

COUNCIL CORPORATE RISK REGISTER – PROGRESS REPORT

(Quarter 4 - Progress to 31 March 2020)

From Quarter 2 onwards, direction of travel arrows will indicate whether progress for that quarter is:

better  *worse*  *stayed the same*  since the last quarter

All changes made since last quarter are **highlighted in RED**.

1.THE IMPACT OF COVID-19 ON THE DELIVERY OF COUNCIL SERVICES – Extended Leadership Team		
There is a risk that	due to the prolonged response and recovery phases of COVID-19 there will be significant impact on the delivery of Council Services.	
Caused by the loss or degradation to;	Current controls & measures in place to manage the risk at end Quarter 4	Additional controls & improvements planned during Quarter 1
Council Services	Critical Council Services <ul style="list-style-type: none"> All Critical Services were pre-identified in Directorate & or Service Level Business Continuity Plans All Council Services prioritised to support Incident Response and Critical Service activities and resourced accordingly. Separate contingency arrangements were introduced for social care and education services in line with national guidance as the guidance was issued. 	Critical Council Services <ul style="list-style-type: none"> A letter was issued to 'Key Workers' in the Council in case they are stopped by the Police when travelling to deliver critical or essential Council Services. All Critical Services continue to be to be re-assessed and prioritised. New services and new ways of delivering services were introduced to respond to the needs of the incident ie. Multi agency PPE sub group formed. An assessment is required on the impact of recommencing services and the potential impact on support staff in place delivering critical services eg.Logistics
	Non-Critical Council Services <ul style="list-style-type: none"> Dependent on available resource non-essential services, programmes of work and projects were reduced or stopped. Information about Council Services affected by COVID-19 were published on the Council website (Cumbria.gov.uk). 	Non-Critical Council Services <ul style="list-style-type: none"> Those services, programmes of work and projects that were reduced or stopped are under review going forward in order to establish a better way of delivering Council services. Non critical services recommence, including Highways, Capital Programme and all Household Waste Recycling Centres.
Council Workforce	Health, Safety & Wellbeing <ul style="list-style-type: none"> The first staff communication from CMT was received on 3 March regarding the evolving COVID-19 situation and a link to PHE guidance was shared at that time. Further updates to staff were issued from the Director of Public Health with advice from PHE on preventing the spread of COVID-19 & early advice on using facemasks and gloves. Staff were asked to prepare to work from home and ensure they could access Council IT Network. National guidance then encourages staff to work from home if possible and eventually on 23 March the UK went into lockdown and the government instructs staff to work from home and comply with new social distancing measures. Staff receive Health & Wellbeing advice of what to do if you develop COVID-19 symptoms and have underlying health conditions. Daily corporate messages were issued to staff offering H&S advice on a number of topics including: <ul style="list-style-type: none"> shielding of vulnerable and extremely vulnerable staff or those who live with someone who is vulnerable/ extremely vulnerable. home working & setting up home work station lone working looking after your mental and physical health alternative ways of keeping in touch with your colleagues e-learning packages to support working from home Issues around Personal Protective Equipment (PPE) supply start to arise and a PPE sub group is established to take a coordinated approach across Health and Care Sectors and establish regular and reliable supplies of PPE. Corporate message is issued reminding staff of who are keyworkers and that PPE is the no.1 priority for all partners through the Strategic Coordination Group and that PPE issues are being raised with Central Government and through the supply chain. There is regular engagement with Trade Unions. 	Health, Safety & Wellbeing <ul style="list-style-type: none"> Corporate messages continue to be issued to staff, offering ongoing advice and support on the following topics: <ul style="list-style-type: none"> looking after your mental and physical health PPE the availability of swab testing for essential workers (and members of their household) who work for the Council. A full list of who can access testing is provided and how to organise testing. A staff survey was issued on 22 April to check how people were feeling and if there is anything that the Council could do to help staff at work and at home. Based on the outcome of this survey the Council responds to questions about working from home, such as borrowing equipment and the correct way to set up your workstation at home. Other top tips on lone working and staying connected to your team were provided. A new network of wellbeing and coaching champions are put in place and a new support line where staff can contact this team confidentially. All Directorates/ Service areas are requested to complete COVID-19 H&S Risk Assessments along with supporting evidence by 06 May. Refer to additional commentary on controls & measures noted against the separate Corporate Workforce Capacity, Skills, Relationships, Safety & Wellbeing risk.

	<ul style="list-style-type: none"> • Refer to additional commentary on controls & measures noted against the separate Corporate Workforce Capacity, Skills, Relationships, Safety & Wellbeing risk. 	
	<p>Staff Prioritisation & Redeployment</p> <ul style="list-style-type: none"> • In line with Incident Response and the delivery of Critical Services staff resources are prioritised. • Council wide request made for staff to be used differently and to support frontline and Critical Services and staff were asked to complete a questionnaire. 	<p>Staff Prioritisation & Redeployment</p> <ul style="list-style-type: none"> • We are seeing incidences of staff who have delayed their retirement to support the COVID-19 response and also staff who have recently retired offering their support.
Governance	<p>Council Decision Making</p> <ul style="list-style-type: none"> • Decision taken to suspend Member Committee meetings and associated working groups. • The ODR guidance and procedures on recording and publishing officer decisions including key decisions had been refreshed in Nov 2019, and this recent refresh of these documents will help officers to record key decisions during COVID-19 incident. • All DMT's requested to maintain decision logs and Monitoring Officer issued standard template and guidance to support this. • Monitoring of national developments in relation to the COVID-19 response commences and reported routinely to CMT/ELT. 	<p>Decision Making</p> <ul style="list-style-type: none"> • All DMT decision logs are reviewed weekly by Statutory Officers Group (SOG). • After a period of review by SOG, Officer Decision Record's guidance and templates are revised and reissued to improve the consistency of approach. • A change to Legislation enables Member Committee meetings to take place as virtual meetings and will be supported by ICT team. Prioritised Council meetings to go live end of May/early June.
	<p>Council Incident & Business Continuity Response</p> <ul style="list-style-type: none"> • First Strategic Coordination Group (SCG) multiagency assessment teleconference took place on 26 Feb 2020 and formally declares a MAJOR Incident on 11 March. • Council Business Continuity (BC) Working Group is stood up and requested all Directorates and Services to conduct scenario planning based on a Pandemic Incident and associated planning assumptions. Scenario planning documents were issued by the BC working group. • Strategic Coordination Group (SCG) formally declares COVID-19 as a MAJOR Incident on 11 March. • An Incident Response framework was developed and CCC Silver Command takes Leadership of the Councils Business Continuity Response and liaison with Strategic (SCG) & Tactical (TCG) coordination groups. As a result, the BC working Group is stood down. • All Directorates are requested to provide Situational Reports (Sitreps) for daily Silver Command meetings. A standard Sitrep template is developed, focussing on staff availability and the delivery of critical and essential services. 	<p>Incident & Business Continuity Response & Recovery</p> <ul style="list-style-type: none"> • Strategic (SCG) and Tactical (TCG) Coordination Groups as well as Silver Command continue to manage COVID-19 incident • By late April, SCG/ TCG and CCC Silver Command reduce their meeting frequency from five to three days a week - Monday/Wednesday & Friday
Council ICT & VPN	<ul style="list-style-type: none"> • In preparation for an incident of this type and as a result of lessons learned from 'the Beast from the East' severe weather incident, VPN capacity to enable large numbers of staff to work from home was increased substantially. • Due to the expected increase of VPN users to over 6,300 VPN connections by 25 March, compared to around 400 usual VPN connections per day, a number of Corporate messages were issued to staff on how to ease the pressure on ICT infrastructure. • A new BT teleconference service was provided, with 200 BT numbers distributed across the Council. • Additional mobile phones were requested and procured by 01 April. • Refer to additional controls & measures noted against the separate Corporate Information Security Arrangements Risk. 	<ul style="list-style-type: none"> • A new internal social media platform, Yammer, was introduced as a way of keeping in touch with colleagues. • A number of corporate messages were issued reminding staff to keep Council IT and Information safe and secure and to be aware of increasing levels of cyber threat & government branded scams related to COVID-19. • ICT confirm work to increase VPN capacity now complete which will be the final piece of work to improve overall provision • ICT make improvements to <i>Skype for Business</i> platform, providing increased network performance and additional user functionality. ICT also inform staff of the plan to move from Skype to Microsoft Teams and asked staff not to use third party solutions due to security concerns. • Even with VPN at full capacity, specific teams requiring access to large data files struggle to carry out their response specific roles while working at home due to VPN restrictions (ie. P&I team supporting MAIC subgroup) • Refer to additional controls & measures noted against the separate Corporate Information Security Arrangements Risk.

<p>Council Premises</p>	<ul style="list-style-type: none"> When the UK went into Lockdown on 23 March, all staff were instructed to work from home and no longer enter work premises if their role allowed and to follow government advice on social distancing measures. In response to further government guidance the Council temporarily closes its buildings to the public and no longer provided face to face services. Other premises, such as care homes are prioritised for maintenance and other forms of support. 	<ul style="list-style-type: none"> A Working Group is established to look at a new operating model for the corporate estate. A Strategy for staff returning to Council premises is under review by CMT.
<p>Council Finances</p>	<ul style="list-style-type: none"> A Finance & Legal Multi Agency sub group was stood up. Emergency cost codes were issued for the COVID-19 incident and additional codes were introduced as required. The impact of COVID-19 resulted in additional expenditure, with the impacts being identified by Service Managers and supported by the finance team. Regular updates on financial impacts were provided to DMT's and CMT. ODR and log mechanism introduced for additional expenditure Major financial impact relating to the cost of Personal Protective Equipment Monitoring in place to record loss of income from certain sectors (port of Workington, registrars, etc) MHCLG confirm Cumbria County Council will receive £16 million from the first tranche of government funding. Refer to additional controls & measures noted against the separate Corporate Financial Sustainability Risk. 	<ul style="list-style-type: none"> Completion of the first, second and third returns to MHCLG on the financial impact of COVID-19 highlights that government funding is significantly less than the forecasted expenditure. The LGA and CIPFA issue a guidance document 'Protecting your supply chain from fraud' and shared with Silver Command and relevant service areas. Cumbria County Council received £9.117 million from the second tranche of government funding in May (43% less than first tranche allocation - largest percentage reduction outside of City of London). The allocation basis changed with the first tranche allocated on the 'Needs Formula' whilst the second tranche has been allocated on population and then split County (65%) and districts (35%). A total of £25.2 million has been allocated by government to fund the Councils COVID-19 response and although a third tranche of funding is expected from MHCLG it will still be significantly less than our forecasted impact. The Financial impact of COVID 19 on 2019/20 budget was reported to Cabinet on 11th June. Refer to additional controls & measures noted against the separate Corporate Financial Sustainability Risk.

