

**Report of the Deputy Chief Executive & Corporate Director for Resources
Strategic Risk Register (SRR) – Q3 2012/13 Update**

1. REPORT PURPOSE

- 1.1 This is the Q3 2012/13 (as at January 2013) update of the Council's SRR 2012/13 presenting the progress made in reducing the threat level for each strategic risk from their original position.
- 1.2 At the 30 November meeting Audit Committee selected two strategic risks for more detailed scrutiny *SR24 - Failure to ensure effective systems are in place to manage health and safety risks* and *SR29 - Failure to establish an effective Public Health function impacting citizen wellbeing and a failure to deliver the authority's statutory responsibilities*.

2. RECOMMENDATIONS

Audit Committee is recommended to:

- 2.1 Consider the strategic risks *SR24 - Failure to ensure effective systems are in place to manage health and safety risks* and *SR29 - Failure to establish an effective Public Health function impacting citizen wellbeing and a failure to deliver the authority's statutory responsibilities* (see **Appendix 1** and **2**) for more detailed review following selection by Audit Committee at the 30 November meeting.
- 2.2 Consider and critically appraise the progress made on reducing the seriousness of the Council's strategic risks as reflected by their threat levels and Direction of Travel (DoT) for Q3 2012/13 (Table 1 and **Appendix 3**).
- 2.3 Note the results of the review of the SRR by CLT.
- 2.5 Select a number of strategic risks from **Appendix 3** for specific scrutiny as part of the SRR Q4 2012/13 update. Selection might be based on the time elapsed since the risk was last reviewed, changes in the risk's threat level (or DoT) or relevance to current local or national matters of interest or concern.

3. REASONS FOR CONSIDERATION

- 3.1 The Audit Committee's key risk management role is to provide assurance on the adequacy of the Council's Risk Management Framework and the associated control environment by reviewing the mechanisms for assessing and managing risk. Part of this responsibility is to ensure active risk management is undertaken by relevant managers. This report presents the latest CLT review of the strategic risks faced by the Council.

4. THREAT LEVEL REDUCTION PROGRESS

4.1 Progress in reducing the seriousness of our strategic risks is assessed by a combination of each risk's overall threat level and Direction of Travel (DoT). This rounded assessment gives a clearer picture of progress in reducing the risk threat level. This is summarised in **Table 1**.

4.2 Several SRR risks have been assessed by risk owners as improving, stable or at target. However, **nine** risks are red rated, reflecting a range of delivery pressures and challenges the Council has to respond to.

4.3 For the **17** strategic risks within the SRR:

- **One** risk shows a reduced threat level
- **Three** strategic risks being at target
- A further **four** strategic risks show an improved DoT and **one** strategic risk has been delegated from the SRR since Q2
- **None** of the strategic risks shows a deteriorating position

4.4 **Table 1** shows the strategic risks ranked in order of Threat Level and DoT (highest to lowest Threat Level):

TABLE 1: Risk Threat Level & DoT in rank order at Q3 2012/13			
SR No.	Strategic Risk Description	Threat Level	DoT (Q2–Q3)
Red rated strategic risks (9)			
19	Failure to deliver Council Plan priorities (under review)	16	↔
26	Failure to support Nottingham citizens and communities in minimising the negative impact of welfare changes	16	↔
6	Failure to safeguard vulnerable children	15	↓
11	Failure to address medium term financial pressures in a sustainable way	12	↔
12a	Failure to provide the best educational outcome for children and young people	12	↔
14	Failure to deliver culture change (under review)	12	↔
7	a) Failure to reduce levels of crime and b) anti-social behaviour	12	↓
28	Failure to ensure a financially sustainable ASC system to respond to significant increases in demand for care while protecting our most vulnerable citizens	12	↓
29	Failure to establish an effective Public Health function with adverse impact on the citizen wellbeing and a failure to deliver the authority's statutory responsibilities	12	↓

TABLE 1: Risk Threat Level & DoT in rank order at Q3 2012/13 (continued)			
SR No.	Strategic Risk Description	Threat Level	DoT (Q2–Q3)
Amber rated strategic risks (7)			
8a	Failure to implement and embed effective information management structures, policies, procedures, processes	9	↔
10	Failure to maintain good standards of governance	9	↔
24	Failure to ensure effective systems are in place to manage health and safety risks	9	↔
3	Failure to mitigate the impact of the economic climate on Nottingham City and its citizens	12 to 9 At target	↓
16a	Failure of partners including the City Council to work effectively together	8 At target	↔
25	Failure to deliver improved outcomes through the Commissioning Framework (under review)	8	↔
5a	Failure to safeguard vulnerable adults	8	↔
Green rated strategic risks (1)			
2a	Of the reputation of the City	6 At target	↔

DoT key: ↓ Reducing Threat Level ↔ Stable Threat Level ↑ Increasing Threat Level

Appendix 3 identifies individual risk owners, detailed risk threat level assessments between March 2012 (Q4 2011/12) and January 2013 (Q3 2012/13) and the projected dates when target threat levels will be achieved.

