

Report of the Deputy Chief Executive/Corporate Director for Resources

STRATEGIC RISK REGISTER (SRR) – Q4 2010/11 UPDATE

1. **REPORT PURPOSE**

- 1.1 This is the Q4 2010/11 strategic risk management report which focuses on the progress made in reducing threat levels for each strategic risk (SR).
- 1.2 At its 25 February meeting the Audit Committee selected for more detailed scrutiny: *SR22 - Failure to achieve national policy requirement and targets for Putting People First* and *SR25 - Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework*. Risk owners will be at the meeting to provide more information and respond to questions.

2. **RECOMMENDATIONS**

Audit Committee is recommended to:

- 2.1 Consider and critically assess the progress on reducing the seriousness of the Council's strategic risks as reflected by their current threat levels and Direction of Travel (DoT) (Table 1 page 2 and Appendix 1 page 7);
- 2.2 Note the results of the review of the SRR by Corporate Leadership Team (CLT) and in particular consider the newly escalated Strategic Risk *SR8a - Failure to implement and embed effective information management structures, policies, procedures, process and controls*, included as Appendix 2 page 9);
- 2.3 Consider the strategic risks *SR22 - Failure to achieve national policy requirement and targets for Putting People First* and *SR25 - Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework* previously selection by Audit Committee for more detailed review. The corresponding Risk Management Action Plans (RMAPs) are presented in Appendices 3 and 4 (pages 13 and 17).
- 2.4 Select two strategic risks from Appendix 1 (page 7) for specific scrutiny for the SRR Q1 2011/12 Update.

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 its Direction of Travel (DoT). This rounded assessment gives a clearer picture of progress in reducing the risk threat level. Table 1 (below) lists the 21 risks in the SRR and presents for each the most recent change to the DoT and the overall threat level.

4.2 Overall progress continues in reducing the threat levels of the strategic risks we face, with several risks in the SRR assessed by risk owners as improving, stable or at target. However, a number of risks are red rated and showing a deteriorating position reflecting range of delivery pressures and challenges the Council has to respond to.

4.3 For the 21 strategic risks within the SRR:

- Three strategic risks, *SR5a - Safeguarding vulnerable adults*, *SR11 - Financial sustainability* and *SR13 - Decent Homes programme*, show a significant reduction in the threat level. SR5a and SR13 are now at target;
- In total four strategic risks are at target and a further three show an improved DoT;
- However, *SR6 - Failure to safeguard vulnerable children* shows an increase in the threat level from 10 to 15.

4.4 **Table 1** shows the 21 strategic risks ranked in order of threat level and DoT (highest to lowest threat level):

TABLE 1: Risk Threat Level & DoT in rank order (Q4 2010/11)			
SR No.	Strategic Risk Description	Threat Level	DoT (Q3–Q4)
Red rated strategic risks			
19	Failure to deliver Council Plan priorities	16	↔
26	Failure to support Nottingham citizens and communities to cope with welfare reforms resulting in increased economic hardship (entered the SRR Q2 2010/11)	16	↔
6	Failure to safeguard vulnerable children	10 to 15	↑
16a	Failure of partners including the City Council to work effectively together to achieve vision and outcomes in The Nottingham Plan to 2020	12	↑
1	Failure to implement harmonised pay, grade & terms & conditions, fair to all colleagues & Equal Pay legislation compliant	12	↔
3	Failure to mitigate the impact of the economic climate on the Nottingham City and its citizens	12	↔
8a	Failure to implement and embed effective information management structures, policies (re-entered SRR Q4 2010/11)	12	N/A

