								Curi isk \$	rent Score	Risk Respo nse;				idual isk	Action Owner / (Date)	Action Compl ete
Dep t.	Risk #	Risk	Causes (s)	Consequences (s)	Risk Owner	List of current controls	I	L	Ris k Sco re	Tolerat e Treat Termin ate Transf er	Further Actions / Additional Controls	I	L	Ris k Sco re		(Yes or No)
1	. Mea	dium Term I	Financial Strategy	(MTFS)												
All	1.1	Risk around the MTFS including the ability to deliver savings through Service Redesign/ Transform ation as required in the MTFS, impact of the living wage and other demand and cost pressures	 Reducing government funding Increased demand for the most vulnerable continues to increase: Adult Social Care / CYPS Significant efficiencies/sa vings already realised and implemented thereby making it increasingly difficult to deliver unidentified savings 	 <u>Service Delivery</u> Negative impact on all services as further service cuts will be required to reduce deficit <u>Reputation</u> Significant impact on reputation exacerbated by the need for quick and potentially crude savings if a more considered approach not adopted <u>Loss of income</u> Restricted funding from other sources 	Chief Executive/ All Directors	 Four year MTFS approved Monitoring processes in place at service, departmental and corporate level Progress with savings monitored and reported to Scrutiny Commission regularly Reporting of Transformation Programme aligned with Corporate Finance reporting Progress on savings from Transformation Programme monitored regularly to 	5	5	25	Treat	 Further work on the Council's low funding position to make the case for increased funding to government. Star Chambers to be arranged <u>Transformation</u> <u>Programme</u> Development of business case for Early Help Review including Children's Centres TU resources are being focused on developing & delivering key projects within C&FS including Dedicated Schools Grant – High Needs 	5	5	25	Chief Executive / All Directors During 2018/19	GC

а Б

		resolve early issues Design Authority operational. Transformation Programme aligned to MTFS Introduction of the Business Consultant role within the TU to focus on supporting the development of Business Case development Deliverability assessments on all Business Cases and newly identified opportunities for savings now routinely completed. TU providing support to Departments to develop Business cases to secure savings and other associated benefits	Block, Reduced Cost/ Demand Social Care and Early Help Review, SEN etc		
--	--	---	---	--	--

CE	If S100 monies for the Counc as a whole not manag proper then th could financi risks a well as legal challer s	 Due to the pooling limitations imposed by the Community Infrastructur e Levy Regulations 2010 (as amended) on the use of \$106 planning 	Reputation	Director of Law & Governan ce Head of Planning, Historic & Natural Environme nt	•	Agreed positions established with District Councils Analysed data of s106 contributions since 2010 Infrastructure and Development Oversight Group in place- work programme and timetable in place Approach to projects and pooling established (subject to individual project circumstances). Regular updates to Cabinet on planning decisions that do not reflect the County Council's section 106 requirements. Members notified of requests for section106 contributions that fall within their division.	4	4	16	Treat	 Improve procedures and practices MASTERGOV software now installed and being tested for monitoring and output reporting. Lack of staff resources to manage all the workload Developer Contributions Policy under active review 	4	2	8	Head of Planning, Historic & Natural Environme nt During 2018/19	3/	40
----	--	---	------------	--	---	---	---	---	----	-------	--	---	---	---	---	----	----

CR 1.4	If claims relating to uninsured risks materialis e or continue to increase then LCC will need to find increased payments from reserves, impacting on funds available to support services	 Estimates from MMI continue to report a liability Potential to increase MMI levy as a result of recent foster care judgement and could impact the SOA. The judgement has an unknown impact Any claims arising from the time Independent were insurers would need to be self- funded. 	 <u>Financial</u> Amounts involved are large and LCC is currently the MMI's largest creditor <u>Service Delivery</u> Reduced funds available to support services 	Director of Finance (Corporate Resources)	•	Detailed review of MMI claims undertaken before payments made Process for defending claims in place Ongoing partnership work with MMI to improve claims handling to reduce and manage losses A separate 'Uninsured Loss Fund' is established to meet such losses which is reviewed Training held to inform staff an management who undertake placement decisions re potential for future liabilities following Supreme Court decision that a local authority can be held vicariously liable for the wrongful actions of foster carers to a child in foster care	4	4	16	Tolerat e		4	4	16	Head of Internal Audit Service and Insurance Manager Ongoing 2018/19	38)))
--------	--	---	--	--	---	--	---	---	----	--------------	--	---	---	----	--	----	-----

2& 1.5	Social CareIf the number of high cost social care placement s (e.g. external fostering, residential and 16+suppo rted accommo dation) increases (especiall y in relation to behaviour al and CSE issues) then there may be significant pressures on the children's social care placement• High cost placements increasing especially in relation to behaviour & CSE issues	Financial • High cost and overspending of budget	Director - Children & Family Services	 Weekly trackin of admissions and discharges of Children in Care - Panel process reviewed to introduce tighte HOS control of children enterin care and legal proceedings (Child Decision Making Panel established January 2018) Annual Market Position Statements we published to ensure marketing and recruitment for placement sufficiency remains appropriately targeted (2015 17) - mainstreat and specialist Foster Carer recruitment targets for 201 18 will be met the end of Apri 2018 (one mor over); two new strategies (Recruitment a Retention Strategy and Adoption and 	r g Fe 5 5 m ry th	25	Treat	 project – six year programme of targeted savings Consultant advising on additional growth and to deliver a revised payment scheme Advice being taken for additional growth to recruit foster carers 	4	5 20	Director - Children & Family Services During 2018/19	39
--------	--	---	--	--	--------------------------------------	----	-------	--	---	------	---	----