4.5 Review of new, emerging and existing SRR risks

4.5.1 xSR1 - Failure to implement harmonised pay, grade and terms and conditions, that are fair to all colleagues and Equal Pay legislation compliant is a long standing risk which has been in the SRR for almost four years. In this time the risks have progressively been reduced and the focus of attention shifted. Since January 2012 effort has centred on managing the risks around implementation of new pay, grades and terms of conditions for non-teaching schools staff. Since Q2, further significant progress has been made to reduce the threat levels for a number of constituent risks including:

- Threat of industrial action and resultant delays to implementation (8 to 4)
- Lack of engagement by schools/key school staff (6 to 2)
- Impact of changes to schools holiday patterns on agreement of updated terms and conditions and the scope for delays to implementation (12 to 4)

On this basis the overall threat level was reduced to target 8 to 6. While some risks remain, these are diminishing (effectively reducing to zero from 1 April 2013), or have limited scope and have actions/plans in place considered adequate to manage the risks. In light of the above CLT agreed on 29 January to delegate the risk to the Resources Departmental Risk Register for ongoing management.

4.5.2 SR3 - Failure to mitigate the impact of the economic climate on the Nottingham City and its citizens: Two constituent risks show improved threat levels since Q2 reporting:

- Failure to ensure with our partners that business support is fit for purpose now and in the future to take advantage of growth opportunities (9 to 6)
- Failure with our partners to create conditions to facilitate private sector growth locally (12 to 8)

This improvement stems from significant funding secured (approx. £60m) through a combination of City Deal and the Regional Growth Fund which will provide business support activity in conjunction with partners. For example, £37.5m is available as an equity investment fund to which business can make bids for funding for business development. Consequently the overall threat level has been assessed as having improved from 12 to 9.

4.5.3 SR24 - Failure to ensure effective systems are in place to manage health and safety risks: The selection of this risk by Audit Committee for review reflects the recent Q2/Q3 assessment of the risk as having deteriorated (6 to 9). The reassessment of the risk is in light of the death of a vulnerable adult while part of a supervised day care centre visit to King's Mill reservoir in September 2012. Over the last two years significant progress has been made in developing the authority's Health & Safety approach and this has led to a previously sustained fall in the risk rating of this strategic risk. Actions contributing to this risk reduction have included:

- Identifying and promoting good practice
- Ensuring managers understand their H&S responsibilities
- Providing H&S training/courses
- Ensuring/testing for a systematic and consistent approach
- Follow up 'audits' to ensure managers are putting theory into practice
- Clear identification of 'who is responsible for what' amongst premises managers and Facilities Management colleagues

Despite this good work amongst managers and premises managers, recent events have demonstrated the need to go further and to embed H&S specifically below the level of managers. It is likely that the HSE will wish to see the spread of best practice and consistency in the council's delivery of health and safety. It is proposed that a risk assessed approach will see work undertaken in areas of identified sensitivity/vulnerability to ensure necessary H&S compliance, consistency and understanding of good practice (see **Appendix 1** for the RMAP).

A specific proposal to look at the health and safety practices within Adult Care services has been developed for the Director of Human Resources and Transformation arising out of the Strategic Critical Incident Group, chaired by the Corporate Director for Communities.

4.5.4 SR29 - Failure to establish an effective Public Health function (promote/protect health, tackle health inequality, promote social justice and safer communities) with adverse impact on the citizen wellbeing and a failure to deliver the authority's statutory responsibilities under the 2012 Health and Social Care Act: The transfer of the public health function (including Health Protection, Health Improvement and Health Care Public Health) from PCTs to local government from April 2013 represents a significant extension to local government responsibilities. The transfer also presents an opportunity to bring improvements to citizens through development of a local vision for public health and a more integrated approach to delivering that vision. However, there are clearly significant casual risks to Public Health functions and responsibilities, not least of which is managing the transition while maintaining services.

Progress continues in terms of managing the risks and significant improvement has been made in reducing the threat level for a number of the constituent risks since the risk was previously reported to CLT, for example:

- Financial risk from budget allocation changes (12 to 9)
- Risk of damage to partner relations from poorly managed transition (12 to 8)
- Risk of being able to agree the core offer with the CCG (12 to 8)
- Risk to funding for the Healthwatch programme (12 to 8)

Despite these improvements, there are still some significant red assessed risks:

- The government has delayed clarification on the transfer scheme for staff delaying the start of formal staff consultation, organisational development, support and training. Delays also reduce the time for implementing changes and responding to issues arising from the transfer. In response there is now a commitment to press ahead with the consultation process in advance of receiving clarification (12)
- For access to NHS data the authority must be N3 accredited i.e. be compliant with NHS information governance requirements. This presents a significant challenge to the organisation requiring concerted action by the authority over the next 12 months (9 to 12)
- A new system of Health Protection is now becoming established which sees staff matched to posts as part of the PH service or the Commissioning Board. Although this has reduced the level of risk, risks remain in maintaining Public Protection work streams over different organisations with potential for confusion, misalignment of objectives/resources and changes in personnel (15 to 12)

In terms opportunities, a report is due to be presented to CLT in February with proposals for alignment and integration of Public Health and complementary functions and adoption of revised ways of working. Overall the threat level remains at red 12, but with an improving DoT (see RMAP included as **Appendix 2** for further detail).