Resulting in

Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating				
<ul style="list-style-type: none"> Impact on Council Plan Delivery Plan Impact on MTFP & Financial sustainability of CCC Legal implications Reputational Impact Impact on customers 	<p>This risk has impacted every area of the Council and will potentially impact most areas of the Council Plan Delivery Plan.</p>	<p>Q4 RISK RATING Likelihood x impact</p>			<p>20</p>	
		<p>Previous quarter</p>	<p>Current quarter</p>	<p>End Yr Target</p>	<p>DOT</p>	
		<p>N/A</p>	<p>20</p>		<p>20</p>	<p>New Risk</p>
		<p>5 4</p>				

2.PREVENTION OF & PLACEMENT SUFFICIENCY FOR CHILDREN LOOKED AFTER – Lynn Berryman & Colin Cox		
There is a risk that	The Council is unable to implement adequate preventative measures to reduce the number of looked after children impacting on the sufficiency of appropriate placements.	
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.
The ineffective delivery of the CLA Plan and related programme of activities	<ul style="list-style-type: none"> A CLA Plan is in place and progress against the actions is reported monthly to the Placement Commissioning Board which is chaired by the Assistant Director Children and Young People and also reported to the Children Looked After Recovery Board which is chaired by the Executive Director Economy & Infrastructure. Additionally, the CLA Plan is being monitored and controlled via a new reporting mechanism by the monthly CLA Workstream Board, chaired by the Assistant Director Children & Young People. Key aims of the CLA Plan in respect of this risk are working towards; <ul style="list-style-type: none"> An improved availability of local residential placements for children and young people in Cumbria An increase in the number of in-house foster carers Ensuring there are sufficient services to meet identified needs and these are based on greatest need. An increase in prevention based services leading to a reduction in the number of children looked after. Ensuring we use legal frameworks and guidance to ensure relevant contributions are made by other agencies to the cost of placements. The scheme of delegation for agreeing external placements as long term has been updated and a panel approach has been implemented. 	<ul style="list-style-type: none"> A workshop took place in July 2019 with Health colleagues to explore and identify New Ways of Working. During Quarter 4 a further workshop has taken place and key actions are being developed and will be incorporated into the Quality and Development plan. There has been a further external review of all children in external residential provision to identify any children who could safely return to their families. This report on this review was presented to the CLA Board in January 2020 and we have an identified cohort of children in external residential placements with a plan to return home within 20/21. Over the last two quarters, there were continuing challenges around required assessment and eligibility processes and the financial responsibility for North Cumbria Clinical Commissioning Group and Morecambe Bay Clinical Commissioning Group. Work has been ongoing in Quarter 4 to address these challenges, supported by a robust evidence base and consideration of escalation methods.
Unavailability of appropriate placements to match young peoples assessed needs	<ul style="list-style-type: none"> Assistant Director and Senior Management analysis and tracking of placements takes place at least monthly via Area Scrutiny Meetings and Legal and Placement Panels to ensure children are in the right placement, for the right length of time and that care planning and managerial oversight at every level addresses any delays. Monthly Placement Commissioning Board, chaired by AD Children & Young People, provides oversight and ensures the delivery of key work streams including; the Sufficiency of placement duty, the CLA Plan and the Regional Adoption Agency. All actions identified by the review of all High Priority Children Looked After (CLA) cases are monitored by the CLA Board and those in external residential provision are being tracked on a weekly basis by the Assistant Director, particularly those who could return to parents/carers. Weekly Performance meetings at Assistant Director (AD)/ Senior Manager level is tracking new entrants to care, exits from care and any placement moves of all CLA and associated costs. New sites have been agreed for internal residential provision of two new four bedded homes. The project plans are being managed by the Residential Development Group, chaired by the AD Highways & Transport. Oak Tree Road, Kendal home opened in 	<ul style="list-style-type: none"> Work as part of the move to Regional Adoption Agency to look at best practice on the journey to adoption and how we implement in Cumbria is ongoing. A Campaign for carers for complex children started in Quarter 1 2019/20 and is ongoing. We continue to work with Lancashire County, Blackburn with Darwen and Blackpool Councils in order to improve the commissioning and sufficiency planning of placements to increase stability and permanence for looked after children. It is hoped that this will lead to the identification of more collaborative ways of working between LAs and IFAs in order to explore how we can place more children locally in placements that meet their needs.

	<p>Quarter 4 and the Penrith home will be delayed now due to COVID 19.</p> <ul style="list-style-type: none"> We continue to align improved understanding of CLA cohort with the recruitment of carers so that the need leads the activity. Cumbria Foster Carer recruitment campaign is in place with strong branding and community presence. The Fostering Service has been reshaped to ensure improved support to carers within their local area is ongoing. An Adoption Team is in place to reduce time that children are placed in foster care before being placed in their adoptive placements. We continue to strengthen our relationship with providers to work on being the commissioner of choice due to the competition of limited placements in the system. 	
<p>Ineffective 'Signs of Safety' (SoS) practice model</p>	<ul style="list-style-type: none"> SoS Steering Group continues to meet on a monthly basis to drive progress and monitor the project implementation plan, this Group also reports monthly to the Workforce Practice Board chaired by the AD Children and Young People. Regular external facilitated practice lead sessions takes place to provide leadership and ensure the model is being consistently applied. Two dedicated practice development officers in place to support the delivery of the implementation plan to timescale. District Implementation plans are in place to deliver the county implementation plan on a local level. The audit framework has been adjusted to include Signs of Safety practice and a SoS collaborative audit approach is now implemented across the County to monitor the implementation of SoS. Visits to other Local Authorities who have implemented SoS to learn from best practice and there is sharing of good practice examples with all staff on our share point site. SoS briefings for all staff were held in Quarter 4 to further embed and raise awareness of the values, principles and ways of working within the SoS practice framework. The Assistant Director and Senior Managers will be leading these briefing sessions. 	<ul style="list-style-type: none"> A demonstration of the SoS IT solution planned for March 2020 has been postponed due to COVID-19, this demonstration will enable the service to consider the benefits of purchasing and implementing the system.
<p>Ineffective delivery of an integrated early help/healthy child programme system</p>	<ul style="list-style-type: none"> Partnership approach to designing new services is in place; service specification now complete for early help services and procurement underway. A Voluntary Ex ante Transparency Notice (NEAT) has been issued for the clinical contract with North Cumbria Integrated Care NHS Foundation Trust. A workshop took place in December 2019 to review the role of Children's Trust Board in overseeing the management of these services and further work to be undertaken during 20/21 A new Child & Family Service started in January 2020 and clear monitoring arrangements are in place to ensure that the new contract is meeting requirements and having the expected impact on demand. 	<ul style="list-style-type: none"> The New service specification and contract has still to be agreed with North Cumbria Integrated Care NHS Foundation Trust.

<p>Inadequate preventative measures and Services</p>	<ul style="list-style-type: none"> Commissioned Edge of Care Service from Barnardos for 0-9 years age range delivered across the County. Joint funded Safer Families Project in West Cumbria started in October 2018. New integrated Multi Agency Team in West Cumbria to manage new demand differently started in June 19. 10 family resilience workers are now in post and will support the prevention of children going into care. There was agreement to implement a PAUSE (Creating Space for Change) Initiate County Wide, this is part of a National Charity Scheme to support vulnerable women to take control of their lives and prevent their children being taken into care after showing success in West Cumbria in the last 18 months. Recruitment for this Programme County Wide has taken place and the service commenced 1 November 2019. Rated 'Outstanding' by Ofsted, Cumbria's Edge of Care outreach and respite services provided by Sedbergh Drive and Blackwell Road. Cumbria Family Support Service is a voluntary service in place to offer practical and emotional support for children and families who are experiencing difficulties in Carlisle, Eden and West Cumbria. District Senior Managers ensure that edge of care services prioritise those children potentially most at risk of coming into care within the following 3 months. There has been a review of the current Barnardos 0-9 Edge of Care Service and this will continue for 20/21. 	<ul style="list-style-type: none"> Consideration is being given to extend the Safer Families Project across the County after the success within West Cumbria. Plans have also started to develop and implement an Adolescent Integrated Service which will work primarily to keep children post 13 years safe and to remain within their own home.
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Resulting in

Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating			
<ul style="list-style-type: none"> Additional placement moves and /or placements at a distance for children looked after. Overspend of the CLA budget. Reputational damage to the Council. Partial or total interruption to service delivery to customers leading to partial or non-delivery of corporate priorities. 	<p>1.10 Corporate Parenting Board will oversee the Children Looked After (CLA) and Leaving Care Strategy to be implemented and embedded - action plan to be developed - June 2019, reporting on action - Sept 2019.</p> <p>1.11 New children, Young People and Families Health and Wellbeing service launched.</p> <p>1.12 Refreshed CLA Plan to continue with impact to be evidenced and financial milestones met by March 2020.</p> <p>4.5 Progress Children and Families Quality and Development Plan to further embed signs of safety to ensure practice and culture development. Amended plan end of June 2019, and to evidence more consistent practice at a 'Good' standard during 2019/20.</p>	<p>Q4 RISK RATING Likelihood x impact</p>		<p>20</p>	
		<p>Previous quarter</p>	<p>Current quarter</p>	<p>End Yr Target</p>	<p>DOT</p>
		<p>20</p>	<p>20</p>	<p>20</p>	
		<p>4</p>	<p>5</p>	<p>4</p>	

3. DELIVER A FINANCIALLY SUSTAINABLE AUTHORITY – Julie Crellin		
There is a risk that	the Council's revenue & capital budget is insufficient to fund current services over the medium term	
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.
Slippage and non-delivery of existing savings	<ul style="list-style-type: none"> Report delivered to CMT on 10 April detailing assurance framework for delivery of MTFP savings which includes service specific monitoring, involvement of DMT's, Transformation Boards, other boards (eg Demand Management Project Group) and CMT. Monthly financial monitoring and reporting via Directorate Management Teams and Corporate Management Team – with quarterly reporting to Cabinet. Programme Boards eg. Promoting Independence Programme Board within Directorates to manage key projects linked to the Medium Term Financial Plan – and identify remediation activities where required. Review of reserves on regular basis – to accommodate budget fluctuations in year. Establishment of the Children Looked After Strategic Board chaired by the Acting Executive Director Economy & Infrastructure to review delivery of the Children Looked After Recovery Plan and associated delivery mechanisms. A dedicated ELT session took place on 4 December 2019 to consider current year non-delivery of MTFP savings and next steps to refresh delivery plans. 	<ul style="list-style-type: none"> Monthly updates on savings delivery as part of the budget monitoring report and bi-monthly updates from Transformation Programmes on delivery of MTFP savings. Review and refresh of existing MTFP delivery plan where necessary; establishment of dedicated reporting mechanism to CMT. COVID-19 has significantly impacted the delivery of savings requiring operational input, both existing and new. Whilst at the time of writing operational focus is on response discussions at a strategic level are now moving to focus on recovery and the "new normal". A key component of those discussions, and resulting actions, will be the delivery of savings as part of the financial sustainability of the Council. An internal recovery group has been established with membership including the Deputy s151 Officer. The previously established Financial Sustainability Board which has been suspended whilst operational resources have been focussed on COVID-19 response will resume with the key focus being to resume delivery of savings and identify where additional savings can be achieved.
Overspending of budgets	<ul style="list-style-type: none"> Monthly financial monitoring (as above) Rigorous assessment and authorisation of significant areas of expenditure e.g. care packages for vulnerable children and adults. Implementation of revised financial decision making delegations by People Services in respect of commissioned care packages and support. Operate risk based approach to deploy Finance team resources to assist budget holders in key areas of budget risk. Children Looked After action plan in place to manage and reduce expenditure in this overspending area. Improved budget monitoring process reducing the time taken for budget monitoring reports to be presented to CMT resulting in earlier corporate notification of the budget position and therefore earlier agreement of mitigating actions should they be required. Cost and expenditure controls implemented across the Council by DMT's and reported in Quarter 2 Monitoring Report at Cabinet 19 Dec 2019. 	<ul style="list-style-type: none"> Development of demand models within specific services areas to allow improved future forecasting of financial impacts. Budget Planning providing oversight and challenge of the forecast budget outturn and in particular overspending areas and MTFP savings not being delivered. The impact of COVID-19 has resulted in additional expenditure with these impacts being identified by Service Managers supported by the finance team. Regular updates will be provided to DMT's and CMT with regards to the impacts identified. Finance hold a master Financial Impact tracker which is used for reporting the financial impact to MHCLG, for sector analysis through SCT and also for lobbying purposes with regards to ensuring additional pressures are appropriately funded. Impacts relating to additional expenditure will also be tracked alongside reduced income, reutilisation of existing budgets and sources of funding received. It has been made clear in a number of forums, examples being CMT, Silver command and through Finance sit reps that COVID-19 has not triggered the Bellwin Scheme and therefore the Council is not in a spend and reclaim position but must best utilise funding provided ensuring value for money and correct Governance remain a priority. Whilst the start of Q1 has focussed on COVID-19 response it is expected that service areas will ensure that controls previously established will be again prioritised once this phase has peaked.

