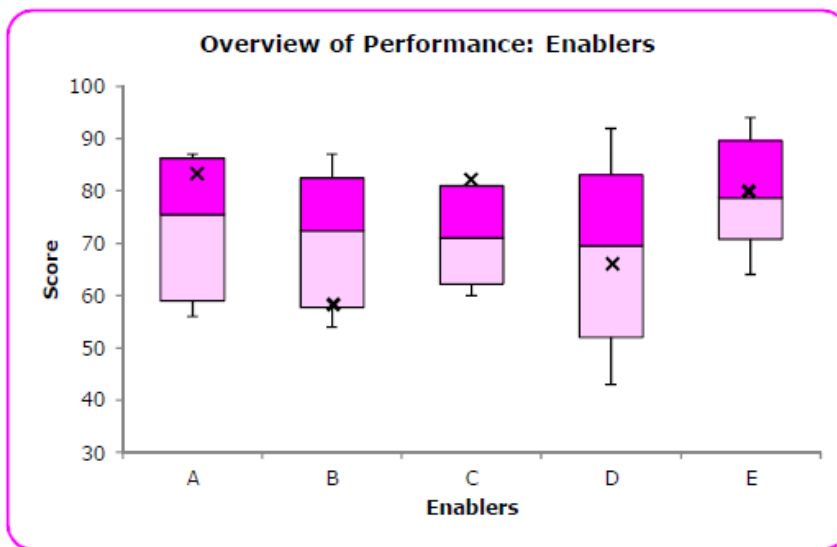
The different maturity bands are Awareness, Happening, Working, Embedded & Integrated and Driving. A summary of the results for the Council is as follows:

<b>Enablers</b>		Awareness	Happening	Working	Embedded & Integrated	Driving
Leadership & Management		Awareness	Happening	Working	Embedded & Integrated	Driving
Policy & Strategy		Awareness	Happening	Working	Embedded & Integrated	Driving
People		Awareness	Happening	Working	Embedded & Integrated	Driving
Partnerships & Shared Resources		Awareness	Happening	Working	Embedded & Integrated	Driving
Processes		Awareness	Happening	Working	Embedded & Integrated	Driving
<b>Results</b>		Awareness	Happening	Working	Embedded & Integrated	Driving
Risk Handling & Assurance		Awareness	Happening	Working	Embedded & Integrated	Driving
Outcomes & Delivery		Awareness	Happening	Working	Embedded & Integrated	Driving

The Council's only lower scoring strand at 59% compared to other Councils is in Policy and Strategy. This related primarily to not referencing the Council's risk appetite in both the Policy and Strategy. However in practice we do refer to risk appetite and use the thresholds as described in **paragraph 3.4** above.

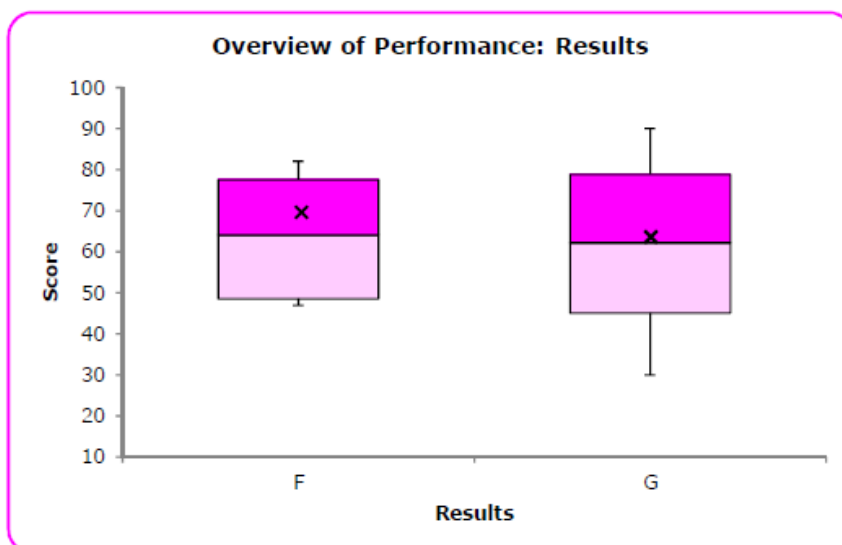
Management Board agree the corporate risk appetite/thresholds each year as part of their major risk review exercise. Each Directorate is then able to set their risk appetite/thresholds up to but not exceeding the Corporate cap. Services within each Directorate are able to set their own risk appetite/thresholds up to but not exceeding their Directorate cap. This enables Directorates and Services to decide appropriate and proportionate boundaries for risk taking, whilst also ensuring that Services are clear that managed risk taking is an acceptable part of service delivery and are encouraged to not be over cautious. In order to improve in the Policy and Strategy strand in future, we will make particular reference to risk appetite.

- 6.3 For information the graphs below portray a general overview of performance for Enablers and Results for the Council, compared with the other 5 members of the Benchmarking Club. The graphs show the minimum score, lower quarter, average, upper quarter and maximum score. The Council's position is marked with a black "x".



**Level Guide:**

Awareness	<20%
Happening	20 - 45%
Working	45 - 70%
Embedded & Integrated	70 - 85%
Driving	85%+



## 7.0 RISK MANAGEMENT AWARD

7.1 Finally, the Council submitted an entry for the Operational Risk award as part of the ALARM International Risk Awards this year.

The Operational Risk Award recognises innovative management of operational risk including risks that affect an organisation's day-to-day service delivery, those that impact on efficiency, health and safety, governance, insurable risk and effective business continuity.

Our entry was based upon the Transformation Programme which made the key decision to put risk at the heart of its endeavours. As we know...the Council has delivered a significant cultural change and made significant savings over the past five years, all whilst protecting the provision of essential front line services.

The esteemed ALARM Risk Awards are highly regarded as a measure of excellence in the management of risk and insurance in the public service and community organisations. The Awards are an invaluable opportunity for recognition; and in this particular case for North Yorkshire County Council.