funds the	Permanence
care of	Strategy) will sit
	under an
vulnerable	overarching
children.	Placement
	Strategy to eb
	launched April
	2018; targets
	against both
	these Strategies
	have already
	been agreed.
	 ● 16+ placement
	framework was
	introduced
	during 2016 and
	has effectively
	allowed the
	service to
	manage costs of these placement
	but ensure we
	have sufficiency
	to enable to
	move children
	from more costly
	placements or
	for UASC.
	Complex Care
	Panel with health
	is ongoing,
	allows shared
	decisions for
	children in care
	with more
	complex and
	continuing needs
	been amended
	so that requires
	for residential
	placements must

Image: Second		1	 	1		r	
Director and requests for independent fostering and 16+ by the AD for CSC - this is helping to ensure appopriateness and quality of requests and allowing disser scrumy of processes - Monthy high level DMT resolutions - Monthy high level DMT residential care on graph placements in residential care and to ensure that appropriate placements - Placements - Adoption - complaints - significantly - reduced during - 2017 with the - introduction of a - dedicated - Service Manager- for Permanence, - the introduction			now be signed				
Image: State in the second state in the second state in the second state in the second state is a second state in the second state is a second state in the second state is a secon			off by the				
independent tostering and 15+ by the AD tor CSC - this is helping to ensure appropriateness and quality of requests and allowing closer scrutiny of processes • Monthly high level DMT review Panel medit block at high cost placements in residential care and to ensure placements in resources are in placements orophints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence,							
Image: Second							
16+ by the AD for CSC – this is helping to ensure appropriateness and quality of requests and allowing closer scrutiny of processes • Monthly high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in reviews are and to ensure and to ensure and to nesure and to ensure allowing closer are in placements - Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permance, <			independent				
for CSC – this is helping to ensure appropriateness and quality of requests and allowing closer sorutiny of processes • Monthly high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in residential care and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			fostering and				
Image: Second			16+ by the AD				
Appropriateness appropriateness and uality of requests and allowing closer scrutiny of processes • Monthy high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in residential care and to ensure that appropriate plans and resources are in places ments • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			for CSC – this is				
A diguing doser scruiny of processes • Monthly high level DMT reviews and held to look at high cost placements in residential care and to ensure that appropriate placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permance, thorements			helping to ensure				
Image: stand allowing closer scrutiny of processes Image: stand allowing closer scrutiny of processes Image: stand allowing closer scrutiny of processes Image: stand allowing closer scrutiny of processes Image: stand allowing closer scruting allowing closer scruten scruten scruting allowing closer scruting allowing			appropriateness				
allowing closer scrutiny of processes • Monthy high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in resources are in placements allowing closer example meetings also held to look at high cost placements in resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			and quality of				
sccutiny of processes • Monthy high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in residemital care and to ensure that appropriate plans and place to support place to support place to support placed during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			requests and				
Monthy high level DMT reviews are ongoing. Panel meetings also held to look at high cost placements in residential care and to ensure that appropriate plane and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			allowing closer				
Monthy high level DMT reviews are ongoing. Panel metings also held to look at high cost placements in residemitial care and to ensure that appropriate plans and ressources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction							
Image:			processes				
reviews are ongoing. Panel meetings also held to look at held to look at placements in residential care and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			Monthly high				
ongoing. Panel meetings also held to look at high cost placements in residential care and to ensure that appropriate plans and resources are in place to support placements Image: Comparison of the temperature of temperature plans and resources are in place to support placements • Adoption • Complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction Image: Comparison of temperature and to ensure and to ensure and to ensure and to ensure and to ensure and to ensure that appropriate placements							
meetings also held to look at high cost placements in residential care and to ensure that appropriate place is upport placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction							
held to look at high cost placements in residential care and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			ongoing. Panel				エ
high cost placements in residential care and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			meetings also				
Image: state of the state							
residential care and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			high cost				
and to ensure that appropriate plans and resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction							
Image: state in the state interval							
Image: state in the introduction Image: state in the introduction Image: state in the introduction Image: state introduction Image: state introduction Image: state introduction Image: state introduction Image: state introduction Image: state introduction							
resources are in place to support placements • Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			that appropriate				
Image: state of the state							
Image: second							
Adoption complaints significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			place to support				
Image: start in the introduction Image: start introduction Image: start introduction Image: start introduction Image: start introduction Image: start introduction							
Image: significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction Image: significantly reduced during 2017 with the introduction of a dedicated Service Manager for Permanence, the introduction Image: significantly reduced during 2017 with the introduction							
Image: state stat							
2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			significantly				
2017 with the introduction of a dedicated Service Manager for Permanence, the introduction			reduced during				
introduction of a introduction of a dedicated dedicated Service Manager for Permanence, the introduction the introduction							
dedicated Service Manager Image: Comparison of the introduction Image: Comparison of the introduction Image: Comparison of the introduction							
Service Manager Image: Comparison of the introduction Image: Comparison of the introduction Image: Comparison of the introduction							
for Permanence, the introduction							
the introduction							
of a support			the introduction				
			of a support				

			worker following the growth bid and a programme of training and awareness to promote staff understanding of the child's permanence journey - further improvements in Permanence (adoption and SGO) will be achieved in 2018, with an ongoing programme of awareness, introduction of dedicate staff for SGO support and recruitment of a third therapeutic worker for post 3 year adoption placement				42	5