Appendix 2

QUARTER 4 - REGISTER OF CORPORATE RISKS

Underachieving of income budgets	<ul style="list-style-type: none"> Monthly financial monitoring (as above) Quarterly meetings with District Council Technical Finance Officers – to review forecasts of Business Rates Income (and appeals) and Council Tax receipts. 	<ul style="list-style-type: none"> Undertake risk assessment of income recording in key areas of the business to ensure consistency of approach in recording income receivable. Further improvements likely to follow after assessment. The comments for expenditure above equally apply to income with the same rigour being applied to the impact of COVID-19 and ensuring that income levels return to pre COVID-19 levels at the earliest opportunity.
Uncertainty of local government funding framework	<ul style="list-style-type: none"> Horizon scanning by Finance of government announcements and funding/technical consultations – to ensure reasonableness of planning assumptions. Active participation in national groups e.g. Society of County Treasurers, North West ADASS Group (adult social care), LGA and CCN. Responding to Government announcements relating to Fair Funding and Local Government Finance Framework. Consideration of Spending Round announced 4 Sept 2019. Provisional Local Government Settlement evaluated after 20 December announcement with budget model and gap updated. 	<ul style="list-style-type: none"> Updated draft MTFP 2020-2025 went to Cabinet on 20th January 2020 and recommended for approval at Council on 13 February 2020. Continue to contribute to and respond to consultation from government and review funding announcements that are made. As a result of COVID-19 Local Government funding is now less certain than previously. The Finance team continue to monitor Government funding announcements, respond to requests for information as appropriate and ensure that the “Cumbria voice” is heard during consultations and lobbying exercises.
Increased demand for Statutory Services.	<ul style="list-style-type: none"> Activity and performance data is monitored alongside the financial forecast. Established Programme Boards have a remit to monitor and manage demand in key service areas, examples being the Children Looked After Placement Board and Promoting Independence Board Working group established to oversee modelling of future demand and the resulting financial impact, chaired by the deputy s151 Officer. 	<ul style="list-style-type: none"> Working alongside operational teams the impact of COVID-19 on the demand and commissioning of statutory services will be a focus of Q1 reporting and analysis

Resulting in

Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating			
<ul style="list-style-type: none"> Financial sustainability of the Council Reduced or non-delivery of services impacting on service users Significant budget overspends & unsustainable drawing on reserves Reputational damage to the Council Intervention by central government 	<p>4.7 All services delivered in line with their 2018/19 revenue budget as set out by Council in Feb 2019.</p> <p>4.8 A Total of £22.730 million of new savings to be delivered in 2019/20.</p> <p>4.9 Respond to outcome of Fair Funding and Business Rates Retention consultation determining impact on Council resources and future MTFP Planning.</p> <p>4.11 Deliver the enterprise projects within the Medium Term Financial Plan for 2019/20.</p>	<p>Q4 RISK RATING likelihood x impact</p>			<p>20</p>
		<p>Previous quarter</p>	<p>Current quarter</p>	<p>End Year Target</p>	<p>DOT</p>
		<p>20</p>	<p>20</p>	<p>20</p>	
		<p>4</p>	<p>5</p>	<p>4</p>	<p>5</p>

4. WORKFORCE CAPACITY, SKILLS, RELATIONSHIPS, SAFETY & WELLBEING – Paul Robinson & Dan Barton		
There is a risk that	The Council does not have the workforce capacity, skills or relationships to deliver the Council Plan or experiences a significant impact to the safety and welfare of the workforce.	
Caused by	Current controls & measures in place to manage the risk	Quarter 1 planned improvements to controls & measures to manage the risk
Workforce Plan 2018-2022 not delivered.	<ul style="list-style-type: none"> Cabinet reviewed and agreed 2018/19 (Year 1) Workforce Plan progress and agreed prioritised actions for the 2019/20 (Year 2) Workforce Plan Delivery Plan. Action owners assigned and performance management arrangements in place with monthly monitoring through Organisational Change Senior Management Team. Prioritisation exercise undertaken to ensure resources deployed to priority actions to ensure delivery alongside capacity challenges. Externally Provided Workforce (EPW) Strategy Group chaired by AD Organisational continues to oversee 2019/20 Council Plan target closely managing the number and marginal cost of EPWs as per Council Plan target. Q3 performance has seen an increase in EPWs placing the target at risk with remedial actions being followed within Directorates. Development of a system wide Workforce Strategy with North Cumbria and South Cumbria Health and Care system progressed for Cabinet consideration during Q4. Q4 saw roll out of self-serve reporting tool for line managers continues, providing team information at a glance on key areas including sickness, appraisals, contracted hours, e-learning completion etc. to support management accountability and real time management information. 	<ul style="list-style-type: none"> All Workforce Plan Delivery Plan actions for Quarter 4 2019/20 continue to be performance managed through SMT, DMTs and reported through the performance framework to CMT and Cabinet. Monthly meetings between Senior Manager, People Management and Senior Manager, Learning & Skills, in place to ensure cohesion and monitor progress against allocated actions across multiple workstreams. Additional Workforce Plan focus relating to CQC Action Plan Workforce work stream. EPW Strategy Group continues to meet monthly and will be chaired by Executive Director CCC given EPWs are required to maintain safe staffing levels in key services where recruitment for hard to fill posts remains a national challenge (such as adults and children Social Work teams and legal services for example). Innovation Fund and MTFP approved an increase in internal capacity for learning and skills, to reduce reliance on externally procured training. Our leadership and management development programme has been impacted in the short term by COVID-19. However, work is underway to review and develop digital delivery approaches that will allow us to continue with our programme in new ways during 2020/21. Development of Managers handbook and e-learning module, to support governance and decision making, and provide clarity surrounding manager accountability. Continuous drive to reduce risk, prevent injury and ill health and improve Occupational Health and Safety arrangements through the corporate health and safety work plan, directorate action plans, corporate health and safety audit programme and improved H&S Governance structure.
High staff absence levels	<ul style="list-style-type: none"> A focus on absence and attendance will continue across all areas, with monthly reporting to Directorate Management Team, Corporate Management Team and reported to elected members of Cabinet & Scrutiny Mgmt Board. Continuation of deep dive' absence clinics at Assistant Director and Senior Manager level in place to address longer term complex cases. The support of the Council's Employee Health & Wellbeing professionals and clinical physicians will continue. Scrutiny Management Board commissioned a full day task and finish workshop which met in November 2019 to review absence and identify additional recommendations to support wellbeing and attendance with Cabinet to consider the recommendations 30 Jan 2020. Audit & Assurance Committee receives regular risk updates to ensure controls remain in place to minimise absence risks. Workforce Plan 2018-2022 has a significant focus on staff wellbeing and 	<ul style="list-style-type: none"> 2019/20 forecasted year end absence as at 31 Mar 20 at 13.63 WDL per FTE is a worse position than Q3 and off target for 2019/20 (10 WDL per FTE). Increased performance management and accountability programme at all levels introduced overseen by Chief Executive with SMTs, DMTs, CMT, Organisational Development Board, Cabinet and Scrutiny Management Board continue to receive regular performance updates to ensure robust challenge. During the COVID-19 response and recovery period, staff absence levels are expected to be impacted due to symptoms that may or may not be directly attributed to COVID-19. It should also be recognised that staff may also be absent from work for non- sickness related reasons such as caring responsibilities or self-isolation. Detailed data pack provided to SMB Deep Dive Scrutiny Task and Finish Group included data, trends and heat maps for all services off target. Overall for the Council, data for the first half of the 2019/20 year showed absence was split between short term absences of less than 28 days (79%) with average short term cases being 5.25 days absent. Long term absences 28 days and over accounted for 21% of absences with average long term cases being 91 days absent and includes longer term conditions, surgery, cancers etc. Managers continue to focus on data available through self-serve reports to