5. FUTURE AUDIT COMMITTEE RISK REVIEWS

5.1 The provision to select strategic risks for review allows Audit Committee to direct attention to areas of risk considered potentially significant to the Committee's operations and remit. The Audit Committee is invited to select two strategic risks from **Appendix 3** for more detailed examination in the SRR Q4 2012/13 Update.

6. FINANCIAL IMPLICATIONS

6.1 There are no direct financial implications arising from this report. Actions to mitigate identified constituent risks are contained within the RMAPs. These actions will be positioned within the Council's Corporate Directorate and Strategic Service Plans and, as appropriate, inform the medium term service and budget planning process.

7. RISK MANAGEMENT ISSUES

7.1 These are dealt with throughout the report.

8. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

8.1 The following background papers were referred to in preparing this report:

- Quarter 3 2012/13 Strategic Risk Management Action Plans

9. PUBLISHED DOCUMENTS REFERED TO IN COMPILING THIS REPORT

9.1 The following reports were referred to in preparing this report:

- SRR Q2 Update reported to Audit Committee 30 November 2012

APPENDICIES

Appendix	Description
1	<i>SR24 - Failure to ensure effective systems are in place to manage health and safety risks (RMAP selected for review by Audit Committee)</i>
2	<i>SR29 - Failure to establish an effective Public Health function impacting citizen wellbeing and a failure to deliver the authority's statutory responsibilities (RMAP selected for review by Audit Committee)</i>
3	Nottingham City Council Strategic Risk Register - Report Summary

Sponsoring Corporate Director

Carole Mills – Deputy Chief Executive & Corporate Director for Resources

Author:

Simon Burton – Corporate Risk Specialist

☎ 0115 87(63432)

✉ simon.burton@nottinghamcity.gov.uk

SR24 – Failure to ensure effective systems are in place to manage health and safety risks.

			Impact				
			Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Likelihood	Remote (1)	(1)	1	2	3	4	5
	Unlikely (2)	(2)	2	4	6	8	10
	Possible (3)	(3)	3	6	9	12	15
	Likely (4)	(4)	4	8	12	16	20
	Almost certain (5)	(5)	5	10	15	20	25

Owner:	C. Mills Deputy Chief Executive & Corp. Dir Resources	Completed by:	P. Millward Head of Resilience	Date Completed:	Jan 13	Next Review Date:	Mar 13
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Overall Risk Summary

Previous (Q2 2012/13)				Latest (Q3 2012/13)				Target (Dec 2012)			Overall Risk Mitigation Effectiveness (Adequate, Yet to secure improvement, Inadequate)
L'hood	Impact	L x I	DoT	L'hood	Impact	L x I	Dot	L'hood	Impact	LxI	
3	3	9	↑	3	3	9	↔	2	3	6	YET TO SECURE IMPROVEMENT

Constituent risks under risk management:

Risk Ref:	Constituent Risk Description	Opening Threat Level (LxI)	Previous Threat Level (LxI)	Latest Threat			Direction of Travel (DoT) (Stable ↔ Improving ↓ Deteriorating ↑)	Target Threat Level (LxI)
				L	I	LxI		
1.	Employers and employees are unaware of their responsibilities.	9	6	2	3	6	↔	6
2.	Statutory regulations/requirements relating to H&S breached/not complied with resulting in an investigation and prosecution by an enforcement authority (could result in fines or in extreme cases prison sentences, civil action).	9	9	3	3	9	↔	6
3.	The authority fails and/or there are delays in responding/taking action.	9	9	3	3	9	↔	3
4.	The authority fails to adequately assess the risks to the Health and Safety of their employees whilst at work, and the risks to members of the public caused by the conduct of the authority.	9	9	3	3	9	↔	6
5.	Hazards are not identified (this needs to be completed before the degree of risk can be calculated).	12	9	3	3	9	↔	6

Current and new management actions acting on risk:

Risk Ref.	Current management actions in place	Adequacy of action/control to mitigate risk (Effective, Yet to secure improvement, May not be enough)	Additional action / control to mitigations	Responsibility for additional action		Critical success factors of additional actions	Key Dates	
				CD Owner	Dir/HoS Support		Additional action complete	Progress review frequency
1, 2, 4	Regularly reviewed and updated policies, guidance and procedures in place which all staff are required to comply with as a condition of service. Funding for additional resources has been secured.	ADEQUATE Information is currently available on line. Compliance auditing is underway	Full refresh of the safety manual and a change in focus from guidance and information to Policy and Information and implementation of management guides. Management awareness and compliance of above underway. Mandatory managerial training (3 courses) instituted.	CM	GO'C/ PM	Sufficient staffing resources and approval and ownership by senior managers Additional resources are deployed to train managers in statutory requirements for their service areas and provide on line and corporate advice on relevant health and safety requirements.	Oct 2010 (complete) March 2012 (complete)	Biennially from Oct 2012
1, 2, 3, 4, 5	There is a Corporate Safety Advice Team comprising H&S professionals with a budget that is reviewed and approved annually. Funding for additional resources has been secured.	ADEQUATE Budget reductions over last 5 years has halved operational support to the organisation in relation to the number of safety professionals	Changing strategic direction of the Corporate Safety Advice team to enable more proactive and targeted risk based approach to ensure high risk operations are managed	CM	GO'C/ PM	Change in focus of the unit to offer a targeted safety function based on risk, not departmental consideration. CLT to support the refocusing of the service and the proposed mandatory training for people managers. A training needs analysis will be undertaken, courses developed, and all managers will undertake the necessary training pertinent to their service areas. Improved information within the safety manual, targeted training and assisting senior managers to understand the H&S	Apr 2011 (complete) March 2012 (complete)	Annually from April 2012 March 2013 (complete) March 2013 (complete)