C& FS 1.6	(including SEN placement s) cannot be reduced	 Services requesting support for high needs including SEN placements. Insufficient budget 	 Service Delivery Unable to meet the needs of all vulnerable children effectively Unable to meet the department's statutory duties around SEN Placements Resources tied up in independent provision and not wide benefitting Leicestershire children and young people Bad publicity and low confidence in Local Authority to support vulnerable children and young people Low confidence in ability of department to manage it's services, budgets and meet savings targets (MTFS). Poor outcomes at SEND Inspection Budget overspent 	Director – Children & Family Services	•	High Needs Project Board in place Work with our maintained and academy mainstream and special schools to increase their capacity to meet higher levels of need Work with Behaviour Partnerships to increase their capacity to offer provision New improved contract and procurement arrangements now in place New extended offer at Oakfield for children with behavioural difficulties is now in place New extended offer at Maplewell Hall and Birchwood School for children with Autism now in place review of pupils in independent provision at key transition points	5	4	20	Treat	 Development of mainstream resource and special school capacity: We have two Secondary Resource bases already in place – Wigston and Iveshead – and are opening further resource bases at Rawlins Academy (10 place) Hinckley Academy (10 up to 20 places) and All Saints Primary Wigston (10 place) from April/Sept 2018. Co-production with parents has taken place to design this provision. Criteria for EHCP and top up funding has been reviewed and draft revised criteria being piloted during summer term. SEN Panel processes have been refreshed to include greater input from partners and decision making oversight. Post of SEND Inclusion Development Officer established, to lead on sufficiency planning 	4	4	16	Head of Service SEND & CDS During 2018/19		43
--------------	--	---	---	--	---	--	---	---	----	-------	---	---	---	----	--	--	----

	2. He	alth & Social	Care Integration	 / continuing budget overspend which is unsustainable Required savings targets not met Service Delivery STP programme 		5 year Strategic				A new System Stakeholder Forum					
A &C	2.2 (i)	LLR Sustainab ility and Transform ation Plan (STP) does not lead to the improved outcomes for health and wellbeing of residents, better care and quality of services, and financial	• Breakdown in maintaining a strong vision and joint partnership working across LLR	 outcomes are not delivered and the programme fails leading to reputational risks, partnership breakdown and financial instability within the health and care economy STP care pathway changes fail to maintain safe, high quality clinical care The shift of care from acute to community settings is not modelled or implemented effectively leading to unforeseen pressure in other parts of the health and care economy <u>Financial</u> The investment 	Director- Adults & Communiti es	 Plan has identified five key strands for change, they include the development of : new models of care focused on prevention, and moderating demand growth, and an integrated urgent care offer. A reconfiguration of hospital based services, subject to consultation. Redesigned pathways to deliver improved outcomes for patients and residents. Operational efficiencies - to support financial sustainability Getting the enablers right- 	4 4	4 16	Treat	 (SSF) will meet three times a year to support the shaping of the strategic direction; identification of priority areas; feedback and sense check on current engagement; identify future issues and test the SLT's thinking on current issues. Workforce Strategy to identify new models of working to manage the increased pressure on resources and to allow for planning to meet this additional demand. 	4	3	12	Director- Adults & Communiti es & Assistant Director – Strategy & Commissi oning Ongoing	44

			<i>e</i> • • • • • •			1
susta		including	financial balance is			
lity.	SOC in not fully	workforce; IM&T	being addressed			
	supported, leadi	-	through additional			
	to gaps in the	and social care	bed capacity			
	financial	commissioning	planning and			
	plan/assumption	•	consideration of			
	for delivering the	New STP	funding solutions			
	programme	Governance				
	The savings from	arrangements have	Consideration is			
	STP are not	been developed	being given to the			
	achieved, leadin		development of an			
	to gaps in the	new System	Accountable care			
	financial	Leadership Team	organisation (fully			
	plan/assumption	s (SLT) with	integrated Health &			
	for delivering the	membership from	Social Care) to			
	programme.	the five NHS	increase integration			
	A notional figure	of partner	across partners,			
	£5m impact on	organisations and	reduce duplication			
	ASC has been	the three upper tier	and enhance			
	highlighted within	local authorities.	decision making			
	the Strategic	Refreshed finance				
	Outline Case.	and capacity				
		modelling is being				
	People	undertaken as part				
	Partners are una	ble of the development				
	to provide suffici	ent of the sustainability				
	staffing resource	to and transformation				
	deliver the	plan.				
	programme lead	ng • Review of STP				
	to failure to deliv	er undertaken during				
	at the required	summer of 2017				
	pace and scale					
	Lack of LLR					
	integrated					
	workforce plans					
1 1 1	1 1	1 1	I I	· · · •	1	1 1