	<p>engagement, with initiatives intended to positively affect attendance and staff wellbeing. Council achieved the maximum 'Continuing Excellence' accreditation of TUC Better Health at Work Award in December 2019.</p> <ul style="list-style-type: none"> • Winter Flu vaccination programme roll out in October/November 2019 resulted in good take up rates. • Health and Safety governance and increased profile an ongoing priority with excellent joint working between Officers and recognised Trade Union colleagues. 	<p>manage absences in real time with long and short term absence split provided to all services off target.</p> <ul style="list-style-type: none"> • To ensure absence continues to be a top priority for all services, dedicated people management support to continue in high impact services. Scrutiny Management Board identified a number of learning points following the recent task and finish workshop which will be presented as recommendations for Council to consider with the aim to help improve attendance performance. • Hepatitis B programme funding approved and training completed. Vaccination roll out now in progress across the County. • Health, Safety and Wellbeing programme will continue linked to agreed '<i>Th!nk Safe Be Safe</i>' brand and agreed 'messages of the month'. • Chief Fire Officer (as Chair of the Organisational Development Board) will continue to meet each AD 121 to discuss absence performance for all service areas and report progress directly to CMT.
Ineffective Health, Safety and Wellbeing management	<ul style="list-style-type: none"> • Responsibility for health and safety refocused at all levels and becoming embedded as business as usual supported by corporate health and safety team providing competent person' support. • Cabinet agreed the 2019/20 Corporate Health Safety and Wellbeing Policy Statement Sept 2019 and now displayed on intranet and in all Council buildings. IOSH Leading Safely programme well attended by Elected Members, Trade Unions and senior officer leaders. • Health & Safety Committees across all directorates refreshed with Senior Officer and Trade Union co-chair arrangements in place and well attended. • Corporate and Directorate level risk assessments reviewed to ensure resources focused on areas of higher risk. • Health and Safety a standing agenda item at all DMT's and at CMT providing an opportunity to immediately escalate matters of significant concern. • Corporate Mental Health programme progressing as planned. • <i>Th!nk Safe Be Safe</i> brand well established with monthly messages of the month overseen by Lead Member, AD Organisational Change and TUs. • Full programme of 33 operational health and Safety procedures have been re-launched as per internal audit recommendations. • Internal audit confirmed maximum 'reasonable' assurance opinion for Health & safety Governance confirming all high priority actions had been completed and noted a number of areas previously requiring improvement were now at a position of strength. • Achievement of the maximum TUC Better Health at Work Award - 'Continuing Excellence' Award in December 2019. 	<ul style="list-style-type: none"> • Refreshed Health, Safety & Wellbeing governance arrangements will continue to be embedded with events and communication programme continuing under the '<i>Th!nk Safe Be Safe</i>' brand. Monthly safety and wellbeing messages will continue. Senior members, officers and trade union representatives that attended IOSH Leading Safely training courses now applying and sharing the learning. • Additional capacity recruited to strengthen Schools and Education health and safety in place with further plans progressing to further strengthen capacity and competent person roles. • Corporate mental health programme will continue through Quarter 1 with '<i>Time to Talk</i>' programme continuing. • Higher risk service areas to refresh risk assessments and associated assurance statements with improvement plans if and when required. • CMT and DMTs have standing Health and Safety agenda item each week. • Communications will continue to promote workplace safety roles e.g. first aiders, fire wardens and evacuation chair competent persons. • Lone Worker App/ devices (Skyguard) trial successfully evaluated. Costs for the service are chargeable and access through ICT Service Desk will be rolled as required. • Trial of an android ICT app (NOTIFY) to report near misses at advanced stage lead by H&S and ICT will continue. • Quarter 1 will see significant focus on COVID-19 response with all health and safety resources focused on pandemic response providing support, advice and guidance at both strategic and operational levels. • The Corporate Health and Safety service will also align with services to support managers and teams with new safe ways of working as services' transition plans emerge and COVID-19 national restrictions are eased. • Q1 saw the introduction of coaching and wellbeing clusters – this is a staff support network co-ordinated by internal volunteer staff providing, and signposting to, appropriate support and guidance specifically during the COVID-19 incident.

<p>Service Reviews negatively impact on capacity or delivery of services.</p>	<ul style="list-style-type: none"> As part of strategic planning for 2019/20 and beyond, a programme of reshaping and service reviews continues with regular planned meetings between management and recognised Trade Unions. Where any concerns are raised by staff or Trade Union representatives, they are considered and addressed as promptly as possible. 	<ul style="list-style-type: none"> Service Review activity will be closely managed through DMTs and CMT to ensure delivery of required change, whilst carefully managing the potential impact and implications on both financial and non-financial resources and the delivery of statutory services. Service reviews planned for Quarter 1 are paused as a result of COVID-19 response phase and programme will be re-assessed when appropriate. All reviews will follow agreed Management of Change process with regular updates to recognised Trade Unions and Portfolio Holders. Capacity and availability challenges being regularly reviewed to balance pace with risks.
<p>Industrial Relationships between the Council and Trade Unions.</p>	<ul style="list-style-type: none"> Service Reviews are closely managed in consultation with recognised Trade Unions using agreed management of change process. JCG and HR1 meetings will continue to be held corporately and within each Directorate in line with agreed framework. Refreshed Health & Safety Committees with Union co-chairs in place. Industrial relationships remain a challenge with any issues of concern are discussed promptly and proportionately with a commitment to review any policies of concern to negotiate an agreed position with Trade Union colleagues locally and regionally wherever required. The LGA Peer Review recognised some challenging industrial relationship environment in some of Cumbria's Trade Union and County Council relationships and recommendations for improvement are planned for Q4. 	<ul style="list-style-type: none"> JCG and HR1 meetings will continue to be held corporately and within each Directorate in line with agreed framework and commitment to discuss any staffing related issues. Policy Group continues to meet to negotiate any revisions to policy. A trade union meeting planner introduced to help coordinate and plan effective use of trade union resources. This plan is held centrally and shared on a weekly basis with improved ICT options being explored with TU Branch Secretaries. Plans are in place for greater Trade Union involvement at earlier stages of initiatives to ensure greater co-production. If issues of concern are raised by Trade Union colleagues, then they are considered promptly through agreed escalation and dispute resolution procedures. LGA Peer Review improvement plan scoped and resourced for progression however due to COVID-19 the LGA facilitated sessions have been postponed and will be rearranged at an appropriate time, once impacts and pressures related to COVID-19 ease. Increased Health & Safety working. Both Officers and Trade Unions jointly committed to greater co-production and informal resolution of issues. An example is a joint approach to improved Health and Safety governance, safety inspections/ audits and promotion and development of safety related communications materials.

Resulting in; Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating																									
<ul style="list-style-type: none"> Pace and change objectives from service reviews is not met. Absence exceeds targets leading to capacity issues and increased costs due to shift cover requirements or Externally Provided Workforce (EPW). Non delivery of identified workforce skills and apprenticeship targets. Trade Union relationship challenges with increased numbers of grievances, formal disputes or industrial action (and an increased number of queries in relation to COVID-19). Major injury, illness or fatality as a result of insufficient or ineffective health and safety arrangements. 	<p>4.2 Deliver the actions in the 2019/20 Workforce Delivery Plan including maintain or improve on the Better Health at Work Gold Award standard.</p> <p>4.3 Produce and implement a system wide Workforce Strategy with North Cumbria and South Cumbria Health and Care systems.</p>	<table border="1"> <tr> <th colspan="4" data-bbox="1923 1306 2617 1390">Q4 RISK RATING (Likelihood x Impact)</th> <th data-bbox="2617 1306 2813 1390">20</th> </tr> <tr> <th colspan="2" data-bbox="1923 1390 2208 1474">Previous quarter</th> <th colspan="2" data-bbox="2208 1390 2445 1474">Current quarter</th> <th data-bbox="2445 1390 2617 1474">End Yr Target</th> <th data-bbox="2617 1390 2813 1474">DOT</th> </tr> <tr> <td colspan="2" data-bbox="1923 1474 2208 1600">20</td> <td colspan="2" data-bbox="2208 1474 2445 1600">20</td> <td data-bbox="2445 1474 2617 1600">15</td> <td data-bbox="2617 1474 2813 1600" rowspan="2">➔</td> </tr> <tr> <td data-bbox="1923 1600 2065 1726">4</td> <td data-bbox="2065 1600 2208 1726">5</td> <td data-bbox="2208 1600 2350 1726">4</td> <td data-bbox="2350 1600 2445 1726">5</td> <td data-bbox="2445 1600 2617 1726"></td> </tr> </table>				Q4 RISK RATING (Likelihood x Impact)				20	Previous quarter		Current quarter		End Yr Target	DOT	20		20		15	➔	4	5	4	5	
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5. CARE NEEDS & CONTINUITY OF CARE – Jo Atkinson		
There is a risk that	the Council does not ensure eligible care needs are met or does not deliver continuity of care	
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.
<p>Home Care & Residential Care for service users over 65 years.</p> <p>Increased demand, market challenges and overall system challenges including insufficient capacity in the care market (including problems recruiting or retaining CCC staff and managers)</p>	<p>Alternative Delivery Models</p> <ul style="list-style-type: none"> ▪ Cumbria Care recruitment continues with 12 teams now recruited to. There still remains challenges in Allerdale and Carlisle. ▪ The Homecare framework was successfully procured at the end of August 2019. The SProc.net system supplied by Adam Ltd has supported the development of an Any Qualified Provider (AQP) approach. There are currently 40 providers on the framework. ▪ An Any Qualified Provider (AQP) approach has allowed Providers to deliver care countywide and they are no longer restricted to zonal or district areas. ▪ The implementation of fixed hourly rates through the new framework has enabled the focus to be on quality and delivery rather than price. The rate was calculated based on the UKHCA recommended rates and allows for travel costs through an urban, rural and extra rural rate. Additionally providers have been encouraged to pay staff the 'real' living wage through these new rates which should improve recruitment and retention figures. ▪ An Internal audit was carried out on Homecare with the audit close out meeting taking place in Q1 2019/20. A list of Management actions have been identified to address all issues raised within the audit. 	<p>Alternative Delivery Models</p> <ul style="list-style-type: none"> ▪ Management Information will be gathered through the SProc.net system to identify areas where providers are struggling to fulfil packages and support will be offered where needed. This management information will also enable Cumbria Care to focus their recruitment in these areas. ▪ Monthly Updates will be sent to providers identifying areas of unmet need, allowing providers to adapt/grow their business in order to meet a greater proportion of need. Adam Ltd will continue to support current and potential providers in using the SProc.net, ensuring they're able to maximise their delivery. ▪ The AQP is an open framework and providers will be able to join at any time if they meet the necessary criteria. The provider's performance against Key Performance Indicators (KPIs) for the previous quarter will be reviewed, with Contract Management Meetings arranged as required.
<p>Problems recruiting and retaining independent sector care staff and managers</p>	<p>Sustainable market</p> <ul style="list-style-type: none"> ▪ The Council continues to work closely with the Clinical Commissioning Group to develop more robust plans that will support developing a sustainable market. ▪ The introduction of a fixed hourly rate (which has been based on UKHCA recommendations) has been designed to enable providers to pay care staff the Real Living Wage which should, in turn, reduce pressures on the recruitment and retention of staff. ▪ Ongoing iBCF and winter pressures funding will continue to support the additional pressure 	<p>Sustainable market</p> <ul style="list-style-type: none"> • Meeting took place across the care sector has been organised by Department of Work and Pensions (DWP), to look at the challenges facing providers around recruitment and retention. Which was attended by Commissioners.
<p>Failure to deliver care services & deliver regulatory standards of the CQC.</p>	<p>Performance</p> <ul style="list-style-type: none"> • During the System Review in 2018/19 Q4, no concerns were raised by the CQC • The Quality and Care Governance officer's line management arrangements sit with the Senior Managers for Commissioning. This will ensure that information gathered regarding the quality of services is fed back into the commissioning cycle. • Multidisciplinary radar meetings are in place to receive and monitor early indicators of Quality concerns. This information is provided by the Quality & Care Governance Team. • Weekly meetings take place using a performance dashboard and exception report to address ongoing performance matters. • The Quality and Care Governance team conduct routine scheduled audits and monitor performance to improve standards on an ongoing basis. • Cumbria continues to be one of the highest performing areas across the North West in terms of CQC ratings. 	<p>Performance</p> <ul style="list-style-type: none"> ▪ A schedule of Directorate level quarterly performance monitoring reports will be in place to monitor a range of quality indicators to enable rigorous challenge. ▪ The Quality and Care Governance team will continue to conduct routine scheduled audits and monitor performance to drive ongoing improvements to standards.