### 7.0 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  
December 2019

**Author of report:** Fiona Sowerby, Corporate Risk and Insurance Manager  
Tel 01609 532400

# Corporate Risk Register

# Appendix A

Risk Register: **month 0 (November 2019) – summary**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Change	Risk Title	Identity Risk Description	Person		Classification												Fallback Plan			
			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
◀▶	<b>20/235 - Brexit Arrangements</b>	The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.	Chief Exec	All Mgt Board	H	H	H	H	M	1	24	31/01/2020	H	H	H	H	M	1	Y	Chief Exec
▲	<b>20/187 - Information Governance</b>	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	9	31/12/2019	H	L	M	L	M	2	Y	CD SR
◀▶	<b>20/207 - Transformation Programme</b>	Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts	Chief Exec	CD SR	H	H	H	H	H	1	14	31/01/2020	M	H	H	H	H	2	Y	All Mgt Board
◀▶	<b>20/1 - Funding Challenges</b>	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	9	31/01/2020	M	H	H	M	M	2	Y	All Mgt Board
◀▶	<b>20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market</b>	Major failure of provider/key 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.	Chief Exec	CD HAS	H	M	H	M	H	1	15	30/04/2020	H	M	M	M	M	2	Y	CD HAS
◀▶	<b>20/236 - Opportunities for Devolution and Growth in North Yorkshire</b>	Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage, resulting in reduced investment and impact on the growth and jobs, inability to attract, retain and grow businesses and raise living standards across North Yorkshire	Chief Exec	CD BES	H	M	H	H	H	1	13	31/03/2020	M	M	M	M	M	4	Y	CD BES Chief Exec
▼	<b>20/239 - Schools Funding Challenges</b>	Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools; poor financial management or failure to act in a timely manner by governors/head teachers DfE impose further restrictions on LA financial freedoms, results in potential accumulated deficits. Lack of investment in special provision such as special schools results in potential increased costs.	Chief Exec	CD CYPS	H	M	M	H	H	1	10	31/12/2019	M	M	M	M	M	4	Y	CD CYPS
◀▶	<b>20/47 - Partnership and Integration with Health</b>	Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact	Chief Exec	CD HAS	M	M	H	M	M	2	17	31/01/2020	M	M	H	M	M	2	Y	CD HAS


# Corporate Risk Register

# Appendix A

Risk Register: **month 0 (November 2019) – summary**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Identity			Person		Classification											Fallback Plan				
Change	Risk Title	Risk Description	Risk Owner	Risk Manager	Pre						RR	Next Action	Post						FBPlan	Action Manager
					Prob	Obj	Fin	Serv	Rep	Cat	RRs	Prob	Obj	Fin	Serv	Rep	Cat			
		on the customer experience and the possibility of fragmented care and poor outcomes																		
	<b>20/189 - Safeguarding Arrangements</b>	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	<b>2</b>	16	31/03/2020	L	H	M	M	H	<b>3</b>	Y	CD CYPS CD HAS



# Corporate Risk Register

Risk Register: month 0 (November 2019) – detailed

Next Review due: April 2020

Report Date: 19<sup>th</sup> November 2019 (pw)

Phase 1 - Identification											
Risk Number	20/235	Risk Title	20/235 - Brexit Arrangements			Risk Owner	Chief Exec	Manager	All Mgt Board		
Description	The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.			Risk Group	Strategic	Risk Type					
Phase 2 - Current Assessment											
Current Control Measures											
<p>Guidance on how to prepare for Brexit issued on specific areas such as trade and procurement, and funding programmes by the Government; NYLRF; regular LRF sitreps returns to MHCLG; regular sitreps from council to MHCLG (collated regionally), business continuity plans in place; review by LRF of reasonable worst case scenarios</p> <p><b>Workforce</b> - LGA submission on care sector recruitment put forward; no change in employment law; confirmation that EU citizens can work in the UK until Dec 2020 with wrap around reassurance and support for applications for settled status being provided by NYCC;</p> <p><b>LEP</b> - guarantee of continued funding agreed for projects before Brexit including rural development; domestic legislation to preserve EU law in relation to farm payment to be put in place;</p> <p><b>State Aid</b> - current approvals for state aid will continue to apply and such acceptances by the European Commission will remain valid and will be transposed into UK law.</p> <p><b>Public Health</b> - domestic legislation to preserve EU law in relation to labelling tobacco products and e cigarettes local policies with partners to continue delivery in place;</p> <p><b>Procurement</b> – Many of the processes and procedures will remain the same, but with the Minister for the Cabinet Office replacing current EU reporting/governance. The requirement for fair, open and transparent competition will remain so no favoured nations and use of 'local' may not be widened. A strategy sub theme group on Brexit in place; contract variation gateway in place for contracts over certain values;</p> <p><b>Trading Standards</b> - Continue to monitor new and amended legislation and identify changes with significant impact for business or consumers; continue to review relevant technical notices and begin to develop new advice or procedures as required. Staff attending BEIS, DEFRA and MHCLG briefing sessions across the range of their statutory duties. Sharing BEIS business readiness information (<a href="https://euexitbusiness.campaign.gov.uk/">https://euexitbusiness.campaign.gov.uk/</a>) via social media channels.</p> <p><b>Environmental Standards</b> - domestic legislation to preserve EU law in relation to environmental standards (Environment Bill) to be put in place; contractors encouraged to consider Brexit risks and seek mitigation; light touch enforcement for food and animal products;</p> <p><b>Data Protection</b> – Data Protection Act including GDPR; NYCC data held on UK servers</p> <p><b>Catering</b> – change menus to suit availability of food; maintain frozen food stock;</p> <p><b>Customer Contact Centre</b> – multi agency partnership working in place and embedded for major incidents including the contact centre;</p> <p><b>RET</b> – full 24 hour rota cover in place;</p> <p><b>Adult Social Care</b> – work ongoing with providers to ensure mutual support is in place;</p> <p><b>EU Settlement Scheme</b> – Registration Service support applicants without access to Android phone</p>											
Probability	H	Objectives	H	Financial	H	Services	H	Reputation	M	Category	I
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/250 - Workforce: Monitor the potential impact on recruitment including the care sector in particular and put together an appropriate action plan if required					CSD ACE BS	Fri-31-Jan-20				
Reduction	20/400 - Business support funding programmes – monitor likely changes and ensure that changes are well communicated					CD BES	Fri-31-Jan-20				
Reduction	20/405 - Farming support funding programmes – monitor likely changes and ensure that changes are well communicated					CD BES	Fri-31-Jan-20				