						responsibilities and duties	(complete)	
3	Where any concerns are raised/reported they are logged and investigated and resolved/closed.	ADEQUATE Need to stress the importance of effective document control and the need to undertake investigations into H&S failure.	Corporate safety Advice Team to assist management in understanding the importance of documented and auditable trails within the safety management framework.	CM	GO'C/ PM	Highlights the importance of training to ensure all managers at all levels within the organisation understand their duties in relation to effective safety management. New on line accident management system requires managers to undertake fit and proper investigations into incidents as they occur. All buildings have named person responsible for premises and appropriate log books etc.	April 2011 (complete) Sept 2011 (complete) March 2012 (complete)	Annually from April 2012 Annually from April 2012 Annually from April 2013
1, 2, 3, 4, 5	All staff receive formal training on general Health and Safety issues. Further suitable and sufficient training is provided on a job and role specific basis.	ADEQUATE To mitigate the reduction in the safety function, training on safety for all managers within the organisation is important to ensure they are aware of their responsibilities and statutory obligations	Formalised and specific training at a level that enables the organisation to demonstrate that its safety function is in place and is effective in light of recent HSE investigations, this is the area that is consistently identified as a potential organisation failure Mandatory managerial training (3 courses) instituted and take up monitored	CM	GO'C	Improved policy and information tied in with a suitable training process for the organisation as a whole on safety management (IOSH or similar) Mandatory training of all relevant managers developed and will be delivered across the council by June 2012. Manager's training needs and requirements will be identified and a range of courses delivered according to manager's service area needs.	Sept 2011 (complete) March 2012 (complete)	Annually from April 2012 Biennially from April 2014
4, 5	There is a regular inspection programme in place to carry out high-risk checks.	YET TO SECURE IMPROVEMENT The Corporate Safety Advice team to work with	CSA team to support management through effective training.	CM	GO'C/ PM	Management understanding their roles and the requirements of a safety inspection and have received suitable training for this to take place.	July 2011 (complete)	Reviewed annually

		management to certain types of safety / premises inspections to be undertaken by managers, working with employees and other interested parties	'Inspection' regime for all managers being developed and rolled out in 12/13.			Managerial audits undertaken in 12/13 CSA to support senior managers who are required to take responsibility for such matters and embed it within a safety culture in the future	May 2013	
3	The authority has an Emergency Plan / Procedure on the identification of a life threatening H&S issue or in the event of a fatal accident.	YET TO SECURE IMPROVEMENT The plan is in place but it is essential that all managers understand their responsibilities	Improvements to the safety manual coupled with improved training will make management and staff aware of the underlying risks that may be present within their working environment Following a recent incident, lessons at Departmental and Corporate level response level need to be learned. Specific departmental high risk areas need specific training and procedures Departmental training on specific health and safety issues needs to be considered.	CM JK/IC All CDs	GO'C/ PM AP	Corporate Safety Advice team to target known high risk service areas as opposed to offering a same level of service to all departments to address known high risk / life threatening issues and ensure that policies and procedures are followed Changes to procedures and training considered following outcome of statutory investigations and internal review	May 2011 (complete) July 2013	Annually from April 2012
1, 2, 3, 4, 5	Corporate Health and Safety Audits are undertaken by the Corporate Safety Advice team on a regular basis.	YET TO SECURE IMPROVEMENT Strategic audit to look at the key issues that face the organisation	Directors to use audit protocol requiring some investigatory work that would identify areas of potential weakness and enable the development of action plan to be implemented	CM	GO'C/ PM	CLT are supporting the completion of the audit to enable the key areas to be identified which will then assist in training requirement, amendments to the corporate safety manual and high risk environments and activities that may require further support.	May 2011 (complete)	

						Individual managerial audits to be undertaken in 12/13 checking compliance with legislation in line with mandatory training. Lack of compliance will be highlighted and addressed	May 2013	Initial failures addressed within agreed timetable and then every 3 years afterwards in line with mandatory training refresh.
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SR29 - Failure to establish an effective Public Health function (promote/protect health, tackle health inequality, promote social justice and safer communities) with adverse impact on the citizen wellbeing and a failure to deliver the authority's statutory responsibilities under the 2012 Health and Social Care Act.