<p>Services may not provide vulnerable people with a safe and caring environment in which they are supported appropriately</p>	<p>Performance</p> <ul style="list-style-type: none"> • System controls are in place to provide assurance at a number of levels. These are designed to provide ongoing checks that people are supported appropriately and safely • Controls include: <ul style="list-style-type: none"> - Social work assessment and review - Independent advocacy - Alerts to LADO should any concerns be identified - Safeguarding process - Intelligence gathering to inform the early indicator (RADAR) process - Quality Improvement Process (multi agency) - Care and Treatment Reviews (CTR) and Care Education Treatment Reviews (CETR) - CTR and CETR include multiple agencies, families, independent advocates and experts by experience - Regular liaison with CQC 	<p>Performance</p> <ul style="list-style-type: none"> • Ongoing review to ensure the controls that are in place continue to be effective. 																				
<p>Resulting in</p>																						
<p>Main Impacts of risks to Customer & Council</p>	<p>Links to Council Plan Delivery Plan</p>	<p>Quarter 4 Risk Rating</p>																				
<ul style="list-style-type: none"> • Customer complaints. • Failure to meet statutory requirements under the Care Act; to meet assessed social care needs and also to provide a sustainable care market. This has the potential intervention by external commissioner & reputational damage to CCC and NHS partners. • Partial or total interruption to service delivery to customers leading to partial or non-delivery of corporate priorities. • Significant financial impact due to Increased number of Delayed Transfers of Care (DToC). 	<p>1.19 Continue to develop the Council's in house care services to improve efficiency, maintain and improve quality and respond to changing demands and market requirements. Publish a development plan 2019-22 for the Council's in house services.</p> <p>1.22 Develop and implement a plan for strengthening the front door to Adult Social Care to improve the management of demand in the system.</p> <p>3.3 Continue to encourage providers delivering services to and on behalf of the council to pay the Living Wage Foundation's Living Wage rate of pay to their staff, and adopt the principles of the Great Jobs Agenda</p> <p>3.5 Develop a 'grow your own' approach to address market issues, focussing for 2019/20 on:</p> <ul style="list-style-type: none"> - Developing Career Pathways, building on the Social Work Academy and Apprenticeships, including a graduate programme, for a minimum of two service areas by December 2019. 	<table border="1"> <tr> <td colspan="3" data-bbox="1905 871 2617 976"> <p>Q4 RISK RATING Likelihood x impact</p> </td> <td data-bbox="2617 871 2813 976"> <p>15</p> </td> </tr> <tr> <td data-bbox="1905 976 2193 1087"> <p>Previous quarter</p> </td> <td data-bbox="2193 976 2457 1087"> <p>Current quarter</p> </td> <td data-bbox="2457 976 2617 1087"> <p>End Yr Target</p> </td> <td data-bbox="2617 976 2813 1087"> <p>DOT</p> </td> </tr> <tr> <td colspan="2" data-bbox="1905 1087 2193 1213"> <p>15</p> </td> <td data-bbox="2193 1087 2457 1213"> <p>15</p> </td> <td data-bbox="2457 1087 2813 1213"> <p>15</p> </td> </tr> <tr> <td data-bbox="1905 1213 2062 1360"> <p>3</p> </td> <td data-bbox="2062 1213 2193 1360"> <p>5</p> </td> <td data-bbox="2193 1213 2323 1360"> <p>3</p> </td> <td data-bbox="2323 1213 2457 1360"> <p>5</p> </td> </tr> <tr> <td colspan="3" data-bbox="1905 1360 2617 1486"> <p>15</p> </td> <td data-bbox="2617 1360 2813 1486">  </td> </tr> </table>	<p>Q4 RISK RATING Likelihood x impact</p>			<p>15</p>	<p>Previous quarter</p>	<p>Current quarter</p>	<p>End Yr Target</p>	<p>DOT</p>	<p>15</p>		<p>15</p>	<p>15</p>	<p>3</p>	<p>5</p>	<p>3</p>	<p>5</p>	<p>15</p>			
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6. LEARNING DISABILITY PARTNERSHIP ARRANGEMENTS – Jo Atkinson		
There is a risk that	The Council & Clinical Commissioning Groups (CCG's) are unable to commission services and develop plans for the small number of Individuals with complex support needs.	
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.
Not having assurances on financial resource transfer into the health and social care economy in Cumbria	<ul style="list-style-type: none"> ▪ Discussions continue to take place between the CCG(s) and Council regarding future joint working arrangements. ▪ Discussions continue to take place with CCG(s) to identify ongoing financial responsibilities. ▪ Senior Manager Commissioning in place to support ongoing work. ▪ An Additional Needs Framework is in place that includes more than 32 Support Providers. ▪ Interim arrangements are in place to manage new Continuing Health Care (CHC) packages until all policy and procedures are in place. Work is underway with CCG(s) to formalise arrangements. ▪ Work will continue to develop local policies and procedures that ensure organisations are operating within national frameworks and are discharging their statutory responsibilities. This will be undertaken through a small task and finish group. ▪ Work has started with North Cumbria CCG to develop a model of integrated commissioning and contracting with the Local Authority as the lead agency. ▪ A joint S117 process has been developed alongside a standard operating procedure. Work is underway to develop staff training to ensure consistency. ▪ Regular leadership meetings are in place, which include leaders from the Local Authority, CNTW and the CCGS. ▪ An additional needs framework has been agreed through Cabinet – and is "live". The Framework now includes 28 Providers, 14 which are new to Cumbria who can meet the needs of individuals who meet the criteria set out in "Transforming Care". A recent procurement using the Framework resulted in support being identified and procured for three individuals who are currently in- patients. 	<ul style="list-style-type: none"> ▪ Work continued in Quarter 4 to address the challenges around the assessment and eligibility processes and financial responsibility for North Cumbria Clinical Commissioning Group and Morecambe Bay Clinical Commissioning Group. Some progress was made in identifying funding responsibility for a number of individuals of whom there had been some previous dispute. ▪ The interim Partnership Agreement remains in place. It sets out partner expectations in relation to joint working particularly in relation to S117 and Continuing Health Care. It also sets out the expectation in relation to funding in- patient provision in assessment and treatment services. All partners have adhered to these arrangements which have added a degree of stability. ▪ A Cabinet paper has been agreed that is the starting point for an integrated commissioning approach with North Cumbria CCG. A legal agreement has been drafted and work is underway to identify all commissioned work across the North Cumbria footprint. ▪ A task and finish group has been established across the Local Authority and North Cumbria CCG to progress the joint commissioning work, which continues to progress this work.
A lack of availability of suitable and affordable service and support providers. Limited capacity within existing service and support providers.	<ul style="list-style-type: none"> ▪ Work underway with existing providers supporting the development of their service offer. This includes linking in with regional and national training/workforce opportunities e.g. In Positive Behaviour Support. ▪ Additional needs framework has been procured with 28 Providers, 14 of whom are new to Cumbria. ▪ Recommissioning of the current supported living framework is underway. ▪ Using NHS England funding, support has been developed locally that 	<ul style="list-style-type: none"> • Commissioning and operational attendance at Learning Disability and mental health provider forums. • The development of an enhanced community model in North Cumbria has strengthened the local system to support providers and prevent in patient admission. The learning from this will be used to support pan Cumbria Providers. • Funding has been secured to develop individual life planning as a tool in Cumbria. This is a person centred approach that provides a bespoke approach to identifying support. The first individual life plan has been developed and used to ensure a continued person centred approach. The second is being planned.