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/454 - State Aid: Monitor details of future trading relationships, and understand the local implications of any guidance provided relating to State Aid. Act upon guidance issued by the Competition and Markets Authority when more detail is provided on the new regulatory function and how State Aid rules will be enforced.	CSD ACE LDS	Fri-31-Jan-20	
<b>Reduction</b>	20/461 - Public Health: Continue to maintain the same high standards in promoting and protecting the health of the public. Continue to monitor variations post Brexit and put local arrangements in place.	CD HAS	Fri-31-Jan-20	
<b>Reduction</b>	20/465 - Procurement: Monitor the potential impact on public procurement regulations and action any changes to law and NYCC process as they occur. Links made with Cabinet Office EU/International Procurement Policy Team. Put in place additional contract variation scrutiny for lower value contracts.	CD SR	Fri-31-Jan-20	
<b>Reduction</b>	20/467 - Trading Standards: Develop generic and specialist business advice packages to complement existing business advice strategy. Liaise with Citizens Advice Consumer Service (CACS) to determine their contingency plans and make any necessary adjustments to the NYCC/CACS protocol. Review whether changes are required to the trading standards tasking filter and matrix and report to BES Executive Members. Review animal disease plans and amend as necessary.	CD BES	Fri-31-Jan-20	
<b>Reduction</b>	20/470 - Environmental Standards and Waste: continue to keep a watching brief, through attendance at relevant groups and receiving updates and briefings. Monitor the progression of the Environment Bill, assess the impact when enacted and put together an action plan for approval by Management Board. Monitor cross border waste movements and tariffs and put together an action plan for local arrangements. Work with Yorwaste on waste issues and carry out scenario planning.	CD BES	Fri-31-Jan-20	
<b>Reduction</b>	20/472 - Data Protection: Put controls in place for data transferred into and out of the UK. Review current cloud service contract and ensure controls are in place to ensure data is held in the UK. Monitor changes to the legal framework governing transfers of personal data. Monitor for EU decision to share data from the EU. Carry out changes to NYCC's privacy notice and contracts dependent on what deal is made.	CD SR	Fri-31-Jan-20	
<b>Reduction</b>	20/478 - Guidance on Brexit – continue to receive notification on emerging guidance on areas affecting Local Government, review impact on the Council and report regularly on this to Management Board.	CSD AD PPC	Fri-31-Jan-20	
<b>Reduction</b>	20/480 - Take part in engagements arranged by and with the DExEU and MHCLG through the County Councils Network, review impact on the Council and report regularly on this to Management Board.	CSD AD PPC	Fri-31-Jan-20	
<b>Reduction</b>	20/730 - Work as part of North Yorkshire Local Resilience Forum to ensure that civil contingencies issues are identified, evaluated and appropriate planning undertaken.	CSD AD PPC	Fri-31-Jan-20	
<b>Reduction</b>	20/737 - Catering - Evaluate capacity for frozen food storage. Discuss availability of food with suppliers (HAS).	CD SR	Fri-31-Jan-20	
<b>Reduction</b>	20/738 - Customer Contact Centre - explore ability to increase capacity if needed and put plans in place	CSD SR AD T&C CSD SR CSCM	Fri-31-Jan-20	
<b>Reduction</b>	20/739 - Communications – ensure contingency plans for sufficient capacity, and plans are in place for a daily rota across the county and district councils	CSD HoC LRF Comms Group	Fri-31-Jan-20	
<b>Reduction</b>	20/740 - Human resources – ensure manager and staff cover/availability. Provide advice to WFH where appropriate (fuel shortage). Monitor potential knock on effect on workforce due to increase in wages to mitigate against EU citizens leaving	All Mgt Board	Fri-31-Jan-20	
<b>Reduction</b>	20/741 - Resources – monitor availability of fuel, ensure Ringways maintaining contractually required stocks and ideally more, and investigate potential for storage	BES AD H&T	Fri-31-Jan-20	
<b>Reduction</b>	20/742 - Adult Social Care – carry out mapping of staff/skills across the county to ensure safety of people. Monitor availability of medicines.	CD HAS	Fri-31-Jan-20	
<b>Reduction</b>	20/743 - Highways – Monitor availability and cost increase of vehicles and vehicle parts	CD BES	Fri-31-Jan-20	

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/744 - BES strategic planning/heritage – obtain clarity around the loss of ESF and how its replacement will work	CD BES	Fri-31-Jan-20								
<b>Reduction</b>	20/745 - Council Wide – discuss contingency plans and ensure robustness	All Mgt Board	Fri-31-Jan-20								
<b>Reduction</b>	20/746 - Communications with Members	Chief Exec	Fri-31-Jan-20								
<b>Reduction</b>	20/747 - Continue to work with District Councils to gather intelligence around businesses particularly exposed to risk		Fri-31-Jan-20								
<b>Reduction</b>	20/1190 - EU Settlement Scheme – Registration Service to support applicants without access to Android phone	CSD PPC GM RA&C	Fri-31-Jan-20								
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	H	<b>Objectives</b>	H	<b>Financial</b>	H	<b>Services</b>	H	<b>Reputation</b>	M	<b>Category</b>	I
<b>Phase 5 - Fallback Plan</b>											
											<b>Action Manager</b>
<b>Fallback Plan</b>	20/573 - Revisit and look at emergency measures that need to be put in place.										Chief Exec

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (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			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 regularly updated; Internal Data Governance team with an identified representative for each Directorate (replacing DIGCs); Veritau appointed as DPO; posters; intranet information; regular monitoring of electronic communication by T&C; 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; virtual Directorate Group; Veritau investigate 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 campaign; Information Sharing Protocol in place; SAR - controls include central monitoring of receipt and progress; refreshed Information Governance page on intranet; Information Governance risk register completed;								
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	Mon-31- Aug-20				
Reduction	15/424 - Continue to review information asset registers and target training where appropriate (ongoing)					CSD SR AD T&C Ho Int Audit	Mon-31- Aug-20				
Reduction	15/426 - Continue to ensure individual information sharing agreements completed for each data sharing activity - (ongoing)					Ho Int Audit	Mon-31- Aug-20				
Reduction	15/431 - Continue to work within services in a prioritised order to ensure information (electronic and physical) is secure and transferred securely (ongoing)					CSD SR AD T&C	Mon-31- Aug-20				
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	Mon-31- Aug-20				
Reduction	15/611 - Ensure Data Protection risks are managed to comply with GDPR (ongoing)					CSD SR AD T&C	Mon-31- Aug-20				
Reduction	15/612 - Data Quality Improvement - develop and implement an action plan to address the Data Quality issues that are impacting on the accuracy of operational management information, performance reports, transparency publications and statutory returns (action plan to be agreed by Sept 2019)					CSD SR AD T&C	Mon-31- Aug-20				
Reduction	15/613 - Documents and Record Management - develop and implement an approach to document and records management and storage with the Council that encompasses both physical and electronic information (action plan to be agreed by end of August 2019)					CSD SR AD T&C	Mon-31- Aug-20				

# Corporate Risk Register

Risk Register: month 0 (November 2019) – detailed

Next Review due: April 2020

Report Date: 19<sup>th</sup> November 2019 (pw)

<b>Reduction</b>	15/844 - Carry out a corporate cyber-attack simulation exercise					CSD SR AD T&C	Tue-31- Dec-19				
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	H	<b>Objectives</b>	L	<b>Financial</b>	M	<b>Services</b>	L	<b>Reputation</b>	M	<b>Category</b>	2
<b>Phase 5 - Fallback Plan</b>											
<b>Fallback Plan</b>	15/514 - Review Action Plan and new technology and continue to raise awareness. Invite ICO to carry out an audit of NYCC IG systems							<b>Action Manager</b>			
								CD SR			