This strategic risk is scoped around delivery of Public Health services ensuring progress against the Nottingham Plan Targets for health, effective management and mitigation of Health protection risks, Public Health advice to support NHS Commissioning and ensure that NCC fulfils its new statutory duties for Public Health. A key component of the risks is managing the transition of the Public Health directorate, resources and functions to Nottingham City Council from the NHS by 1 April 2013. There are opportunities to secure benefits from the integration of Public Health, for example, more effective policy, shared objectives, more effective working/use of resources.

		Impact				
		Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Likelihood	Remote (1)	1	2	3	4	5
	Unlikely (2)	2	4	6	8	10
	Possible (3)	3	6	9	12	15
	Likely (4)	4	8	12	16	20
	Almost certain (5)	5	10	15	20	25

Owner:	I. Curryer CD-Ch & Fam		Completed by:	A. Hall Dir Health & Welbeing Transition		Date completed:	Jan 2013	Review date:	Mar 2013					
RISK SUMMARY														
Opening (Dec 10)			Previous (Sept 2012)			Current (Jan 2013)			Target (April 13)	Overall risk mitigation effectiveness (Adequate, Yet to secure improvement, Inadequate)				
Threat level (Lxl=??)			Threat level (Lxl=??)			Threat level (Lxl=??)			Threat level (Lxl=??)					
			DoT ↓ Improving ↔ Stable ↑ Deteriorating			DoT ↓ Improving ↔ Stable ↑ Deteriorating								
3	4	12	3	4	12	↓	3	4	12	↓	3	3	9	Adequate

RISKS TO BE MANAGED - JANUARY 2013

Risk Ref.	Risk Description (in the format cause, risk & impact)	Date identified	Identified by	Opening Threat Level e.g. 2x4=8			Previous Threat Level e.g. 2x4=8			Latest Threat Level e.g. 2x4=8			DoT (↓ Improving ↔ Stable ↑ Deteriorating)	Target Threat Level e.g. 2x4=8			Proposed Mgt Action	Adequacy mgt actions (Adequate, Yet to secure improvement, Inadequate)	Status (Live, Closed)
CP1.1	Finance - Formula for budget allocation moves quickly to target requiring NCC to reduce scale of Public Health function	12/07/12	Project Team	3	4	12	3	3	9	3	3	9	↔	2	3	6	Treat	Adequate	Live
CP1.2	Excess treatment costs related to Public Health research, where the responsibility for commissioning will transfer to the Local Authority in April 2013. The risk is that excess treatment costs will not be funded by the Local Authority. The impact would be that Public Health interventional research could not take place within the Public Health services commissioned by the Local Authority. This would impact on the generation of future Public Health evidence in Nottingham for the local, national and international evidence base.	12.6.12	RI	3	4	12	3	4	12	3	2	6	↓	2	4	8	Treat	Yet to secure imp	Live
CP2	Leadership & Governance - Vision for PH and role of PH within NCC - difficulty in gaining agreement of role of PH in NCC due to differing views and completing demands for the future of the function	12/07/12	Project Team	3	4	12	2	4	8	2	4	8	↔	2	3	6	Treat	Adequate	Live
CP3	Communications & Stakeholder Engagement - Risk of damaging future partner relationships between NCC, NHS, providers and other stakeholders if PH transition is not delivered smoothly and positively	12/07/12	Project Team	3	4	12	3	4	12	2	4	8	↓	2	4	8	Treat	Yet to secure imp	Live
WS1	Contracts & Commissioning - Unable to ensure continuity of service if agreement cannot be reached to re-procure tendered contracts for some services ending 31st March 2013.	12/07/12	Project Team	3	4	12	2	4	8	2	4	8	↔	1	3	3	Treat	Adequate	Live
WS2	HR & Staff transfer - Delays to transfer scheme being published reduce margin for error but impact on staff morale.	12/07/12	Project Team	4	4	16	3	4	12	3	4	12	↔	2	4	8	Treat	Adequate	Live
WS3	Information Governance/ICT - Unable to ensure access for PH function to information within NHS necessary to fulfil statutory role. Current access levels will not be adequate	12/07/12	Project Team	3	3	9	3	3	9	3	4	12	↑	1	3	3	Treat	Yet to secure imp	Live
WS4	Core Offer - Unable to agree a Core Offer with CCG	12/07/12	Project Team	2	4	8	2	4	8	2	4	8	↔	1	4	4	Treat	Yet to secure imp	Live
WS5	Health Protection - Failure to maintain Health Protection function due to separation of different streams of Health Protection work into different organisations	12/07/12	Project Team	3	5	15	3	5	15	3	4	12	↓	2	4	8	Treat	Yet to secure imp	Live