	<p>supports providers to meet need at times of crisis.</p> <ul style="list-style-type: none"> ▪ Regular meetings with key Providers are in place. ▪ An Additional needs Framework is in place. ▪ A summit took place on 11 October 2019, and focussed on what providers need from the local authority, CCGs and health colleagues to meet the needs of people with a learning disability and or autism who present a challenge to how they are supported. 																						
Resulting in																							
Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating																					
<p>Failure to meet statutory requirements leading to reputational damage to CCC and individuals not having their care and support needs met close to home.</p>	<p>1.17 Work with health partners to improve the quality of joined up services for young people with Special Educational Needs and Disabilities. Implement improvement plan, implement appropriate contractual frameworks and continue to develop arrangements for complex cases.</p>	<table border="1"> <thead> <tr> <th colspan="4" data-bbox="1938 644 2614 730">Q4 RISK RATING Likelihood x impact</th> <th data-bbox="2614 644 2828 730">15</th> </tr> <tr> <th colspan="2" data-bbox="1938 730 2205 816">Previous quarter</th> <th colspan="2" data-bbox="2205 730 2442 816">Current quarter</th> <th data-bbox="2442 730 2614 816">End Yr Target</th> <th data-bbox="2614 730 2828 816">DOT</th> </tr> </thead> <tbody> <tr> <td colspan="2" data-bbox="1938 816 2205 942">15</td> <td colspan="2" data-bbox="2205 816 2442 942">15</td> <td data-bbox="2442 816 2614 942" rowspan="2">10</td> <td data-bbox="2614 816 2828 942" rowspan="2" style="text-align: center; vertical-align: middle;">➔</td> </tr> <tr> <td data-bbox="1938 942 2071 1064">3</td> <td data-bbox="2071 942 2205 1064">5</td> <td data-bbox="2205 942 2338 1064">3</td> <td data-bbox="2338 942 2442 1064">5</td> </tr> </tbody> </table>	Q4 RISK RATING Likelihood x impact				15	Previous quarter		Current quarter		End Yr Target	DOT	15		15		10	➔	3	5	3	5
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7. INFORMATION SECURITY ARRANGEMENTS – Paul Robinson & Iolanda Puzio		
There is a risk:	The Council will experience a significant information security incident.	
Caused by	Current controls & measures in place to manage the risk	Quarter 1 planned improvements to controls & measures to manage the risk.
Inadequate information security arrangements	<ul style="list-style-type: none"> ICT Plan 2018-22 in place with security a key element of 2019 Delivery Plan. Information Security Management System including all policies adhering to ISO 27001 principles is in place and proactively maintained. Suite of Information & System Security Policies accessible on In-touch. Annual Public Services Network (PSN), PCI DSS & NHS DSP compliance maintained and supported by the external IT Health Check (ITHC). Annual PSN 2019/20 certificate issued with effect from 12 July 2019. Routine monitoring of ICT networks and systems in place. Vulnerabilities highlighted, addressed and managed through Service Now as a project task with exception reports to Senior Manager ICT and AD Organisational Change. Routine ICT system penetration tests to check system vulnerabilities – incorporated into the annual IT Health Check. Externally hosted systems including those “in the cloud” incorporated into the annual ITHC. Participation in National Cyber Security Centre (NCSC) free service initiatives including web check, public sector Domain Name System & Cyber Info Sharing Partnership continue. Ongoing assessment of cyber threat via cyber security partners; the NCSC, North West WARP including weekly threat reports and the NHS Cumbria Cyber Group in place. Council received second highest LGA cyber-security rating of ‘Green / Amber’ in Oct 18 with a number of strengths recognised. Report concluded that the council is compliant with the UK Government’s ‘Minimum Cyber Security Standard’ and the NCSC’s cyber security lifecycle with all areas scoring green. ICT Service Continuity arrangements being refreshed and exercised. GDPR Phase 1 Action Plan chaired by AD Organisational Change complete with internal audit assessed as maximum ‘substantial assurance’ rating in June 2019. GDPR Phase 2 will deliver business as usual phase led by Chief Legal Officer. Proactive engagement with national and internal Local Resilience Forum (LRF) initiatives in place especially for cyber security risks. An Internal audit of Cyber Security was confirmed second highest ‘reasonable assurance’ rating in July 2019, with all recommendations to strengthen documented record keeping agreed and being progressed. 	<ul style="list-style-type: none"> During 2019/20 Q4 all outstanding actions from the Councils GDPR Phase 2 Action Plan were incorporated into the 2020 Data Protection Compliance Roadmap (DPCR). The implementation of this roadmap will continue to be led by the Data Protection Officer and Chief Legal Officer (Monitoring Officer). The Data Protection Working Group will continue to drive the DPCR action plan and also support the embedding of a data protection culture. At the end of Q4 the working group did not meet as originally planned due to COVID-19, however, work will resume as a priority during Q1. The Data Security & Protection Toolkit (DSP Toolkit) replaced the current IG Toolkit with the Council’s submission compliant against the new toolkit 100 mandatory requirements and allows continued data sharing with Health partners. Requirements continue to be incorporated into ICT infrastructure technical projects. IG elements and ICT elements have been completed. An extension of the submission deadline has been advised by the NHS (to Sept 2020) as a result of COVID-19 and does not impact the sharing of information. A number of systems now hosted externally in the cloud or on suppliers own premises and NCSC guidance now recommends that externally hosted systems are incorporated into the annual CCC IT Health Check. The cloud based systems categorised as highest risk were prioritised for inclusion and suppliers notified. All cloud hosted systems checked passed the ITHC successfully and this is now being included within all ICT systems contractual arrangements. The 2020 ITHC has been awarded to the NCC Group. The timing of the testing is dependent on the COVID-19 operational response situation. There is a risk that the testing may impact the operational availability or performance of the corporate network. A conference took place on 27 April with the Deputy Head of PSN to discuss the challenges faced by CCC with this year’s compliance timetable. Enhanced ICT programme monitoring in place with strengthened performance management and incident reports being implemented which will include outstanding vulnerability scanning tasks created by Information Security within the <i>Service Now</i> system for action. NCSC threat warnings now a mandatory agenda item on the ICT Management Board with the ICT operational risk register reviewed on a quarterly basis and presented to the ICT Management Board chaired by AD Organisational Change. Priority focus remains on remediating system vulnerabilities when they are identified in a timely manner. Whilst ICT resources have been deployed to support the CCC COVID-19 response it is taking longer for changes to be implemented. The implementation of a number of updates has not been installed, as this would have resulted in potential loss of service to remote workers. For others it is not possible to install the software updates over the VPN remote working solution. Extra monitoring is in place to reduce this risk exposure. The 2019/20 annual PSN self-assessment signed by the Chief Executive and submitted. Remediation of any outstanding vulnerabilities continues. Cumbria County Council have been commended for their approach to the PSN accreditation process and risk management by the PSN assessor with project tasks created within Service Now to address all vulnerabilities highlighted within the report. Remediation project plan submitted to PSN as part of the annual accreditation process with any outstanding vulnerabilities being prioritised. Weekly PSN exception reporting in place between CCC and PSN with PSN kept informed of the challenges faced in addressing the outstanding vulnerabilities from last year’s report. Remediation has slowed and in some cases placed on hold. Challenges include equipment no longer being available from China and unacceptable risk to the corporate ICT service if changes are implemented during this COVID-19 emergency response period. A planned programme of ICT system resilience health checks as part of the major migration of the Council Data Centre successfully decommissioned. Technical capacity refocused on system stability and resilience has had a positive impact with core system availability >99% for the full Q4 and will include increased security as well as performance. ICT Services are fully engaged with the Local Resilience Forum (LRF) and proactively engage with and promote all training and workshop events including those facilitated by CCC at HQ CFRS and national Cyber Resilience Pathfinder initiative. ICT and Cyber Security position statement was provided to CMT 22 April.

		<p>The inaugural meeting of the Cumbria LRF Cyber Group has taken place. Attendance at the Cyber Resilience Pathfinder events will resume later in the year.</p> <ul style="list-style-type: none"> • Work will continue to progress in Q1 relating to the areas of the LGA cyber security report to aim to achieve all levels the top 'green rating' including governance, documented risk assessments, structures and policies; leadership, reporting & ownership; and Training & awareness. An LGA self-assessment portal has been updated in Q4 and the LGA cyber security report is imminent. Funding from the LGA of £8,000 has been received to support Cyber Security accreditation training for the Information Security Team and to conduct an email phishing simulation exercise later in 2020/21 Q2 / Q3. • Q4 saw the further development of the InTouch request portal to tightly control permission to any higher risk activity (eg electronic device use outside the United Kingdom border). All requests are rigorously risk assessed by the Information Security Team and submitted to SIRO for approval. The portal is now available on InTouch and is working effectively. Requests from Directors, Assistant Directors and elected members are referred to SIRO for risk assessment and approval and this rigour will remain during 2020/21. • Due to COVID-19 social distancing requirements, the majority of Council work is now completed remotely and via VPN access where over 5500 connections are in place each day (normally less than 400 per day). The AD Organisational Change receives a daily VPN report to outline system performance, stability and importantly has a dedicated cyber security section to assess any risks and action taken.
<p>Lack of Training , Awareness & Ongoing learning</p>	<ul style="list-style-type: none"> • Mandatory GDPR & Information Security e-learning course in place and routinely updated to reflect data breach investigations to address or prevent further occurrence. • The 2019/20 Information Security & Data Protection 2019 e-learning and toolbox training was successfully launched with over 95% completions. • Automatic reminders are sent to remind those employees who have not completed the on-line training course and further reminders are issued close to the expiry date of completed training. • GDPR training exception reporting highlights staff and members not trained however significant progress made in this area with GDPR training targets in place and monitored. • Statutory Data Protection Officer providing dedicated GDPR expertise, advice and support. • Information Security drop in sessions and workshops held as a joint approach with the Data Protection Officer and Records Management Team. • Manager self-service reporting tool in place to allow tracking of mandatory training, including Information Security and Data protection e-learning course. • Information Security Week is an annual joint initiative led by the Information Security Manager, Senior Information Governance & Data Protection Officer and the Records Manager and was successfully delivered during the last week of November 2019; <ul style="list-style-type: none"> ○ During this week there were visits to various locations, providing drop-in sessions and floor walking to audit physical security practices and identify gaps and further learning. ○ The information security week was also supported by corporate 	<ul style="list-style-type: none"> • ELT committed to ensure all Managers target those employees who are 'hard to reach' to ensure a minimum of 95% mandatory training completion. As at 31 March 2020 (following implementation of auto system reminders), 94% of all employees have completed training within the last 12 months (an improvement from 92% completed at end Q3 and is slightly below achieving the year-end annual target of 95%). • The launch of the Information Security E-Learning course for 20/21 had been paused to allow focus to be on our COVID-19 response. Work on this re-commence during Q1 and will be supported by a communication campaign to alert staff to the new course and the mandatory requirement of its completion. • The Council Senior Information Risk Officer (SIRO) continues to chair weekly meetings to consider Data Protection, GDPR and Cyber Security matters to ensure ongoing profile and prompt consideration of any issues. Two Deputy SIROs are now in place (Chief Legal Officer and AD Organisational Change) to ensure additional SIRO resilience, cover and input. The Information Security Manager and Data Protection Officer attend SIRO meetings to provide technical expertise advice, guidance and collective challenge. • A communication campaign was progressed during Quarter 4 to raise further awareness around data breaches and was an integrated part of the annual information Security Week. Awareness around data breaches is due to be embedded into future campaigns. • A "Respect your Workplace" initiative has been developed and will re-enforce and embed key information security practises and continue the messages from Information Security Week. The timing of this initiative is under review due to COVID-19, but will be launched when appropriate. Planning for Information Security Week during Q3 2020/21 has already commenced. • Data Protection and Information Security Advice and Guidance has been provided to all employees as part of Corporate Messages issued during the COVID-19 emergency.