				 <u>Reputational</u> The communication and engagement plan for BCT is ineffective leading to lack of public support or opposition to the plans 										
A & C	2.2 (ii)	If we fail to effectively demonstr ate the impact of 'left shift' initiatives on social care, then this will lead to increased demand.	• Transferring patients early from UHL to ICRS 2 community services	 Initially this will increase the number of service users requiring assessment and services and potentially increase in demand on social care and providers. 	Director- Adults & Communiti es & Assistant Director – Strategy & Commissi oning	 Working closely with health to identify the potential increase in demand, impact on social care and how we can mitigate for this. Development of new models of care including integrated locality teams and Home First services will identify any cost pressures 	3 4	12	Treat	 Demand modelling to incorporate an understanding of interrelationship between health and social care. Utilise Caretrak as a tool to further develop understanding of potential impacts and corrective action required. Ongoing involvement of social care across STP workstreams to determine impact of left shift initiatives. More robust recording of both activity and cost will support a more robust understanding of contributory factors, leading to a more accurate identification 	3 3	9	Director- Adults & Communiti es & Assistant Director – Strategy & Commissi oning Ongoing	46

All	 LCC and partners do not have the capacity to meet expected increase in demand caused by the Welfare Reform Act 	 income Continual economic climate High unemploymen t / Reduction in wage increases Changes in the benefit system Introduction of Universal Credit transfers responsibility to vulnerable people Inadequate information for business cases jeopardising robust decision making More demand for advice 	 <u>Service Delivery</u> Service users losing support/income leading to a rise in number of people needing support from LCC and other local agencies <u>People</u> Families less able to maintain independence Difficulty in identifying and implementing effective preventative measures 'Hard to reach' groups slip through the net <u>Reputation</u> Cases of hardship / lack of support in media Potential inspection Public confused as to which Agency 	Director of Children & Families / Assistant Chief Executive	 A&C finance team monitoring impact of benefit changes on departmental income and debt recovery. Debt strategy plan approved and being implemented. Information booklet on major WRA changes developed and circulated to all A&C staff. To be revised April 2018 	4 4	16	Treat	 of demand management opportunities. Maintain awareness of legislative changes and timing of Welfare Reform Act roll-out. All new claims for service users in Harborough and Melton will have to be for Universal Credit from November 2016 (for those that would have previously claimed for any benefit that UC replaces). Claims for UC must be made online which causes a barrier for service users who don't have access to computers. It also affects LCC ability to help these service users. Awaiting DOH consultation on proposed new charging & assessment regulation to 	4	4 1	16	Departme nt ADS During 2018/19	47
		services												

Local Welfare		introduction of	
Provision post	Financial	Universal Credit.	
April 2015	A&C debt		
PIP migration	increases	Received roll out	
for new and	Demand led	dates for UC for each	
existing	budgets under	district. From Nov 16	
service users	more pressure	to March 18 for all	
including	Risk of litigation /	new claimants.	
appointee	judicial review	Existing claimants to	
and	Increased risk due	follow.	
deputyship in	to the migration		
receipt of	from Disability	Training has	
DLA who	Living Allowance to	commenced and a bid	
were under	Personal	has been submitted	
65 on 8 April	independence	for laptops to enable	
2013	Payments locally	remote finance	
commences	effective from 13	assessments so that	
13/7/15	July 2015 over the	the Benefits team can	
	following 2 years.	respond to Universal	
To be	The longer term	Credit cases more	
revised April	risk has also now	efficiently.	
2018	increased in	To be revised	
	relation to the		
	Governments roll-	12/17	
	out timetable that		
	most existing benefit claimants		
	will be moved over		
	to Universal Credit		
	during 2016 and		
	2017. However, it		
	has now been		
	acknowledged that		
	at least 700,000		
	claimants will not		
	be on Universal		
	Credit by the end of		

				2017. Government announced Nov 15 an intention to consult on transferring responsibility for Attendance Allowance to LA's current spending on Attendance Allowance nationally is £5bn To be revised April 2018													70
CR & A& C	2.4	Domiciliar y Care If the domiciliary care market does not have the capacity to provide high quality	 New Service users will not receive the reablement and domiciliary support that they need Existing service users will not transition smoothly from exiting providers to new providers New service providers will not be able to 	 Service users would be stuck in hospital beds or would not receive the care and support they need in their own homes. Service users who don't transition would remain with providers where the Council has no contractual agreement. Difficult for the Payments Team to align high number of errors/non- payment due to inaccurate CPLI's 	Director - Adults & Communiti es Assistant Director – Strategy & Commissi oning	•	HTLAH Steering Group continuing to meet during stabilisation and re-procurement phase. Project management support extended. Compliance and Quality Improvement Team continuing to provide additional support and oversight of higher risk providers and ensure	4	5	20	Treat	 Every provider has a mobilisation plan which is being monitored on a regular basis by Contracts. Ongoing monitoring of likely timescales for lots to be open included as part of intensive work with new providers. Third procurement of unallocated lots is in progress. Programme arrangements extended and resources allocated 	4	2	8	Director of Adults & Communiti es / Assistant Director – Strategy & Commissi oning / Assistant Chief Executive During	

services to local residents within the county, people may not receive services to meet their needs	 maintain service levels due to having insufficient staffing Not having relevant information to commission on behalf of health The Council will be unable to commission care for CHC patients because of inadequate information provided by NHS colleagues HART capacity to refocus on hospital discharge step-down compromised due to migration issues. 	Maintenance cases increasing and ability to transfer to independent sector reduced	contingency arrangements are working effectively in closed or unallocated lots. Weekly sit rep reports from all Providers outlining activity capacity and service failures.		as part of new strategic services structure. Programme Closure plan in development to manage transition to business as usual for all key activities.		2017/18	50
--	--	--	--	--	---	--	---------	----