RISKS TO BE MANAGED - JANUARY 2013

Risk Ref.	Risk Description (in the format cause, risk & impact)	Date identified	Identified by	Opening Threat Level e.g. 2x4=8			Previous Threat Level e.g. 2x4=8			Latest Threat Level e.g. 2x4=8			DoT (↓ Improving ↔ Stable ↑ Deteriorating)	Target Threat Level e.g. 2x4=8			Proposed Mgt Action	Adequacy mgt actions (Adequate, Yet to secure improvement, Inadequate)	Status (Live, Closed)
WS6	Healthwatch - Insufficient funding to commission Healthwatch successfully	12/07/12	Project Team	4	4	16	2	4	8	2	4	8	↔	1	4	4	Treat	Adequate	Live
WS7	Health & Wellbeing Board/Strategy - Wider transition process puts pressure on partner relationships making it difficult to agree HWBS priorities prior to further Board development	12/07/12	Project Team	3	4	12	3	3	9	2	3	6	↓	1	3	3	Treat	Adequate	Live

		Impact				
		Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Likelihood	Remote (1)	1	2	3	4	5
	Unlikely (2)	2	4	6	8	10
	Possible (3)	3	6	9	12	15
	Likely (4)	4	8	12	16	20
	Almost certain (5)	5	10	15	20	25

EXISTING MANAGEMENT ACTIONS				ADDITIONAL MANAGEMENT ACTIONS				ALL
Risk Ref.	Issue Ref.	Description of actions already in place to mitigate the identified risks	Person accountable	Update 18.09.2012	Description of additional actions put in place (mandatory where current risk mitigation effectiveness is "Inadequate")	Person accountable	Date action due to be completed	Review date
CP1.1		Finance - 1. Ensure all returns to DH are as accurate as possible based on current spend. 2. Ensure NCC has flexibility to give notice on contracts. 3. Maximise benefits of links with other corporate departments and teams to ensure PH work is quickly embedded into the LA core business.	AC	1. Work agreed to establish clear financial baseline for PH to support identification and mitigation of financial risks on both sides. See TOG Agenda 09.08.12. external support procured 2. Commissioning report developed for EBCSC - see TOG Agenda 09.08.12. Report submitted for EBCSC decision 19.09.12				
CP1.2		Issue already raised with Transition Implementation Group (TIG) by Teresa Cope, Director of Contracting, Quality and Delivery at the CCG. Interim DPH and Deputy DPH briefed on the issue. Issue of public health excess treatment costs raised at Excess Treatment Cost workshop led by Trudi Simmons, Department of Health Lead on 9.8.12. Trudi stated that this issue is being taken forward nationally. Discussions taking place with PHE and NHS CB. Awaiting National Guidance, could move to PHE.	RI	Issue added to risk register and being kept under review as national guidance develops.		Rachel Illingworth	Ongoing	31.10.12
CP2		Vision - Ensure a successful move to Loxley House, continue PH forums, DPH role and successful recruitment, HWBB, implement a successful Comms plan, organise final dialogue/workshop before December. Enhance reputation regionally and nationally as there is a perception that transition is behind in Nottingham. Make sure we are present at transition meetings and that returns and paperwork are completed and NCC and NHS colleagues speak positively externally about the transition.	CK / AH	Move to Loxley House delivered. Comms work in place to support embedding of the function. New Interim DPH in post and working with the management team. Development of Business Plan underway				
CP3		Communications & Stakeholder Engagement - Draft Communications Plan in place (see attached).	RS	Plan being delivered through initial comms activity supporting PH relocation. Since PH relocated to Loxley House we have been engaged in a communications programme in liaison with the NCC Comms Team to introduce PH, its role and impending transition to NCC colleagues via multiple communication channels to help pave the way for a smooth transition in April 2013.	Public Health comms plan 28 June.docx			

EXISTING MANAGEMENT ACTIONS				ADDITIONAL MANAGEMENT ACTIONS				ALL
Risk Ref.	Issue Ref.	Description of actions already in place to mitigate the identified risks	Person accountable	Update 18.09.2012	Description of additional actions put in place (mandatory where current risk mitigation effectiveness is "Inadequate")	Person accountable	Date action due to be completed	Review date
WS1		Contracts and Commissioning - Conduct due diligence and develop paper for EBCSC (September 12) to allow for procurement process to take place. Ensure portfolio holder is fully briefed on risks of not continuing service offer.	AC	EBCSC Paper developed see TOG Agenda 09.08.12. Final paper submitted for decision 19.09.12 Brief for external support for due diligence process developed - see TOG Agenda 09.08.12 External support secured against brief				
WS2		HR & Staff Transfer - Consultation process to start 21.01.13. Joint Trade Union meetings have been taking place since October 2012. OD and training plan in place and rolling out.	SW / LR	ACOS Report developed proposing consultation re staff transfer - see TOG Agenda 09.08.12				
WS3		Information Governance/ICT - Project Team to ensure project is on schedule.	JR / AT	Project brief developed covering ICT and info governance requirements				
WS4		Core Offer - Ensure a clear process is in place for negotiation.	AC	Updated MOU developed for discussion between NCC and CCG				
WS5		Health Protection - Existing structures and capacity for Emergency Planning and Health Protection including I + V to be maintained and kept under review in line with need to maintain resilience and response. Preparations for the new structures will be planned for as the Local Office of the NHSCB is established and PHE.	CJ	National guidance published from DH 'Health Protection in Local Government' 31 August 2012; Regional Immunisation & screening model testing workshop being held on 12.10.12 – Lise Llewellyn and Caroline Jordan attending; DH letter 23 August 2012 re. future direction of immunisation and screening services; DH Emergency Preparedness Resilience and Response workshop being held on 8.10.12 - Caroline Jordan attending; DH Gateway letter 17933 2 August 2012 + 25 July 2012 DH Health EPRR response from April 2013 re. roles in health sector, model concept of operations & Local Health Resilience Partnership (LHRP) model membership and terms of reference Regional exercise of new LHRPs on 12.12.12 - Caroline Jordan attending; Regional Health Protection Transition Group meeting on 17.10.12 - Caroline Jordan attending;				
WS6		Healthwatch - Options developed and costed. Efficiencies predicted from ICAS contract to make up some of the shortfall. NCC identify core resources to fund Healthwatch.	AH / CC	P/F Holder briefed and joint approach with County Council agreed to deliver ICAS giving best chance of effectiveness to cover shortfall in ICAS contract. Negotiations with provider undertaken and contract price agreed. Healthwatch tender specification under development based on model developed				
WS7		HWBB - LGA development programme.	DC / AH	HWB Strategy draft structure paper and priority areas agreed at 29.08.12 meeting. 03.09.12 specific priorities identified at HWB development session LGA development programme agreed				