	<p>communications, by publishing activities on-line and issuing daily email messages with the aim to re-enforce and embed key information security practices.</p> <ul style="list-style-type: none"> o Pull-up information banners were also produced and displayed in various Council locations. <ul style="list-style-type: none"> • Building upon the success of the information security office audits, these will become a regular occurrence in partnership with facilities management colleagues to further embed a strengthened data protection culture. These are temporarily on hold due to the current COVID-19 incident. 																															
Human error	<ul style="list-style-type: none"> • Incident reporting framework, procedure & on line incident form is in place and meets GDPR requirements. • Weekly SIRO meeting & data breach reporting in place to enable effective response to breaches, tracking, learning and ICO referral assessments. • SIRO performance and improvement group created with terms of reference agreed and regular meetings scheduled. • A communications campaign is ongoing to increase staff awareness, issue reminder training and data risk issues including breach causes and learning. • An Information Governance Scorecard is reported quarterly to Corporate Management Team. 	<ul style="list-style-type: none"> • The Data Breach Incident Reporting Procedure and template has been reviewed and published as a Policy, Procedure and FAQ's, and will be reviewed annually. • Development of the form to allow external agencies and customers to submit reports is currently on hold during migration between SPS portals. • Data breaches, near misses, causes and actions continue to be collated into a central database with 59 data breaches reported for investigation in Q4, which is identical to the amount reported in Q3. Each reported issue is analysed to identify trends or learning points with improved targeted action and learning sharing discussed through the SIRO meeting, service teams and escalated to CMT if and when required. • Corporate Governance Group & Monitoring Officer created sub group to drive communications and cross Directorate Learning which will continue in Q1 of 2020/21. 																														
Resulting in; Main Impacts of risks to customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating																														
<ul style="list-style-type: none"> • Disclosure of personal data leading to personal distress, damage and embarrassment and potential liability claims. • Data breach leading to financial penalties & intervention by the ICO; fines of up to 20 million euros or 4% of Gross budget. • Partial or total interruption to service delivery to customers, suppliers or partners leading to partial or non-delivery of corporate priorities. • Significant reputational impact to the Council & partners • Reputational damage to the Council • Financial impact 	4.4 Delivery of the actions in the 2019/20 ICT Plan Delivery Plan and further progress ICT improvement programmes with key partners, particularly the NHS and Police.	<table border="1"> <tr> <th colspan="4">Q4 RISK RATING</th> <th colspan="2">likelihood x impact</th> <th colspan="2">15</th> </tr> <tr> <th colspan="2">Previous quarter</th> <th colspan="2">Current quarter</th> <th colspan="2">End Yr Target</th> <th colspan="2">DOT</th> </tr> <tr> <td colspan="2">15</td> <td colspan="2">15</td> <td colspan="2">10</td> <td colspan="2" rowspan="2">➔</td> </tr> <tr> <td>3</td> <td>5</td> <td>3</td> <td>5</td> <td></td> <td></td> </tr> </table>	Q4 RISK RATING				likelihood x impact		15		Previous quarter		Current quarter		End Yr Target		DOT		15		15		10		➔		3	5	3	5		
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There is a risk that		The Council does not fully deliver its commissioning strategy for adult social care, reducing the demand for its services and making best and effective use of its resources																													
Caused by		Current controls & measures in place to manage the risk		Improvements to controls at end Q4 and planned during Q1.																											
The approach to prevention not being effective or not being demonstrated to be effective		<ul style="list-style-type: none"> Ongoing reshaping of Day Services following engagement with Local Area Committees to develop services in line with Commissioning Strategy and linked into the work through Thriving Communities as one of the Pathfinders 99% of homes in Cumbria now signed up to the new contracting arrangements. 		<ul style="list-style-type: none"> The rollout of remodelling of older adults day services on a district basis is now complete. Review work will continue in relation all other day service provision. Trade Unions will be engaged with regarding any potential future service changes. Thriving Communities programme in Adult Social Care to further develop the pathfinder model on a countywide basis. Due to COVID-19 most day services are currently closed. Those that are continuing to operate are doing so to provide support to those most in need (predominantly people with a learning disability) 																											
The pace of review of Day Services not delivering expected outcomes		<ul style="list-style-type: none"> Ongoing reshaping of Day Services, including the review of existing packages to ensure they are appropriate. Continued development of policies to support the strengths based approach. 		<ul style="list-style-type: none"> Social workers appointed in South Lakeland and Barrow to support the reviews through the Thriving Community Approach. Significant work undertaken to identify priority cases to review. Day service reviews to be largely absorbed by the Thriving Communities and Promoting Independence programmes and will be reported through these governance processes. 																											
The scale and pace of delivery of the Extra Care Housing (ECH) Programme		<ul style="list-style-type: none"> Two grant funding applications were awarded under Extra Care "grant programme". Grant Agreements are now in place and initial milestone payments have been made. Competitions for developments on Council owned sites under the Development Framework have been awarded and Development Agreements are nearing completion. Grant Award Programme window open for applications in Workington Area. 		<ul style="list-style-type: none"> Milestone payments will continue be made for grant awards as/when milestones reached. Engagement with developer will continue during COVID-19 emergency as developments currently on hold. Development Agreements for Framework developments will be completed and detailed build schedules and milestones agreed. Grant applications for developments in Workington have been evaluated and outcome communicated to providers. Further competitions under the Development Framework may be launched in other identified priority areas in future however this is unlikely during the COVID-19 emergency. Further grant windows may be opened under the Grant Award Programme in identified priority areas in future. 																											
Resulting in																															
Main Impacts of risks to Customer & Council		Links to Council Plan Delivery Plan		Quarter 4 Risk Rating																											
<ul style="list-style-type: none"> Financial impact due to the inability to reduce demand for services as well as not diverting service users away from residential or nursing care Reputational impact and Loss of confidence in the Council 		<p>2.9 A refreshed County Council care and support commissioning strategy including extra care housing - draft strategy to be produced.</p> <p>4.6 Joint council and NHS commissioning strategy across areas of mutual interest with a draft strategy produced.</p>		<table border="1"> <tr> <th colspan="4">Q4 RISK RATING</th> <th>12</th> </tr> <tr> <th colspan="4">likelihood x impact</th> <th>DOT</th> </tr> <tr> <th colspan="2">Previous quarter</th> <th colspan="2">Current quarter</th> <th rowspan="2">End Yr Target</th> <th rowspan="2">12</th> </tr> <tr> <td colspan="2">12</td> <td colspan="2">12</td> </tr> <tr> <td>3</td> <td>4</td> <td>3</td> <td>4</td> <td rowspan="2">12</td> <td rowspan="2"></td> </tr> </table>		Q4 RISK RATING				12	likelihood x impact				DOT	Previous quarter		Current quarter		End Yr Target	12	12		12		3	4	3	4	12	
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12		12																													
3	4	3	4	12																											

9. MANAGEMENT OF SIGNIFICANT CONTRACTS – Jo Atkinson		
There is a risk that	The Council has a failure in a 'significant contract'.	
Caused by	Current controls & measures in place to manage the risk	Quarter 1 planned improvements to controls & measures to manage the risk.
<p>Lack of timely closure of non-compliance issues, resulting in dispute escalation.</p> <p>Supplier/Market Failure to deliver the service required</p>	<p>Controls in place to maintain effective Contract Management – Performance, Risk Management & Internal Audit findings.</p> <ul style="list-style-type: none"> Quarterly reviews of both 'significant' and all other contracts takes place at DMT's. Quarterly Reports on 'significant contracts' are provided to CMT as part of the Business Assurance Framework. The Contracts Register is reviewed and risk assessed by directorate leads in relation to organisational impact, should the contract fail. Embedding clear governance to challenge underperformance promptly. Ensuring Audit recommendations receive prompt action. Ensuring Peer/Internal Gateway reviews, where appropriate/proportionate, are acted upon. Strengthening processes, such as contract Exemption and Modification requests, in relation to contract and corporate risks. Proactively identifying and risk managing gaps in contract documentation/procedures. Developing 'one team'/matrix management approach to problem-solving. Recording and taking actions on decisions, clearly and promptly. Seeking and acting upon legal advice promptly. Investing in commercial aspects of contractual relationships. Challenging underperformance, financial issues and/or timeliness promptly. A corporate approach/point of contact regarding initial early advice about managing contract disputes. 	<ul style="list-style-type: none"> There is ongoing evidence of effective Contract Management and compliance as contracts are being routinely monitored and managed through Directorate Management Teams with escalation to Corporate Management Team as appropriate. Specific assurance is achieved with contractual issues/disputes, overall performance and timelines are discussed in Board meetings, where applicable, in advance of any potential escalation to DMT's/CMT. Evidence suggests increased assurance is being achieved as a result of more robust and timely follow-up of Internal Audit findings in general. Assurance that completion and sign-off of both Modifications and Exemptions are more robust and timely. Contract risks and mitigations are more openly 'pressure tested' in a corporate meeting each quarter, thereby providing improved assurance. Internal Gateway Reviews being used at key stages in commissioning, procurement & contract management processes for high value/reputational risk contracts, thereby improving assurance. External consultants being used for advice regarding existing contract performance/options, and planned, upcoming contracts. PPN 02/20 currently being implemented and interpreted by AD's/Senior Managers following approval of ODR dated 7 April 2020. This activity is in relation to 'Supplier relief due to COVID-19, in the first instance, until 30 June 2020. (ie. timing; payment maintain business continuity; early payment; transparency; other contractual relief). The governance arrangements are through completion of a COVID-19 Modification to contract and an ODR, with subsequent supplier checks and balances as appropriate, on a case by case basis. Changes to contract could be as a result of failure to provide the services as required, and/or, a need to vary the contract as a result of the COVID-19 situation.
Lack of adherence to key Contractual terms/requirements	<ul style="list-style-type: none"> Sustainable Procurement Strategy Contract Procedure Rules Corporate Contract Management Workbook and Guidance Procedure Step by step guide to Commissioning, Procurement and Contract Management process, including links to Risk Management guidance Ensuring adequate Business Continuity arrangements are considered and in place, as required 'Speak up' arrangements in place to supplement 'Whistleblowing' policy. 	<ul style="list-style-type: none"> There is ongoing evidence of effective Contract Management and compliance as contracts are being routinely monitored and managed through Directorate Management Teams, with escalation to Corporate Management Team as appropriate ie. the Waste Management Contract. In general, assurance of effective Business Continuity arrangements for key suppliers has been sought in relation to Brexit (deal and no deal) in the past several months, and this will continue to be assessed during the transition period. The Council engaged Grant Thornton to undertake an assurance review of seven of its key contracts during the autumn 2019. It concluded both detailed officer interviews and desk-top reviews with an actions and recommendations report in December 2019, specifically identifying activities to realise benefits in several contracts ie. in the Waste and CNDR contracts.
Lack of clarity on Contract Management roles and responsibilities	<ul style="list-style-type: none"> Roles and responsibilities are defined within the new Good Practice Contract Management Framework workbook and continue to be embedded during the commissioning/procurement/contract management lifecycle. Contract Management, Corporate Governance & Risk Management training was delivered to establish baseline understanding of good Contract Management. <p>Listed below are the top four most 'Significant Contracts' at Quarter 4.</p> <ul style="list-style-type: none"> Connect (CNDR). Residential Care. Extra Care Housing. Renewi (Waste Management Contract). 	<ul style="list-style-type: none"> Having completed Contract Management, Corporate Governance & Risk Management training 2 years ago to establish baseline understanding of good Contract Management, there is a need to evaluate further training requirements for those staff involved in the commissioning, procurement and contract management processes. This programme of work was corporately scoped during the previous Quarter 4 and co-ordinated by L&D as agreed last year, to establish the need for: <ul style="list-style-type: none"> General refresher training for current and new commissioning, procurement and contract management during 2020/21 Tailored training for various categories of staff/contracts, as required during 2020/21.

Resulting in							
Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating					
<ul style="list-style-type: none"> Significant Contract(s) not demonstrating Value for Money. Significant Contract under performance/service disruption Significant Contract commercial consideration costs Significant Contract volumes of breaches and/or 'material' breach, resulting in formal escalation of disputes and/or legally invoking of the contractual dispute mechanism, leading to potential early termination of contract Reputational damage to the Council. 	<ul style="list-style-type: none"> The effective management of significant and other contracts is a cross-cutting risk and has an extensive impact on the delivery of the CPDP outcomes and deliverables. 	Q4 RISK RATING likelihood x impact			10		
		Previous quarter		Current quarter		End Yr target	DOT
		10		10		10	
		2	5	2	5		