3. ICT, Inform	tion Security		
All 3.2 If the Council fails to meet the information securition and governation ce requirer nts then there m be breat of the statutor obligation s	 vulnerability of personal, sensitive data taken offsite. More hosted technology services Greater emphasis on publication of data and vulnerability result in the Council being disconnected from PSN services, with possible impact on delivery of some vital services. 	 Assistant health checks in place Improved guidance about data transfer Improved guidance about data transfer Informatio Programme of communications in place to remanagement process in place Mobile device management process in place Mobile device management place Mobile device management place New security governance arrangements in place New security governance arrangements in place Increased communication 	51

and information to support integration of services and development of business intelligence.		 staff in place- made mandatory for all staff. All staff enrolled first of February 2017 Induction process includes requirements around information security New firewall in place providing two layers of security protection in line with PSN best practice Development of e learning refresher course Improved monitoring of e- learning completion through the new Learning Management System Development and implementation of Intrusion Detection Policy COMMS Plan in place to raise awareness with staff 						52	1)
---	--	---	--	--	--	--	--	----	----

All 3.5 Confails ma rob rec ma ent pro to effe ma infc n u its cus shi per dat not pro in cor e w Dai Pro Act res in rec ma ent pro to effe ma infc n u its cus shi per dat not pro act anot rec ma ent pro to effe ma infc nu its cus shi per dat not pro en act an ent s e ent s ent s ent s ent s ent s ent s ent s ent s ent s e ent s ent ent s ent ent ent ent ent s ent ent ent ent ent ent ent ent ent ent	rocesses offectively hanage hformatio under s ustodian hip, ersonal ata may ot be rocessed omplianc with the Data Protection Act 1998 esulting b egulatory ction nd/or eputation	Lack of a co- ordinated approach in place to index, review and manage historical case files (paper and electronic) with regard to retention or disposal decisions Retention periods could be exceeded and therefore personal and sensitive data held longer than necessary Retention schedules not developed or compiled with	 <u>Service Delivery</u> Service delivery adversely affected by out of date data <u>People</u> Details of vulnerable people held longer than required <u>Reputation</u> Potential adverse media attention and public lack of confidence Subject access requests may not be compiled with <u>Financial</u> Potential financial penalties Insurance implications <u>Legal</u> Non – compliance with IICSA Inquiry. Destruction of records could lead to a Criminal Offence Non-compliance with ICO and Data 	All Directors	Legal Services' view is that any fines for not retaining data when it should be retained for example in litigation or IICASA, would be greater than if data is kept securely for longer than legally required – but the retention of files (paper and electronic) should not be held for an indefinite period. <u>C&FS and Other</u> <u>Depts.</u> • Case files identified as needing to be indexed • Offsite storage established for children files • Indexing training provided • Record Management Guidance updated	5 3	15	Treat	 Establish project team to evaluate the overall retention position and plan for disposals to begin taking account of all requirements C&FS, IICASA, DPA, Insurance, and ICO. This should include the corresponding electronic information Establish costs involved 	5	3	15	Director (Corporate Resources) and Director of Law and Governan ce		53
--	--	--	---	------------------	--	-----	----	-------	--	---	---	----	--	--	----

			Indexing training not in place or provided	Protection Act - Principle 5							
CR	3.6	If a replacem ent (ERP) system is not implement ed effectively and by 2020 then the organisati on will not reap the full benefits of change	TBC	TBC	Director of Corporate Resources	Formalised project plan to procure replacement system Strict monitoring of progress against key milestones for early identification of progress issues Governance arrangements in place.	15	 Progress procurement of new system and user engagement 		6	54

C& FS	3.7	If the quality of data in C&FS Informatio n Managem ent System is too low to satisfy statutory requireme nts (e.g. data returns) this will impact upon service delivery	Tbc	Tbc	Director of C&FS	Tbc		20		• Tbc					55
----------	-----	---	-----	-----	---------------------	-----	--	----	--	-------	--	--	--	--	----

	4. Co	mmissioning	g & Procurement													
AII	4.1	If the Authority does not obtain the required value and level of performan ce from its providers and suppliers then the cost of services will increase and service delivery will be impacted	 Lack of robust contract management /performance measures for in-house services Robustness of supply chain Reduced funding and resources Staff turnover leading to lack of continuity in contract management Insufficient investment in contract management skills and competencies 	 <u>Service Delivery</u> Business disruption due to cost and time to re-tender the contract Standards/quality not met resulting in reduced customer satisfaction Relationships with providers/suppliers deteriorate <u>People</u> Additional workload where disputes arise <u>Reputation</u> Customer complaints <u>Financial</u> VfM/ Efficiencies not achieved Increased costs as LCC has to pick up the service again Unfunded financial exposure 	Director – Corporate Resources & Transform ation / Assistant Director – Corporate Services	 curre undel mana and n of cor New Comr & Pro Strate with a frame meas progr key p identi earlie oppol New arran place Contr Mana Fram availa Toolk Recru comp Comr Supp streng contra mana 	rtake agement nonitoring ntracts missioning pourement egy in place agreed ework for suring ress against principles to ify issues at es rtunity governance igements in agement ework able in the cit uitment pleted for missioning port Unit to gthen	5 3	3 15	Tre at	 Implement improved KPIs for all contracts Implement training for all contract managers Complete key supplier cost reduction programme 	4	3 1	Cor onir Pro Su 2 Di	ad of nmissi ig and curem ent pport iring i8/19	56