Nottingham City Council Risk Register - Report Summary

Ref.	Risk description	SR criteria						Estimated Threat Level / Seriousness / DoT				DoT	Target Threat Level	Managing Accountability			
		Highest Pri	Corp Mit	Legal	Reputation	H & S	Citizen well-being	Financial	Date threat level & DoT	2011/12				2012/13		Corp. Director (Risk Owner)	Lead Director or Senior Colleague
										Q4	Q1			Q2	Q3		
SR19	Failure to deliver Council Plan priorities (under review)				✓				Date	Jan-12	Jan-12	Jan-12	Jan-12	↔	Sep-11	C. Mills Deputy Chief Exec. & CD-Res	A. Probert Director HR & Transformation
									Threat Level	16 (4X4)	16 (4x4)	16 (4x4)	16 (4x4)		9 (3x3)		
									DoT	Stable	Stable	Stable	Stable				
SR26	Failure to support Nottingham citizens and communities in minimising the negative impact of welfare changes		✓				✓		Date	Mar-12	Jun-12	Oct-12	Jan-13	↔	Apr-14	C. Mills Deputy Chief Exec. & CD-Res	T. Kirkham Strategic Finance Director
									Threat Level	16 (4X4)	16 (4x4)	16 (4x4) R	16 (4x4)		9 (3x3)		
									DoT	Stable	Stable	Deteriorating	Stable				
SR6	Failure to safeguard vulnerable children		✓	✓	✓		✓	✓	Date	Apr-12	Jun-12	Oct-12	Oct-12	↓	Apr-13	I. Curryer CD-Ch & Fam	S. Gautam Director Specialist Services
									Threat Level	15 (3x5)	15 (3x5)	15 (3x5)	15 (3x5)		10 (2x5)		
									DoT	Improving	Improving	Improving	Improving				
SR11	Failure to address medium term financial pressures in a sustainable way		✓		✓			✓	Date	Apr-12	Jun-12	Oct-12	Jan-13	↔	Mar-13	C. Mills Deputy Chief Exec. & CD-Res	T. Kirkham Strategic Finance Director
									Threat Level	12 (3x4) R	12 (3x4)	12 (3x4)	12 (3x4)		6 (3x2)		
									DoT	Stable	Stable	Stable	Stable				
SR12a	Failure to provide the best educational outcome for children and opportunities for young people to access further education and skills training to contribute to the economic wellbeing of the City	✓	✓		✓				Date	Mar-12	Jun-12	Oct-12	Oct-12	↔	Apr-13	I. Curryer CD-Ch & Fam	G. Ellis Director Schools & Learning
									Threat Level	12 (3x4)	12 (3x4)	12 (3x4)	12 (3x4)		8 (2x4)		
									DoT	Stable	Stable	Stable	Stable				
SR14	Failure to deliver culture change (under review)		✓						Date	Jan-12	Jan-12	Jan-12	Jan-12	↔	Apr-11	C. Mills Deputy Chief Exec. & CD-Res	A. Probert Director HR & Transformation
									Threat Level	12 (3x4)	12 (3x4)	12 (3x4)	12 (3x4)		8 (2x4)		
									DoT	Stable	Stable	Stable	Stable				
SR7a/b	Failure to reduce levels of crime and anti-social behaviour (ASB) (risk updated Q2 2012/13)	✓	✓		✓		✓		Date			Oct-11	Jan-13	↓	Mar-13	J. Kelly CD-Comm	E. Orrock Comm Safety Exec. Coordinator
									Threat Level		Updated risk	12 (3x4)	12 (3x4)		8 (2x4)		
									DoT			N/A	Improving				
SR28	Failure to ensure a financially sustainable adult social care system to respond to significant increases in demand for care while protecting our most vulnerable citizens (new risk added Q2 2012/13)				✓			✓	Date			Oct-12	Jan-13	↓	Mar-14	I. Curryer CD-Ch & Fam	H. Jones Dir for Adult Assessment
									Threat Level		New risk	12 (4x3)	12 (4x3)		9 (3x3)		
									DoT			N/A	Improving				
SR29	Failure to establish an effective Public Health function impacting citizen wellbeing and a failure to deliver the authority's statutory responsibilities (new risk added Q2 2012/13)				✓			✓	Date			Oct-12	Jan-13	↓	Apr-13	I. Curryer CD-Ch & Fam	C. Kenny Dir Public Health / A. Hall Dir Health & Welbeing Trans
									Threat Level		New risk	12 (4x3)	12 (4x3)		9 (3x3)		
									DoT			N/A	Improving				