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification													
<b>Risk Number</b>	20/207	<b>Risk Title</b>	20/207 - Transformation Programme						<b>Risk Owner</b>	Chief Exec		<b>Manager</b>	CD SR
<b>Description</b>	Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts						<b>Risk Group</b>	Strategic		<b>Risk Type</b>	CS 15/11		
Phase 2 - Current Assessment													
<b>Current Control Measures</b>			Transformation programme; alignment with Council Plan and corporate priorities; Members workshops & political group sessions completed; briefings of Cabinet; regular Mgt Board/Programme Board meetings; staff communication constantly reviewed 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; 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; Enhanced Strategic Support service to ensure high quality and robust service and team planning; action plan following peer review monitored; intensive review of areas of overspend and actions to mitigate; review (deep dives) into specific high-risk base budgets such as HAS Care and Support, SEN Transport and School Improvement carried out (2018/19); fundamental review of the organisation's design and development programme carried out (Mar2019);										
<b>Probability</b>	H	<b>Objectives</b>	H	<b>Financial</b>	H	<b>Services</b>	H	<b>Reputation</b>	H	<b>Category</b>	1		
Phase 3 - Risk Reduction Actions													
<b>Reduction</b>	15/634 - Further shape the emerging Beyond 2020 Programme to lead to identifying new areas of cross cutting programmes for implementation in 2020/21 onwards						<b>Action Manager</b>	CSD SR AD T&C		<b>Action by</b>	Tue-31-Mar-20		
<b>Reduction</b>	15/635 - Continue to carry out fundamental review of projects, reassessment of priority and agree outcomes						<b>Action Manager</b>	CD SR CSD SR AD T&C		<b>Action by</b>	Mon-31-Aug-20		
<b>Reduction</b>	15/636 - Continue to deliver existing Programme including Directorate and cross cutting programmes						<b>Action Manager</b>	CD SR CSD SR AD T&C		<b>Action by</b>	Mon-31-Aug-20		
<b>Reduction</b>	15/637 - Embed the BEST approach into service planning to identify yearly efficiency savings						<b>Action Manager</b>	CD SR CSD Mgt Team CSD PPC HoS&P		<b>Action by</b>	Tue-31-Mar-20		
<b>Reduction</b>	15/639 - Continue to carry out focussed reviews on areas of overspend, poor performance and/or opportunities for improvement						<b>Action Manager</b>	CD SR CSD SR AD T&C		<b>Action by</b>	Mon-31-Aug-20		
<b>Reduction</b>	15/831 - Continue to monitor delay of Programmes and the effect on benefits (ongoing)						<b>Action Manager</b>	CSD SR AD T&C		<b>Action by</b>	Mon-31-Aug-20		
<b>Reduction</b>	20/52 - Refresh and carry out a revised plan for reviewing base budgets in 2019/20 on a risk based assessment and linked to focussed reviews						<b>Action Manager</b>	CD SR		<b>Action by</b>	Tue-31-Mar-20		
<b>Reduction</b>	20/386 - Approve detailed business plans all businesses within the Brierley Group. by Shareholder Committee and Brierley Board and put in place a monitoring regime (Forward Plan) for progress						<b>Action Manager</b>	CD SR		<b>Action by</b>	Tue-31-Mar-20		
<b>Reduction</b>	20/403 - Carry out monthly monitoring of communications and engagement plan including key messages and themes (ongoing)						<b>Action Manager</b>	CSD HoC		<b>Action by</b>	Mon-31-Aug-20		
<b>Reduction</b>	20/491 - Identify and target additional savings through corporate Procurement Strategy (ongoing)						<b>Action Manager</b>	CD SR		<b>Action by</b>	Wed-30-Sep-20		

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/526 - Continue to develop effective Commercial operations (ongoing)			All Mgt Board Chief Exec	Mon-31- Aug-20						
<b>Reduction</b>	20/551 - Develop and implement an action plan to change the identified approach and activities across a range of areas, notably staff engagement, following the fundamental review of the organisation's design and development programme			CSD ACE BS	Tue-31- Mar-20						
<b>Reduction</b>	20/595 - Develop transformational themes and produce outline business cases for Assess and Decide; Resilience and Wellbeing; Modern Council +; Environment			All Mgt Board	Tue-31- Mar-20						
<b>Reduction</b>	20/599 - Produce and launch a strategic narrative for the Beyond 2020 Programme.			Chief Exec	Fri-31-Jan- 20						
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	M	<b>Objectives</b>	H	<b>Financial</b>	H	<b>Services</b>	H	<b>Reputation</b>	H	<b>Category</b>	2
<b>Phase 5 - Fallback Plan</b>											
<b>Fallback Plan</b>	15/561 - Carry out service cuts									<b>Action Manager</b>	All Mgt Board

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
<b>Risk Number</b>	20/1	<b>Risk Title</b>	20/1 - Funding Challenges				<b>Risk Owner</b>	Chief Exec	<b>Manager</b>	CD SR	
<b>Description</b>	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					<b>Risk Group</b>	Resources	<b>Risk Type</b>			
Phase 2 - Current Assessment											
<b>Current Control Measures</b>			Existing MTFs; Members Budget seminars; 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 Governance; modelling on implications of external funding levels (eg Spending Review Settlement); next phase of savings ideas generated; meetings with traded services' managers completed; interim NYES business plan in place; sustainable additional social care funding; advocacy work including with MPs, CCN and professional networks; initial review of the impact of the 1 year spending round (linked to action20/617);								
<b>Probability</b>	H	<b>Objectives</b>	H	<b>Financial</b>	H	<b>Services</b>	H	<b>Reputation</b>	H	<b>Category</b>	1
Phase 3 - Risk Reduction Actions											
						<b>Action Manager</b>	<b>Action by</b>	<b>Completed</b>			
<b>Reduction</b>	15/638 - Deliver against areas identified as housekeeping (negative RSG, fairer funding review, fees and charges, business rates) Continue to feed in to the fairer funding review and make the case for additional funding as part of the Spending Review					CSD SR AD T&C	Tue-31-Mar-20				
<b>Reduction</b>	20/46 - Ensure effective consultation/communication with staff, public and Members about ongoing savings requirements					All Mgt Board	Fri-31-Jan-20				
<b>Reduction</b>	20/402 - Review arrangements relating to time limited additional social care funding					CD HAS CD SR	Fri-31-Jan-20				
<b>Reduction</b>	20/616 - Ensure active participation in professional networks and LG pressure groups (for example CCN and LGA) to shape activity in relation to advocacy (ongoing)					All Mgt Board	Fri-31-Jan-20				
<b>Reduction</b>	20/617 - Continue to lobby MPs and Govt for additional funding particularly in relation to adults and children's social care, High Needs, Schools Capital and rural costs (ongoing)					CD HAS CD SR	Tue-31-Mar-20				
<b>Reduction</b>	20/618 - Implement Beyond 2020 Change Programme to address ongoing savings for the new MTFs.					All Mgt Board	Fri-28-Feb-20				
<b>Reduction</b>	20/728 - Communicate and consult with the public to ensure understanding of financial position and consequences					CD SR	Tue-31-Mar-20				
<b>Reduction</b>	20/750 - Ensure regular monitoring at management board and CYPS Overview and scrutiny committee of financial challenges for schools to highlight the present financial position to ensure immediate and emerging challenges are addressed. (ongoing)					CD CYPS CSD AD SR (HE)	Fri-31-Jul-20				
<b>Reduction</b>	20/751 - Identify and implement potential efficiencies as part of the strategic plan for high needs (ongoing)					CSD AD SR (HE) CYPS AD Incl	Wed-30-Sep-20				
Phase 4 - Post Risk Reduction Assessment											
<b>Probability</b>	M	<b>Objectives</b>	H	<b>Financial</b>	H	<b>Services</b>	M	<b>Reputation</b>	M	<b>Category</b>	2
Phase 5 - Fallback Plan											



# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

		Action Manager
<b>Fallback Plan</b>	20/504 - Further fundamental review in order to discharge statutory responsibilities	All Mgt Board

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
<b>Risk Number</b>	20/194	<b>Risk Title</b>	20/194 - Major Failure due to Quality and/or Economic Issues in the Care Market				<b>Risk Owner</b>	Chief Exec		<b>Manager</b>	CD HAS
<b>Description</b>	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.					<b>Risk Group</b>	Legislative		<b>Risk Type</b>	HAS Dir 3/162	
Phase 2 - Current Assessment											
<b>Current Control Measures</b>			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; Independent Sector Partnership B (ISPB); market analysis and mapping and information analysis (Locality Provider group); 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; Recruitment Hub implemented, Learning4Care training delivery for independent sector providers; recommendations from the actual cost of care exercise implemented; QI team in place; funding for market improvement team agreed through BCF;								
<b>Probability</b>	H	<b>Objectives</b>	M	<b>Financial</b>	H	<b>Services</b>	M	<b>Reputation</b>	H	<b>Category</b>	I
Phase 3 - Risk Reduction Actions											
							<b>Action Manager</b>	<b>Action by</b>	<b>Completed</b>		
<b>Reduction</b>	20/468 - Continue to revise and update a market position statement; this is now an online statement with different aspects being updated as and when required						HAS AD C&Q	Tue-30-Jun-20			
<b>Reduction</b>	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 with plans in place for health brokerage (brokerage pilots in place)						HAS AD C&Q	Tue-30-Jun-20			
<b>Reduction</b>	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						HAS AD C&Q	Tue-30-Jun-20			
<b>Reduction</b>	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; this continues, working through any remaining data sharing issues with Data Governance						HAS AD C&Q	Tue-30-Jun-20			
<b>Reduction</b>	20/474 - Work with Veritau on audits of individual suppliers (ongoing)						HAS AD C&Q	Tue-30-Jun-20			
<b>Reduction</b>	20/486 - Implement action plan following outcome of state of the market exercise and ensure inclusion of NHS and Partners - ongoing (Make Care Matter; IBCF monies used for Recruitment Hub and Learning4Care) and regularly report to ISPB						HAS HoHR	Wed-30-Sep-20			
<b>Reduction</b>	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); IBCF being used for piloting an approach to rural dom care, supporting recruitment and training						CSD AD SR (AH) HAS AD C&Q	Thu-30-Apr-20			
<b>Reduction</b>	20/523 - 2020 Market shaping/development around micro enterprises						HAS AD C&Q	Mon-30-Sep-19	Mon-30-Sep-19		

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/538 - Developing a quality pathway, revising processes and procedure and incorporating best practice adopting a risk based / predictive approach	HAS C&Q Ho Q&M	Thu-30-Apr-20								
<b>Reduction</b>	20/539 - Rewriting policies with input from Veritau	HAS C&Q Ho Q&M	Tue-30-Jun-20								
<b>Reduction</b>	20/540 - Ensure clarity around commissioning intentions using place based intelligence	HAS AD C&Q	Tue-30-Jun-20								
<b>Reduction</b>	20/541 - Work with ICG to ensure provider BCPs are in place (complete) and evidence of testing can be provided	HAS AD C&Q	Tue-30-Jun-20								
<b>Reduction</b>	20/542 - Consideration of market interventions, including development of a provider arm or a proposal to bring organisations together	HAS AD C&Q	Wed-30-Sep-20								
<b>Reduction</b>	20/1188 - Monitor issues caused by the complex partner relationships, meetings and structures and raise at HASLT where appropriate - ongoing	HAS AD C&Q	Tue-30-Jun-20								
<b>Reduction</b>	20/1197 - Begin the preparation for next Actual Cost of Care exercise and then develop revised commissioning model to help address affordability issues; started the process, Health & Social Care systems approach	HAS AD C&Q	Mon-30-Sep-19	Mon-30-Sep-19							
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	H	<b>Objectives</b>	M	<b>Financial</b>	M	<b>Services</b>	M	<b>Reputation</b>	M	<b>Category</b>	2
<b>Phase 5 - Fallback Plan</b>											
<b>Fallback Plan</b>	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.									<b>Action Manager</b>	
										CD HAS	

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
<b>Risk Number</b>	20/236	<b>Risk Title</b>	20/236 - Opportunities for Devolution and Growth in North Yorkshire				<b>Risk Owner</b>	Chief Exec	<b>Manager</b>	CD BES	
<b>Description</b>	Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage, resulting in reduced investment and impact on the growth and jobs, inability to attract, retain and grow businesses and raise living standards across North Yorkshire					<b>Risk Group</b>	Strategic	<b>Risk Type</b>	BES 7/174		
Phase 2 - Current Assessment											
<b>Current Control Measures</b>			<p><b>Devolution</b> - 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 &amp; considering a combined authority; LA Director group in place; plan detailing powers and funding developed; consensus of Yorkshire local authorities on Devolution geography and opportunities;</p> <p><b>Growth</b> - Direct contribution and support, including through provision of accountable body function, to the YNYER Local Enterprise Partnership; maintenance of an Economic Growth Function within BES; Proactive engagement in LGNYY partnership working including through Directors of Development, Chief Housing Officers, Heads of Planning and Economic Development Officer Groups; Lead role in enabling and further developing YNYERH Spatial Framework; Lead role in supporting and developing the NYCC Growth Plan Steering Group and sub-ordinate arrangements; Lead role in initiating and developing the NYCC Economic Growth Plan and annual Delivery Framework (endorsed by Executive); Work to monitor and support opportunities to secure alternative governance arrangements including a Devolution deal with Government; collaborative working arrangements with District Councils in place</p>								
<b>Probability</b>	H	<b>Objectives</b>	M	<b>Financial</b>	H	<b>Services</b>	H	<b>Reputation</b>	H	<b>Category</b>	I
Phase 3 - Risk Reduction Actions											
						<b>Action Manager</b>	<b>Action by</b>	<b>Completed</b>			
<b>Reduction</b>	20/246 - Continue to monitor the Devolution agenda and communication with stakeholders to maximise opportunities (ongoing); the greater Yorkshire geography is being used in some areas of growth work					BES AD GP&TS	Fri-31-Jul-20				
<b>Reduction</b>	20/364 - Devolution - Gain political support both locally and nationally (ongoing)					Chief Exec	Fri-31-Jul-20				
<b>Reduction</b>	20/549 - Growth - Carry out an annual review of progress of the NYCC Economic Growth and Delivery Plan and Action Plan (ongoing) (Need to work towards a new NYCC Economic Growth and Delivery Plan being in place by 31 Mar 20)					BES AD GP&TS BES GP&TS HoSP&EG	Tue-31-Mar-20				
<b>Reduction</b>	20/550 - Growth - Embed enhanced collaborative working arrangements with District Councils (annual review of progress) - ongoing					BES AD GP&TS	Fri-31-Jul-20				
<b>Reduction</b>	20/552 - Growth - Maintain good working relationship with the LEP (ongoing)					CD BES	Fri-31-Jul-20				
<b>Reduction</b>	20/553 - Growth - Understand and investigate any impacts of Brexit and ensure opportunities are taken					BES AD EPUCD BES	Tue-31-Mar-20				
<b>Reduction</b>	20/597 - Growth - Complete YNYERH Spatial Framework SDZ Long Term Development Statements to enable effective long-term planning and investment of infrastructure for growth; approval by LGNYY Board / Leaders for publication and open release of the framework					BES AD GP&TS	Fri-31-Jul-20				