						•	LLR and LCC Commissioning Programmes completed					57
E& T	4.2	If Arriva is successfu I in its concessio nary travel appeal then reimburse ment costs for the total scheme could	твс	<u>TBC</u>	Director E&T	•	Current mitigating actions include an appeal response to the DfT on 29/1/18 (use of external consultant to support). Submission of evidence has refuted all claims for additional costs by Arriva save for reclassification of	15	<u>TBC</u>			

	increase significant ly			The till appead detern possik month until the is detern is detern maxim the Ar remain £916, which reclas approv £118, • There risk th approv adopte Arriva be app then the is likel expos furthe	hination is by up to 18 s therefore he appeal ermined the hum risk for riva appeal hs at 000 (of sification is k. 000). is a further at if the ach ed by is found to propriate he county y to be ed to a r financial pm other					58
--	-------------------------------	--	--	---	---	--	--	--	--	----

5. 5	Safeguarding													
CF 5.1	Historic: If as a result of a concerted effort to explore abuse by the Independ ent Inquiry into Child Sexual Abuse (IICSA) and Police	Historical Concerted effort to explore historical exploitation and abuse in response to the Independent Inquiry and Police Operations	 <u>Service Delivery</u> Need to review and redesign current service in the light of lessons learnt Potential adverse media and political risk <u>Financial</u> Increased cost of settling claims and service redesign 	Reputatio <u>n</u> Chief Executive <u>Reputatio</u> <u>n &</u> <u>Service</u> <u>Delivery</u> Director - Children & Family Services <u>Legal</u> Director of Law & Governan ce <u>Financial</u> Director - Corporate Resources	Historical • Established Independent Inquiry Strategic Governance Group to oversee planned investigation and information gathering • Pro-active engagement with the Independent Inquiry • Refreshed Communication Strategy and Implementation Plan • Appointed Legal Support and Counsel • Member briefings held (x2) • Partnership governance is in place • CSE Executive Role and Terms of Reference revised and agreed	5	5 25	Treat	 <u>Historical</u> Establish close working relationships with other authorities Further revision of Comms Strategy Review of current internal governance arrangements Continue to work closely with the IICSA team Set funding aside to meet the costs of the inquiry Review activity in the light of the delay to the Janner investigation public hearings Carefully plan activity and monitor progress and expenditure 	4	5	20	Reputatio n_Chief Executive Reputatio n_& Service Delivery Director - Children & Family Services Legal Director of Law & Governan ce <u>Financial</u> Director - Corporate Resources Ongoing	{

50

	6. Bro	exit															
AII	6.1	Uncertainty and significant knock on consequen ces on public services (including potential legal, regulatory, economic and social implication s), and the local economy as a result of the United Kingdom leaving the European Union	Uncertainty and impact on local government	 Service Delivery Uncertainty around ESIF and other funding streams Uncertainty around any potential changes to government policy following the formation of a new government. Lack of steer for local policy making. Impact on the Economy due to uncertainty during the negotiation period. Impact on staffing in commissioning contracts involving high numbers of non UK citizenship e.g. home care and cleaning. Legal Changes in UK/EU legislation e.g. procurement, employment Einancial Uncertainty around EU funding, inward investment Further austerity 	CE/Direct ors	•	Working with partners to maximise benefit from existing European bids and programmes Review of significant policies relevant to the management of these risks (e.g. investment policy) to ensure they are fit for purpose in the new environment; Assessment of impact of the risk assessment on the assumptions used to generate the medium term financial plan Access a diverse range of external funding opportunities Reflection of Brexit impact in revised Enabling Growth Plan Gathering intelligence and	4	4	16	Treat	 Monitor post Brexit negotiations and national policy direction and maintain an overview of the developing situation. Leicester and Leicestershire Business survey is being commissioned to review business confidence, investment plans and barriers to growth. 	4	4	16	Assistant Chief Executive	60

	7. Pe			measures and demand pressures <u>People</u> Impact on incumbent workforce who have non UK citizenship e.g. agency workers		•	modelling future scenarios relating to Brexit impacts to inform future policy. The LLEP's Business Board has agreed to monitor Brexit impacts (both negative and positive) on the economy and the Economic Growth Team will undertake this work for the LEP											61
CR	7.1	If sickness absence is not effectively managed then staff costs, service delivery and staff wellbeing will be impacted	 Policy and Procedures are not in place Lack of training for managers Monitoring and reporting systems are inadequate or not in place Support mechanism 	 <u>Service delivery</u> Increased pressure on services to provide same/more with less Increased requirement for temporary/casual staff. <u>People</u> Negative impact on staff if they perceive absences are not 	Director of Corporate Resources	•	Revised Policy in place. HR advice being provided to Managers. Training for Managers in place. Comprehensive monitoring and reporting (Manager; Depts, DMT; CMT) to identify issues/solutions.	4	4	16	Treat	•	Targeted work with managers and services (Intensive Support Project). Develop, agree and implement Increment Policy (on hold) Implementation of absence management triage project - impact reporting at 3; 6 & 12 mths before full roll out. Pilot has ended – not taken	4	3	12	Assistant Director, Corporate Services (Corporate Resources) During 2018/19	