Ref.	Risk description	SR criteria							Estimated Threat Level / Seriousness / DoT					DoT	Target Threat Level	Managing Accountability		
		Highest Pri	Corp Mit	Legal	Reputation	H & S	Citizen well-being	Financial	Date threat level & DoT	2011/12	2012/13					Corp. Director (Risk Owner)	Lead Director or Senior Colleague	
										Q4	Q1	Q2	Q3					
SR8a	Failure to implement and embed effective information management structures, policies, procedures, processes		✓	✓	✓			✓	Date	Mar-12	Jun-12	Oct-12	Jan-13	↔	Jun-14	C. Mills Deputy Chief Exec. & CD-Res	M. Gannon Director IT	
									Threat Level	9 (3x3)	9 (3x3)	9 (3x3)	9 (3x3)		3 (1x3)			
									DoT	Improving	Improving	Stable	Improving					
SR10	Failure to maintain good standards of governance		✓		✓			✓	Date	Jan-12	Jun-12	Oct-12	Jan-13	↔	Mar-13	C. Mills Deputy Chief Exec. & CD-Res	G. O'Connell Director Legal & Democratic Services	
									Threat Level	12 (4x3)	9 (3x3)	9 (3x3)	9 (3x3)		6 (2x3)			
									DoT	Stable	Improving	Stable	Stable					
SR24	Failure to ensure effective systems are in place to manage health and safety risks			✓	✓	✓		✓	Date	Mar-12	Jun-12	Oct-12	Jan-12	↔	Dec-12	C. Mills Deputy Chief Exec. & CD-Res	P. Millward Head of Service Emergency Planning	
									Threat Level	6 (2x3)	6 (2x4)	9 (3x3)	9 (3x3)		6 (2x3)			
									DoT	Stable AT TARGET	Stable AT TARGET	Deteriorating	Stable					
SR3	Failure to mitigate the impact of the economic climate on the Nottingham City and its citizens				✓		✓		Date	Apr-12	Jun-12	Oct-12	Jan-13	↓	Apr-12	D. Bishop CD-Dev	J. Yarham Dir Economic Innovation & Employment	
									Threat Level	12 (4x3)	12 (4x3)	12 (4x3)	9 (3x3)		9 (3x3)			
									DoT	Improving	Stable	Improving	Improving AT TARGET					
SR16a	Failure of partners including the City Council to work effectively together to achieve vision and outcomes in the Nottingham Plan to 2020		✓		✓		✓		Date	Mar-12	Jun-12	Oct-12	Jan-13	↔	2014	I. Curryer Chief Exec.	C. Richmond Acting Dir Policy Partnerships & Comms	
									Threat Level	8 (2x4)	8 (2x4)	8 (2x4)	8 (2x4)		8 (2x4)			
									DoT	Stable AT TARGET	Stable AT TARGET	Stable AT TARGET	Stable AT TARGET					
SR25	Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework within the directorate, the council and with partners (under review)				✓		✓	✓	Date	Jan-12	Jan-12	Jan-12	Jan-12	↔	Apr-12	I. Curryer CD-Ch & Fam	C. Brudenell Director Quality & Commissioning	
									Threat Level	8 (2x4)	8 (2x4)	8 (2x4)	8 (2x4)		6 (2x3)			
									DoT	Stable	Stable	Stable	Stable					
SR5a	Failure to safeguard vulnerable adults		✓	✓	✓		✓	✓	Date	Dec-12	Dec-12	Oct-12	Jan-13	↓	Apr-13	I. Curryer CD-Ch & Fam	H. Jones Dir Comm Inclusion E. Yardley Dir Access & Reablement C. Richmond Acting Dir Policy Partnerships & Comms	
									Threat Level	8 (2x4)	8 (2x4)	8 (2x4)	8 (2x4)		4 (1x4)			
									DoT	Stable AT TARGET	Stable AT TARGET	Stable	Improving					
SR2a	Of the reputation of the City (Risk updated Q2 2012/13)		✓		✓		✓		Date			Oct-12	Jan-13	↔	Oct-12	I. Curryer Chief Exec.	Acting Dir Policy Partnerships & Comms	
									Threat Level			Updated risk	6 (2x3)		6 (2x3)			6 (2x3)
									DoT				N/A		Stable AT TARGET			

DIRECTION OF TRAVEL (DoT):

Improving (reducing) threat level



Stable threat level



Deteriorating (increasing) threat level