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/598 - Growth - Deliver strategic natural capital investment via the Local Nature Partnership (LEP/LNP lead); Taking forward phase 2 implementation options with partners (Local Authorities, DEFRA, Universities, Business) with link to 25 Year Environment plan and government policy changes (planning net gain, agriculture ELMs, Local Industrial Strategy & Natural Capital plans).	BES AD GP&TS	Tue-31-Mar-20								
<b>Reduction</b>	20/723 - Devolution - Develop a York/North Yorkshire proposition including a combined authority, in response to Govt. continuing to reject One Yorkshire	Chief Exec	Tue-31-Mar-20								
<b>Reduction</b>	20/725 - Devolution - Carry out consultation on a York/North Yorkshire proposition and following approval, submit to Parliament and obtain relevant Powers.	Chief Exec	Wed-31-Mar-21								
<b>Reduction</b>	20/916 - Devolution - Establish the geography on which to secure Devolution (consensus of Yorkshire local authorities achieved, support from Govt Minister required)	Chief Exec	Fri-31-Jul-20								
<b>Reduction</b>	20/917 - Devolution - Develop detailed business cases for different geographies	Chief Exec	Fri-31-Jul-20								
<b>Reduction</b>	20/1397 - Devolution - Negotiate the economic barriers and opportunities which Devolution can take advantage of with Government including interim devolution deals (consensus of Yorkshire local authorities achieved, support from Govt Minister required)	CD BES	Fri-31-Jul-20								
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	M	<b>Objectives</b>	M	<b>Financial</b>	M	<b>Services</b>	M	<b>Reputation</b>	M	<b>Category</b>	4
<b>Phase 5 - Fallback Plan</b>											
											<b>Action Manager</b>
<b>Fallback Plan</b>	20/572 - Consider a North Yorkshire deal and review and revise existing arrangements for sustainable economic growth										CD BES Chief Exec

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/239	Risk Title	20/239 - Schools Funding Challenges				Risk Owner	Chief Exec	Manager	CD CYPs	
Description	Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools; poor financial management or failure to act in a timely manner by governors/head teachers DfE impose further restrictions on LA financial freedoms, results in potential accumulated deficits. Lack of investment in special provision such as special schools results in potential increased costs.					Risk Group	Resources	Risk Type			
Phase 2 - Current Assessment											
Current Control Measures			Support challenge and intervention framework in place; survey of all schools to benchmark their position on issues such as staff reduction, increased class sizes and commercial activities; licence to deficits; recovery plans, financial benchmarking; primary and secondary finance conferences; individual discussions with schools; Schools Forum engagement; governor briefings; Lobbying of Govt and MPs regarding schools' financial position carried out;								
Probability	H	Objectives	M	Financial	M	Services	H	Reputation	H	Category	1
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/750 - Ensure regular monitoring at management board and CYPs Overview and scrutiny committee of financial challenges for schools to highlight the present financial position to ensure immediate and emerging challenges are addressed. (ongoing)					CD CYPs CSD AD SR (HE)	Fri-31-Jul-20				
Reduction	20/752 - Implement a support challenge and intervention framework to assist/instruct schools to take measures to address their financial position.					CSD AD SR (HE)	Tue-31-Mar-20				
Reduction	20/753 - Continue to lobby Ministers, local MP and through F40 Group (ongoing)					CD CYPs	Fri-31-Jul-20				
Reduction	20/754 - Carry out press release and lobby Govt and MPs following outcome of survey benchmarking of schools positions					CD CYPs	Sun-30-Jun-19	Sun-30-Jun-19			
Reduction	20/755 - Deploy finance staff into schools with the biggest financial challenges to undertake financial consultancy to ensure schools balance their budget within 3 years.					CSD AD SR (HE)	Wed-30-Sep-20				
Reduction	20/756 - Develop and implement an approach to integrated curriculum and financial planning and support and encourage collaboration and federation					CSD AD SR (HE)	Wed-30-Sep-20				
Reduction	20/757 - Develop a business case for special provision across the County to ensure value for money					CSD AD SR (HE) CYPs AD Incl	Tue-31-Mar-20				
Reduction	20/759 - Implement outcome of review of special provision					CSD AD SR (HE) CYPs AD Incl	Wed-31-Mar-21				
Reduction	20/1166 - Present outcome of schools survey benchmarking at Schools Forum (completed Sept 2019) and encourage a larger take-up for a further regional survey in order to provide 'real' information to Government					CSD AD SR (HE)	Tue-31-Dec-19				
Reduction	20/1189 - Define and secure appropriately experienced resources to provide a support and challenge function for schools and academies					CSD AD SR (HE)	Wed-30-Sep-20				
Phase 4 - Post Risk Reduction Assessment											
Probability	M	Objectives	M	Financial	M	Services	M	Reputation	M	Category	4

# Corporate Risk Register

Risk Register: month 0 (November 2019) – detailed

Next Review due: April 2020

Report Date: 19<sup>th</sup> November 2019 (pw)

Phase 5 - Fallback Plan		Action Manager
<b>Fallback Plan</b>	20/574 - Further fundamental review to ensure control of accumulated deficits	CD CYPs