			s not in place	 managed properly Loss of productivity <u>Reputation</u> Avoidable costs to LCC in difficult times <u>Financial</u> Increased staff costs 			Mental Health First Aiders being utilised.					forward					
All	7.2	If Depts are unable to recruit and retain skilled staff promptly (social workers and team managers) then some services will be over- reliant on the use of agency staff resulting in budget overspen ds and poor service	 No Recruitment or Retention Strategy 	 <u>Service Delivery</u> Children and young people potentially left at risk of harm <u>People</u> Additional training in Signs of Safety for agency workers Additional time required for permanent staff to support agency staff Recruitment and retention of staff <u>Reputational</u> The Local Authority is not seen to support staff through impact on recruitment and retention 	Director of Children & Family Services	•	Monthly reporting on agency staff and associated costs Working with Corporate communications on a new Social Worker recruitment campaign Monthly reporting on caseloads and supervision policy Completed a growth bid and identified establishment for additional staff	5	5	25	Treat	 Development of a recruitment and retention strategy Continue actively recruiting to permanent posts Continue supporting Social Workers, e.g. Newly Qualified Social Workers, through recruitment and retention strategy 	5	3	15	Assistant Directors Children's Social Care and E&T During 2018/19	62

8	8. Bu	delivery siness Cont	-	 Additional budget costs leading to overspend Required savings targets not met 													
CR	8.1	If suppliers of critical services (e.g. HTLAH) do not have robust business continuity (BC) plans in place then the Council maybe unable to deliver services	No BC framework in place i.e. definition of a critical supplier or identification of critical services. Guidance or communication not in place No monitoring of supplier or business continuity compliance for critical services Contract specifications are not clear as to BC arrangements	 Service Delivery Delays in services may place vulnerable people at risk Re-work /re- planning due to clash of priorities People Council unable to support people in receipt of service to adverse outcomes for individuals Reputation Damage from negative publicity and loss of trust with the public Financial Supplier BC failure results in additional costs to source alternative providers 	Assistant Chief Executive Chief Executive' S Departme nt	•	Contract Management and compliance monitoring in place. Improved Frameworks for commissioning services detailing BC requirements.	5	4	20	Treat	 Programme of work with Suppliers to develop BC plans. Working with Social Care to develop Provider Failure Plans. Improvements being made to contract specifications to ensure BC plans in place for all key contracts. Improving communications between Procurement & Commissioning and the Resilience Team regarding notification of new contracts. 	5	3	15	Resilience & Business Continuity Manager During 2017/18	63

9	. Hiç	ghways Netw	ork –	Winter Maint	ena	nce								
E& T	10.	The absence of a depot in the North East of the County may impact on the delivery and the cost of the Winter Maintena nce programm e for 2019/202 0	•	Tight timescales Sourcing site and undertaking any improveme nts	•	Unable to meet planned programmes of work Risk of liability for duty of care under the Highways Act Adverse publicity and reputational damage	Director of Environme nt and Transport	•	Property Business Partner sourcing a replacement depot / facility.	4	4	16	Treat	 A further feasibility study is underway at Sysonby Farm. As an alternative option to Sysonby Farm, an opportunity of using the Melton Borough Council depot is being investigated. 4 1 4 1 4 2017/18
1	0. En	vironment					•			_				
E& T	11. 1	If the Authority fails to respond and manage Ash dieback (Chalara) at a local level, then it could be		Lack of preparation to deal with the impact of Chalara i.e. Awareness, Planning, Action and Recovery	•	Potential for serious physical harm/damage to property Potential for insurance claims against council Ecological/landsc ape impacts Reputational damage Financial –	Director of Environme nt and Transport	•	Cross departmental project team set up to devise approach to council's response to Ash Dieback Assessment of current extent and progress of disease in	5	3	15	Treat	 Cross Departmental project team to develop an approach and Strategy including associated costs for implementation Work with the Tree Council to pilot a local action plan for ash dieback Identification and

exposed	additional	Leicestershire		involvement of		
to	resources to			external partners		
financial,	undertake tree			and communication		
reputation	inspections,			with Members		
al, and	replanting			 Undertake 		
environm	strategy,			inspections twice a		
ental	availability of			year to determine		
conseque	qualified tree			extent and progress		
nces	surgeon to			of the disease.		
	undertake work					

Department

A&C =	Adults & Communities	E&T =	Environment and Transport	
CE =	Chief Executives	PH =	Public Health	C&FS =
CR =	Corporate Resources	All =	Consolidated risk	

Risk Removed from the Corporate Risk Register

Dept.	CRR Risk No	Risk Description	Current Risk Score	Reason	Date of Removal
C&FS	1.2	Local Authority legal requirements to meet deficit budgets from maintained schools becoming sponsored academy, and pressure from Sponsors to meet repair costs.	16	Agreed by Corporate Governance Committee	17 November 2015
E&T	5.2	LLEP-insufficient funding for transport schemes to deliver economic growth and LTP3 /Strategic Plan. Risk regarding match funding requirement for the Council	20	The risk has been downgraded from red to amber as the likelihood has reduced from 4 to 2 following the confirmation of future local growth funding in the Autumn 2015 Statement (further details to follow in the new year). As the risk score has been revised from 20 to10, this risk has been removed from the Corporate Risk Register but it will continue to be monitored through the Environment & Transportation Departmental Risk Register.	19 February 2016
E &T	4,1	Impact of an increase in unplanned and speculative local developments to address the shortfall in the five year housing supply which could have an adverse impact on the functioning of the transport network.	15	The risk has been downgraded from red to amber as the likelihood has been reduced from 5 to 4 as a result of Districts having moved through the consultation phases and firmer programmes are now in place for publishing Core Strategies. LCC is also starting discussions with Districts on possible cumulative impact studies. As the risk score has been revised from 15 to 12, this risk has been removed from the Corporate Risk Register but it will continue to be monitored through the Environment & Transportation Departmental Risk Register.	13 May 2016
A&C	2.1	Care Act 2014 Funding Risk for 2016/17 and beyond due to Care Act Phase 2 implementation delayed by	16	The current risk score has been reduced from 16 to 12 as a result of ongoing implementation of the Adult Social Care restructure, which has enabled the department to ensure the risk of unfunded posts, is significantly reduced. The Commissioning and Quality Action Plan has been completed and the Care Pathway and Business Support action plans are in progress. The risk will continue to be monitored as part of the A&C Departmental	26 May 2017