10.SAFEGUARDING OF CHILDREN - Lynn Berryman & Fiona Musgrave																									
There is a risk that	there may be a serious failure in protecting children at risk of abuse or neglect																								
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.																							
Staff shortages: a lack of capacity or capability	<ul style="list-style-type: none"> Children's Workforce Strategy in place to address staff shortages across all areas particularly for experienced social work staff and social work qualified team managers. Staff shortages in West Cumbria continue to be addressed through proactive recruitment campaigns and a managed service is in place until February 2020. Social work academy approach embedded for newly qualified social workers to join the workforce Grow your own – social work apprenticeship scheme 	<ul style="list-style-type: none"> COVID-19 will reduce the amount of recruitment activity that can take place during this period. Management team meeting daily during COVID-19 to ensure practice and policies are being followed to ensure the safety of children during this period. 																							
Policies, procedures & protocols not being clear, up to date, understood and adhered to.	<ul style="list-style-type: none"> The Workforce & Practice Board provides management oversight. A Policy Framework is in place and continues to be updated using TriX. An Audit Quality Assurance Framework is in place. A supervision Policy is in place. Children's Practice standards have been developed and signed off. 	<ul style="list-style-type: none"> Policy and procedures have been updated in line with COVID-19 government guidance. 																							
Training and supervision being ineffective or inadequate.	<ul style="list-style-type: none"> The quality of Supervision in Children's Services is audited monthly via the Quality Assurance Framework. Performance measures for Supervision in Children's Services are in place and monitored on a monthly basis. 	<ul style="list-style-type: none"> There is a plan to have the first practice week within Quarter 1. Audits have not taken place in April due to COVID-19 priorities but will recommence, in a shortened format, from May 20. 																							
Breakdown of partner relationships.	<ul style="list-style-type: none"> Cumbria Safeguarding Children Partnership (CSCP), business plan and performance monitoring is in place to provide oversight, challenge partners and monitor partners individually and collectively. The new legislative framework for Children's Safeguarding Arrangements is being overseen by Statutory Safeguarding Partners. The new arrangements are in place and build on the LSCB peer review with largely positive feedback. The new partnership arrangements, including rebranding, updating the website and refreshing policies and procedures have been completed. 	<ul style="list-style-type: none"> New arrangements for the safeguarding partnership are well embedded COVID-19 has meant that face to face meetings have not been possible The board is "meeting" fortnightly to ensure Business Continuity and legislative frameworks are adapted as required for each agency and that children are safeguarded The CSCP continues to ensure training, learning and comms are available and adapted for the current situation The chair of the CSCP now sits on the CTB to give continuity and to highlight SG to the top of the agenda Locality arrangements and the 2020 onwards plan have been delayed until certainty regarding easing of lockdown measures gives clarity about future roles and responsibilities 																							
Resulting in																									
Main Impacts of risks to Customer & Council		Links to Council Plan Delivery Plan		Quarter 4 Risk Rating																					
<ul style="list-style-type: none"> Serious injury or death to a child, young person or adult 		1.9 Move to new board arrangements for Children's safeguarding. Board established, draft plan expected following peer review, plan by end of June 2019 - implement September 2019.		<table border="1"> <thead> <tr> <th colspan="4">Q4 RISK RATING likelihood x impact</th> <th>10</th> </tr> <tr> <th colspan="2">Previous quarter</th> <th colspan="2">Current quarter</th> <th>End Yr Target</th> <th>DOT</th> </tr> </thead> <tbody> <tr> <td colspan="2">10</td> <td colspan="2">10</td> <td rowspan="2">10</td> <td rowspan="2">➔</td> </tr> <tr> <td>2</td> <td>5</td> <td>2</td> <td>5</td> </tr> </tbody> </table>	Q4 RISK RATING likelihood x impact				10	Previous quarter		Current quarter		End Yr Target	DOT	10		10		10	➔	2	5	2	5
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Previous quarter		Current quarter		End Yr Target	DOT																				
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11.SAFEGUARDING OF ADULTS - Cath Whalley & Fiona Musgrave		
There is a risk that	there may be a serious failure in protecting adults at risk of abuse or neglect	
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.
Staff shortages: a lack of capacity or capability	<ul style="list-style-type: none"> Following a recent reshaping of ASC it has been identified that the current Safeguarding Adult Manager does not have the staffing structure to support the development of safeguarding practice adult social care services. As such, a review of current vacant posts was undertaken to identify additional resource to support the Safeguarding Adult Manager. <ul style="list-style-type: none"> At end of Q3, all Managers for the Safeguarding team have now been appointed A Principal Social Workers for Adults is now in post and will ensure that Best Practice is implemented across the Organisation. The new Adult Social Care structure will include; <ul style="list-style-type: none"> A dedicated Safeguarding Service that will be responsible for responding to undertaking all safeguarding enquiries. This will ensure a consistent and timely response to all referrals. 12 new Advanced Practice Lead posts will be in post for April 2020 and they will support the embedding of a strength based approach and practice, which will enable people to achieve their most independent outcomes. Use of the Social Work Academy approach is being used to bring in permanent staff. An external recruitment campaign is in place to bring in permanent staff. 	<ul style="list-style-type: none"> Interim arrangements are still ongoing to strengthen capacity and support ASC teams to make timely decisions and good safeguarding practice, pending the implementation of the new ASC structure. This will be kept under review, pending implementation of the new structure. Reshaping of the Safeguarding Service is still under review alongside the wider adult social care reshaping however, the original target date of 1 April has been paused due to impact of COVID-19. An external recruitment campaign is in place and will continue to track and fill vacancies. Adult Social Care Reshaping of the whole directorate has been paused to minimise disruption to structure, processes and services in order to focus upon the response to COVID-19. This has resulted in delays to recruitment and ability to release internal staff to transfer to safeguarding team. The need to focus upon COVID-19 and delay to recruitment to vacancies across Adult Social Care means it is necessary to pause the release of practitioners to take up Advanced Practice Lead posts for the time being. Snr Manager Safeguarding and partially recruited to Safeguarding Service have moved to 7 day working and continue to support teams to make timely decisions and good safeguarding practice. External recruitment campaign has been paused due to the restrictions of lock down. In addition, ASC leadership team are meeting daily to manage the response to COVID-19 which includes daily safeguarding updates. CSAB meeting fortnightly during COVID-19.
Policies, procedures & protocols not being clear, up to date, understood and adhered to	<ul style="list-style-type: none"> Adult Social Care have successfully secured the TriX system and it is now live. A new Safeguarding Case File quality audit process is in place and will provide assurance that policies, procedures and protocols are effectively understood and adhered to. The audit results are provided to the teams and service areas assisting them in identifying key areas for improvement and learning. In Quarter 3 2019/20, the service completed a review of cases to ensure that people in Cumbria are safe, that processes are working appropriately and that we have plans in place to improve current performance. There is an ongoing weekly review of Safeguarding Performance at Adults Social Care Leadership Team Meetings. 	<ul style="list-style-type: none"> Work is ongoing to ensure that all safeguarding policies, procedures and guidance are reviewed and accurately reflect practice requirements. Development of the case file audit is delayed due to focus upon practice and safeguarding during COVID-19 outbreak. This work will be progressed as earliest opportunity to ensure compliance with policies, procedures and guidance Performance monitoring systems are reported on weekly basis to identify early any concerns to be addressed.

Appendix 2

QUARTER 4 - REGISTER OF CORPORATE RISKS

<p>Training and supervision being ineffective or inadequate</p>	<ul style="list-style-type: none"> In Adult Social Care a new supervision tool is being developed to support staff development. Safeguarding Training is mandatory and compliance and is being monitored. The Safeguarding Passport has been refreshed and is applicable to all staff groups within Adult Services. The passport has been uploaded to iTrent to monitor compliance and engagement. Additional briefings to staff will be provided via the CSAB news update. Threshold guidance sessions and tool were delivered throughout the county to all adult operational staff to assist in the consistent application of procedures. This tool will be used annually. Practice Learning Hubs are undertaken in each division on a quarterly basis by the Safeguarding Service Manager to provide regular updates on any key policy or practice updates. The sessions also provide an opportunity for practitioners to reflect and discuss key practice issues relating to Safeguarding Adults. 	<ul style="list-style-type: none"> Further work will be carried out to review the mandatory training offer to the service as a whole and incorporate threshold guidance training within this offer. Training for the new specialist safeguarding team to develop will skills and practice is being delivered within monthly training sessions supported by Learning and development team. – temporary pause due to focus upon COVID-19 response There are further plans agreed with the Cumbria safeguarding adults board to develop and deliver multi-agency safeguarding practice sessions to develop practice skills and organisational relationships. The Department of Health and Social Care has issued guidance on post-qualifying standards for adult Social Workers and Principal Social Workers will be required to undertake training on this shortly, dates not yet confirmed. The AD Adults will lead this training, ensuring that the Advance Practice Leads are able to provide professional supervision across all service areas. – delayed pending implementation of paused structure and transfer of practitioners to take up Advanced Practitioner Posts
<p>Breakdown of partner relationships.</p>	<ul style="list-style-type: none"> The Cumbria Safeguarding Adult Board has engaged in a number of Board Development Sessions commissioned by the new Independent Chair. Key partners to the Board are now also identified as Chairs to the Board Sub-groups to support engagement and agency ownership. Action plans have been developed and incorporated into the 2019-20 Strategic Plan. A new scorecard has been developed to increase assurance and oversight and reporting and monitoring arrangements are now established. 	<ul style="list-style-type: none"> COVID-19 has meant that face to face meetings have not been possible The board is “meeting” fortnightly to ensure Business Continuity and legislative frameworks are adapted as required for each agency and that children are safeguarded The CSAB continues to ensure training, learning and communications are available and adapted for the current situation The AD Adults continue to work together through Partnerships and sub groups to provide effective safeguarding arrangements. Multi agency face to face training has been agreed by partners to be undertaken once the current situation is eased.

Resulting in

Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating			
<ul style="list-style-type: none"> Serious injury or death to an adult Investigations carried out by - A safeguarding Adults review (SAR) or Serious Case review (SCR) Liability claims against the Council Reputational damage to the Council 		<p>Q4 RISK RATING likelihood x impact</p>			<p>10</p>
		<p>Previous quarter</p>	<p>Current quarter</p>	<p>End Yr Target</p>	<p>DOT</p>
		<p>10</p>	<p>10</p>	<p>10</p>	
		<p>2</p>	<p>5</p>	<p>2</p>	<p>5</p>

12. HEALTH & SOCIAL CARE INTEGRATION – Fiona Musgrave					
There is a risk that	The Council will not be able to maintain the pace required to deliver a fully integrated Health & Care Service aligned to ICC's in both North & South Cumbria.				
Caused by	Current controls & measures in place to manage the risk	Improvements to controls at end Q4 and planned during Q1.			
Competing priorities within CCC and the wider system.	<ul style="list-style-type: none"> Currently reviewing the integration arrangements building on the success of the Eden ICC arrangements and exploring opportunities for co-location of health and care services whilst maintaining current management arrangements to deliver against CCC MTFP's. Transfer of learning between North and South Cumbria ICC development to ensure more consistent delivery. Internal arrangements are in place to ensure direction of travel fits with organisational expectations, communication and engagement improves and the Integration agenda is being driven according to Council priorities. 	<ul style="list-style-type: none"> Work continues across North and South Cumbria to deliver Integrated Care Communities (ICC). Phase 3 of ICCs in North Cumbria commenced in September 2019. The internal Integration Board will continue to have oversight of emerging models, further opportunities and Local and National drivers. 			
Resulting in					
Main Impacts of risks to Customer & Council	Links to Council Plan Delivery Plan	Quarter 4 Risk Rating			
<ul style="list-style-type: none"> Failure to deliver a well- integrated service to our customers/the public. Failure to meet legislative requirements. Failure to deliver CCC CPDP outcomes/partnership outcomes. Reputational damage to the Council/Partnerships. 	1.1 Continue to work across North and South Cumbria to deliver Integrated Care Communities (ICC) with Phase 3 of ICCs in North Cumbria commencing September 2019, and in South Cumbria improve health and care referral pathways through the development and a co-ordination hub model.	Q4 RISK RATING		8	
		likelihood x impact		DOT	
		Previous quarter	Current quarter	End Yr Target	
		8	8	8	
2	4	2	4		