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
Risk Number	20/47	Risk Title	20/47 - Partnership and Integration with Health				Risk Owner	Chief Exec	Manager	CD HAS	
Description	Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes					Risk Group	Partnerships	Risk Type	CYPs 24/221 HAS 3/180		
Phase 2 - Current Assessment											
Current Control Measures			<p><b>HAS:</b> Effective HWB partnership with clear reviewed and revised - governance providing strategic leadership regarding H&amp;W across the County; chief Officer representation influencing the development of STP/ICs; HASLT locality delivery model in place actively shaping local integration plans; Joint leadership in Harrogate developing a new model of care building on the work of Vanguard; joint commissioning boards in Hamb/Rich and Scarborough/Ryedale CCGs underpinned by s75 agreements; investment of IBCF and BCF to protect social care; Joint 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 developed with CCGs and agreed at Health and Wellbeing Board; 2020 Health Programme focussing on integration established; York and North Yorkshire SLE in place with a work programme of 10 priorities; joint commissioning boards for HRW and Scarborough in place (but in abeyance pending re-organisation of NY CCGs);</p> <p><b>CYPs:</b> H&amp;W Board; CYPLT; Management Board; CYPs Plan; Health and Well-being Strategy; JSNA; services commissioned for 0-5 and 5 - 19 Healthy Child Programme to ensure close alignment with CYPs Services; Childhood Futures governance arrangements in place;</p>								
Probability	M	Objectives	M	Financial	H	Services	M	Reputation	M	Category	2
Phase 3 - Risk Reduction Actions											
						Action Manager	Action by	Completed			
Reduction	20/60	Ensure that we account for the BCF and IBCF funding as per the Regulations on a quarterly basis				CSD AD SR (AH)	Tue-31-Mar-20				
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)				CD HAS	Tue-30-Jun-20				
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	Tue-30-Jun-20				
Reduction	20/399	Develop proposals to align to the emerging new Primary Care Networks which will be established.				HAS AD HI	Thu-30-Apr-20				
Reduction	20/402	Review arrangements relating to time limited additional social care funding				CD HA SCD SR	Fri-31-Jan-20				
Reduction	20/451	Agree and implement Harrogate and Rural Alliance (Sept 2019) integration of community health and social care services and also further new models of care when emerging new Primary Care Networks are established				CD HAS	Tue-31-Mar-20				
Reduction	20/452	Engage wider HASLT in testing the implications of different integration models (ongoing)				HAS AD C&Q HAS AD HI	Tue-30-Jun-20				
Reduction	20/457	Improve the DToC (Delayed Transfer of Care) performance to avoid financial penalties and reputational issues. Implement the work programme of the Transfers of Care Board. – HI overview with C&S delivery, continued progress on the social care element but still reliant on the NHS areas				HAS AD C&Q HAS AD C&S	Tue-30-Jun-20				
Reduction	20/458	Consider MoUs for STP / ICS across the County that explicitly define the Council's involvement and engagement in these arrangements				CSD AD SR (AH) HAS AD HI	Tue-30-Jun-20				



## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/477 - Ensure Healthy Child team and CYPS services collaborate effectively and at the earliest stage to prevent family and education breakdown and to delivering improved outcomes of Children, Young People and Families (ongoing)	CYPS C&F HoEP (PIP)	Wed-30-Sep-20								
<b>Reduction</b>	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	Wed-30-Sep-20								
<b>Reduction</b>	20/528 - Ensure employment of an 'Invest to Save' post for joint commissioning between Health and the Local Authority in terms of meeting the needs of children with SEND	CSD AD SR (AH) CYPS AD Incl	Tue-31-Mar-20								
<b>Reduction</b>	20/565 - Actively work with Partners on a new way for the health system to work in North Yorkshire	HAS AD HI	Tue-31-Mar-20								
<b>Reduction</b>	20/724 - Ensure full participation across Health and the Local Authority in the Childhood Futures Programme	CYPS Comm Mgr Health	Wed-30-Sep-20								
<b>Reduction</b>	20/733 - Manage relationships at Trust and CCG level as a result of leadership changes (ongoing)	CD HAS	Tue-31-Mar-20								
<b>Reduction</b>	20/735 - Discuss with Health Partners how to re-establish fair and effective partnership working in relation to Continuing Healthcare	CSD AD SR (AH) HAS AD C&S (Prov.)	Mon-31-Aug-20								
<b>Reduction</b>	20/748 - Carry out a post implementation review of HARA	HAS AD HI	Tue-30-Jun-20								
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	M	<b>Objectives</b>	M	<b>Financial</b>	H	<b>Services</b>	M	<b>Reputation</b>	M	<b>Category</b>	2
<b>Phase 5 - Fallback Plan</b>											
										<b>Action Manager</b>	
<b>Fallback Plan</b>	20/210 - Escalation to CMB and Executive Members, further engagement with senior tiers in NHS locally, regionally and nationally.									CD HAS	

# Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

Phase 1 - Identification											
<b>Risk Number</b>	20/189	<b>Risk Title</b>	20/189 - Safeguarding Arrangements				<b>Risk Owner</b>	Chief Exec	<b>Manager</b>	CD HAS CD CYPS	
<b>Description</b>	Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.					<b>Risk Group</b>	Safeguarding	<b>Risk Type</b>	CYPS 24/250 HAS 3/27		
Phase 2 - Current Assessment											
Current Control Measures											
<p><b>CYPS</b> – 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 'outstanding' 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; Mgt file audit of case files against established assessment standards and staff supervision files; monitoring and management of performance against agreed targets in the SMT action plan</p> <p><b>HAS</b> - 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&amp;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; recommendations from the commissioned independent review of safeguarding practice taken into consideration as part of the preparations for the implementation of the latest policy and procedures; local arrangements with Children's Safeguarding Board and Community Safety Partnerships reviewed; training for in house provider; new safeguarding policies and procedures implemented;</p>											
<b>Probability</b>	M	<b>Objectives</b>	H	<b>Financial</b>	M	<b>Services</b>	M	<b>Reputation</b>	H	<b>Category</b>	2
Phase 3 - Risk Reduction Actions											
							<b>Action Manager</b>	<b>Action by</b>	<b>Completed</b>		
<b>Reduction</b>	20/374 - Ensure compliance with Safeguarding Board and Children and Families' procedures [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
<b>Reduction</b>	20/376 - Continue the work with the MAST to strengthen responses to children and young people who are vulnerable to CSE and CCE by improved intelligence and information sharing arrangements [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
<b>Reduction</b>	20/377 - Ensure where there is a concern that a young person is being exploited that the CSE risk assessment tool is always completed [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
<b>Reduction</b>	20/382 - Continue to feed into review of EDT arrangements (adult lead) as required [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
<b>Reduction</b>	20/384 - Continuation of 'Practice Weeks' where managers will visit locations to observe and review practice; Progress: These are now in place and in order to make these stronger the teams will need to be involved in the planning to make these more effective, however the feedback is positive. [CYPS]						CYPS AD C&F	Fri-31-Jul-20			
<b>Reduction</b>	20/385 - Use and further development of performance dashboards to support individual managers [CYPS]						CYPS C&F HoS	Fri-31-Jul-20			
<b>Reduction</b>	20/456 - Continue to report regularly to HASLT, Care and Independence O&S Committee and Health and Wellbeing Board particularly in light of preparation for the latest policy and procedures. [HAS]						HAS AD HI	Tue-31-Mar-20			