		Ministers until April 2020		Risk Register	
C&FS	4.1	Supporting Leicestershire Families (SLF) - If LCC is not able to provide adequate outcomes data to partners then partner contributions to the pooled budget may not continue.	15	The risk has been reviewed (Assistant Director – Education & Early Help) and the current risk score re- evaluated and reduced so that this is now being managed within the Supporting Leicestershire Families Delivery Plan. The risk has been reduced as all partners have agreed continued funding and further work has been undertaken on outcomes data.	26 May 2017
C&FS	1.7	 If suitable placements are unavailable for unaccompanied asylum seeking children (UASC) who arrive in the County, either planned or unplanned, as a result of : potential mandatory requirement to engage in the National Transfer Scheme; resettlement of UASC from Calais in line with the requirements of Dublin III agreement and the Dubs amendment; continuing response to spontaneous cases of UASC arriving in the County then there will be significant pressures on meeting the department's statutory duties to UASC as well as financial pressures in meeting their complex needs. 	20	The UASC team is now established and the numbers of UASC are not as high as initially forecast. The current risk score as been reduced from 20 to 12. The risk will continue to be monitored as part of the Children & Families Services Departmental Risk Register	22 September 2017
CR	3.1	If there is an outage ICT systems may not be able to be restored quickly and effectively which could have a major impact on service delivery	15	The further mitigating actions have been completed and the current risk score as been reduced from 15 to 12. The risk will continue to be monitored as part of the Corporate Resources Departmental Service Risk Register.	22 September 2017
CR	3.4	If there is insufficient capacity to provide information technology	16	The current risk score has been reduced from 16 to 12 as a result of ongoing implementation of the New Target Operating Model and improved resource planning processes. The risk will continue to be monitored as part of the Corporate Resources Departmental Register	22 September

		solutions then service improvements and savings will not be achieved.			2017
CFS	5.1	Safeguarding- Current Risk element If as a result of a concerted effort by the IICSA and Police Operations there is a significant increase in identified cases, then the Council does not have the capacity to meet the demand on the CSE resources	25	Note that whilst the 'Historical' risk and score is to be retained unchanged in the CRR, the IICSA ¹ Strategy and Governance Group proposed (6 December 2017) that the 'Current' risk (<i>If as a result of a concerted effort by the IICSA and Police Operations there is a significant increase in identified cases, then the Council does not have the capacity to meet the demand on the CSE resources</i>) should be removed from the CRR, but nevertheless retained (and reworded) in the C&FS Departmental Risk Register. This suggestion is based on the limited connection between historical allegations and the current CSE service which is now established within the departmental budget in terms of costs and funding.	29 January 2018
CE	2.5	Health & Social Care Integration (BCF) If Health and Care partners fail to deliver the local integration programme in accordance with national Better Care Fund (BCF) policy, within the financial envelope of the BCF pooled budget and by meeting national metrics, then elements of BCF funds could be withheld.	16	 The level of financial risk was reduced after a letter was received from the Ministry of Housing, Communities and Local Government (formerly the Department for Communities and Local Government) and Department of Health and Social Care (formerly – Department of Health) Secretaries of State on 6th December 2017 to confirm that due to the improved the DTOC (Delayed Transfer of Care) performance that there will be no impact on the Improved Better Care Fund – (IBCF) allocation for 2018/19. The risk will be reviewed following the publication of the National BCF Operational Guidance for 2018/19 which is due to be published soon. The current risk score has been re-evaluated and reduced (from 16 to 9) 	23 April 2018
All	3.3	ICT, Information Security (Business Intelligence) If there is a failure to provide business intelligence required to support transformation, inform commissioning, and strategic planning and to complete statutory returns then policy will not be evidence based.	15	 The current risk score has been reduced from 15 to 12 as good progress has been made across a number of areas: Data and Business Intelligence Strategy and Implementation Plan in place. Ongoing support for front line managers in managing data and provision of Tableau data quality reports to identify weaker areas. Tableau self-service dashboards rolled out across many areas of the council. Bl Development team established and Business Partners in post to manage relationships with each Department and with IT. Ongoing work to improve data quality issues. Many performance dashboards have an accompanying data quality dashboard. The risk will continue to be managed within the CE Departmental Risk Register. 	23 April 2018

E&T	9.1	Health & Safety (SEN risk assessments)	15	All outstanding SEN transport risk assessments were completed by the end of January 2018. Processes have been embedded to ensure assessments are revisited with increased staff resource focussing on planned review updates.	23 April 2018
		If the Service is unable to recruit appropriate skills / resources to implement Audit recommendations then service users' safety is at risk as well as financial and reputation consequences.		The Current Risk Score has been reduced to 5 and the risk will be managed at Departmental level.	

This page is intentionally left blank