## Corporate Risk Register

Risk Register: **month 0 (November 2019) – detailed**

Next Review due: **April 2020**

Report Date: **19<sup>th</sup> November 2019 (pw)**

<b>Reduction</b>	20/487 - Continue to work with Commissioning and Quality team to improve quality assurance (development of new approaches and tools around working with providers on quality assurance issues); including work and regular meetings with CQC, Health and Healthwatch [HAS]	HAS AD C&S (Asmt.) HAS AD HI	Tue-30-Jun-20								
<b>Reduction</b>	20/490 - Ensure training in respect of latest policies and procedures for elected Members, staff and Partners is reviewed and delivered [HAS]	HAS AD C&S (Asmt.)	Tue-31-Mar-20								
<b>Reduction</b>	20/534 - Continue to carry out the supervisory body role for DoLS to ensure the system is as effective as possible within existing resources and prepare for Liberty Protection Safeguarding Bill, details expected Jan 2020 and will become law by June 2020 (linked to action 20/615) [HAS]	HAS AD HI	Tue-30-Jun-20								
<b>Reduction</b>	20/535 - Continue to ensure Partners are fully engaged with Safeguarding Boards centrally and locally, particularly new health partners (CCGs). [HAS]	HAS AD C&S (Asmt.) HAS AD HI	Tue-30-Jun-20								
<b>Reduction</b>	20/536 - Continue to embed safeguarding work to deliver the Transforming Care programme incl. embedding the care act role of Principal Social Worker and Safeguarding Board Manager with closer scrutiny of Transforming Care work [HAS]	HAS AD C&S (Asmt.)	Tue-30-Jun-20								
<b>Reduction</b>	20/596 - Continue to strengthen Governance arrangements in HAS following consideration of North Yorkshire and national safeguarding adult reviews (ongoing) [HAS]	HAS AD C&S (Asmt.)	Tue-30-Jun-20								
<b>Reduction</b>	20/615 - Continue with scoping work in preparation of implementing the Law Commission proposals (linked to action 20/534) [HAS]	HAS AD C&S (Prov.) HAS AD HI	Thu-30-Apr-20								
<b>Reduction</b>	20/726 - Implement the new safeguarding policies and procedures (internal SG board is leading to ensure operational guidance is in place) [HAS]	HAS AD HI	Thu-31-Oct-19	Mon-30-Sep-19							
<b>Reduction</b>	20/736 - Consider whether new procedures could be established to give a more proportionate response to notifications [HAS]	HAS AD C&S (Prov.)	Thu-31-Oct-19	Mon-30-Sep-19							
<b>Phase 4 - Post Risk Reduction Assessment</b>											
<b>Probability</b>	L	<b>Objectives</b>	H	<b>Financial</b>	M	<b>Services</b>	M	<b>Reputation</b>	H	<b>Category</b>	3
<b>Phase 5 - Fallback Plan</b>											
<b>Fallback Plan</b>	20/545 - Carry out necessary review of approach, target underperforming areas and take on lessons learned from any serious case reviews									<b>Action Manager</b>	
										CD CYPS CD HAS	

Linking of Directorate risks to the Corporate risk register November 2019

Central Services Risk Register
<p><b>Information Governance</b></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 resulting in loss of reputation, poor decision making, fine, etc</p>
<p><b>Transformation Programme</b></p> <p>Failure to design and implement a coherent savings and transformation programme "Beyond 2020" which delivers the forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts</p>
<p><b>Central Services Savings Plan</b></p> <p>Failure to deliver the Central Services savings plan as set out in the MTFS resulting in inability to meet the budget, rationalise support services and enable the programme</p>

Health and Adult Services Risk Register
<p><b>Information Governance and Health and Safety</b></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><b>Confident and consistent practice</b></p> <p>Failure to establish the workstreams and processes needed to embed the confident and consistent practice programme across the county resulting in poor outcomes for individuals, missed opportunities to change and improve the service, inability to realise budgetary savings and criticism</p>
<p><b>Financial Pressures</b></p> <p>Financial pressures arising from difficulties in delivering MTFS Savings requirements, managing in year financial overspends, Better Care Fund contributions, market pressure and complexity of client needs leading to service impact or additional savings needing to be identified within HAS or corporately.</p>
<p><b>Major Failure due to Quality and/or Economic Issues in the Care Market</b></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><b>Partnership and Integration with the Health</b></p> <p>Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes.</p>
<p><b>Safeguarding Arrangements</b></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>

Corporate Risk Register	Rank
<p><b>Brexit Arrangements</b></p> <p>The UK leaves the European Union with sub-optimal arrangements resulting in difficulties in recruitment, data protection, price uncertainty and supply chain difficulties, price pressures from contractors, increased demands on services from customers and businesses; and adverse impacts upon the local economy and infrastructure and environmental standards.</p>	1 1
<p><b>Information Governance</b></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>	1 2
<p><b>Transformation Programme</b></p> <p>Failure to design and implement a coherent transformation and savings programme "Beyond 2020" which delivers the improvements and forecast funding shortfall resulting in short term and sub optimal savings decisions ie service cuts</p>	1 2
<p><b>Funding Challenges</b></p> <p>Inadequate funding available to the County Council to discharge its statutory responsibilities and to meet public expectation for the remainder of the decade.</p>	1 2
<p><b>Major Failure due to Quality and/or Economic Issues in the Care Market</b></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>	1 2
<p><b>Opportunities for Devolution and Growth in North Yorkshire</b></p> <p>Failure to take advantage of Devolution opportunities and to deliver the ambition of Sustainable Economic Growth, through for example the delivery of the right housing and transport whilst protecting the outstanding environment and heritage</p>	1 4
<p><b>Schools Funding Challenges</b></p> <p>Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools</p>	1 4
<p><b>Partnership and Integration with Health</b></p> <p>Failure to shape and drive the configuration of the NHS from both a Commissioner and Provider perspective resulting in suboptimal maximisation of integration across the NYCC footprint, a negative impact on the customer experience and the possibility of fragmented care and poor outcomes</p>	2 2
<p><b>Safeguarding Arrangements</b></p> <p>Failure to have a robust Safeguarding service in place results in risk to vulnerable children, adults and families and not protecting them from harm.</p>	2 3

Business and Environmental Services Risk Register
<p><b>Statutory Duties</b></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><b>Delivering Change Programmes within BES</b></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 Beyond 2020 Change Programme.</p>
<p><b>Opportunities for Devolution in North Yorkshire and Consideration of a Combined Authority</b></p> <p>Failure to take advantage of Devolution opportunities in North Yorkshire resulting in reduced investment and impact on growth and jobs across North Yorkshire.</p>
<p><b>Growth</b></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>

Children and Young People's Service Risk Register
<p><b>Information Governance and Health and Safety</b></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><b>Cultural Change and Beyond 2020</b></p> <p>Failure to maintain a strong culture, processes and supporting capacity within CYPS to deliver Beyond 2020, savings targets and address national funding and policy changes</p>
<p><b>Schools Funding Challenges</b></p> <p>Inadequate revenue and capital funding available for good quality schools, maintenance of school infrastructure and to ensure the sustainability of small rural schools</p>
<p><b>Partnership and Integration with Health</b></p> <p>Failure to develop and implement new models of care that will provide better outcomes for children and young people and local communities.</p>
<p><b>Safeguarding Arrangements</b></p> <p>Failure to have a robust approach to Safeguarding in place results in risk to vulnerable children and families and not protecting them from harm.</p>