TABLE 1: Risk Threat Level & DoT in rank order (Q4 2010/11) <i>continued</i>			
SR No.	Strategic Risk Description	Threat Level	DoT (Q3–Q4)
Red rated strategic risks			
10	Failure to maintain good standards of governance	12	↔
12a	Failure to provide the best educational outcome for children & opportunities for young people to access further education & skills training to contribute to the economic wellbeing of the City (re-entered the SRR Q3 2010/11)	12	↔
14	Failure to deliver culture change	12	↔
11	Failure to address medium term financial pressures in a sustainable way	16 to 12	↓
22	Failure to achieve national policy requirements and targets for 'Putting People First'	12	↓
25	Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework within the directorate, the council and with partners (revised risk for Q4) (entered the SRR Q1 2010/11)	12	↓
Amber rated strategic risks			
2	Of the reputation of the City	9	↔
4	Inadequate arrangements in place to respond to civil emergencies and / or catastrophic service delivery	9 At target	↔
24	Failure to ensure effective systems are in place to manage health and safety risks (entered the SRR Q1 2010/11) (revised description for Q4)	9	↔
7	Failure of NCC's contribution to reduce crime and the fear of crime	8 At target	↔
9	Failure of major projects and programmes	8	↔
5a	Failure to safeguard vulnerable adults	12 to 8 At target	↓
13	Failure to secure additional funding for Decent Homes programme	12 to 8 At target	↓
23	Failure to deliver the Local Development Framework Core Strategy (target revised from 6 to 4 for Q4)	6	↔
Green rated strategic risks – There are no green rated risks at Q4.			

Key: ↓ - Reducing threat level; ↔ - Stable threat level; ↑ - Increasing threat level.

Appendix 1 shows the detailed risk threat level assessments between April 2010 and May 2011 (Q4 2010/11), each risk owner's assessment of the dates when target threat levels will be achieved and the ownership of each risk.

4.5 Review of new / emerging and existing SRR risks

SR5a - Failure to safeguard vulnerable adults: The threat level for SR5a has improved since Q3 to its target threat level of 8. This improvement is the result of work undertaken around recruitment, development and retention of the social care workforce and improvements to quality assurance arrangements. Further work is ongoing which should consolidate the new threat level.

SR6 - Failure to safeguard vulnerable children: The threat level for SR6 has increased from 10 to 15 since Q3 reporting. Despite an anticipated reduction in demand arising from early intervention measures, service demand has increased by 30% in terms of initial and core assessments. It is anticipated that a significant budget overspend will be incurred in maintaining the level of service. Financial pressures will be exacerbated by the coalition's welfare reforms which propose funding cuts to voluntary and community groups which have historically supported the Safeguarding service. Review of back-office functions aimed at delivering savings will impact on social worker workloads. This, coupled with the increase in service demand and financial constraints, means that current levels of service delivery are unsustainable.

Existing management actions are considered adequate to reduce the threat level to the target of 10, but by the revised target date of October 2011. This revised target date reflects the point at which savings from improved commissioning strategies should begin to be realised.

xSR8 - Loss or misuse of personal data and or liability for poor records management: The former strategic risk xSR8 was delegated from the Strategic Risk Register in the Q1 SRR Update having been reported as an amber risk and at target threat level for three consecutive quarters. Developments have prompted a reappraisal of the threat:

- Recently, three local authorities, one of which is at a similar level of maturity with regard to information and data security as NCC, have experienced serious data losses;
- External penetration testing has identified specific weaknesses. Whilst the most serious have been/are being addressed, vulnerabilities and risks remain;
- Work undertaken to develop an Information Classification Policy has highlighted Information Governance issues in particular colleagues' understanding and acceptance of their responsibilities in terms of data and information.

The risk of a malicious/inadvertent act adversely affecting the confidentiality, integrity or availability of information, were it to materialise, could have significant financial, legal, reputation and citizen wellbeing implications. A newly scoped risk, broadened to encompass information management was presented to the 21 June CLT meeting. CLT agreed that this newly scoped risk should re-enter the Strategic Risk Register as *SR8a - Failure to implement and embed effective information management structures, policies, procedures, processes and controls* (RMAP included as Appendix 2 page 9).

SR11 - Failure to address medium term financial pressures in a sustainable way:

The previously high threat level for SR11 reflected high levels of uncertainty around the local government financial settlement. The settlement is now known and set for the next two years (2011/12 and 2012/13) providing a level of continuity and the basis to plan for possible longer term changes by government due to be reported in July 2011 with a likely implementation of 2013/14. Work has developed an updated Medium Term Financial Outlook to accommodate service pressures in future years. Consequently the threat level has been assessed down from 16 to 12. This will continue to be assessed throughout the budget process, particularly in the light of national funding and resourcing reviews which are examining medium term funding regimes.

SR13 Failure to secure additional funding for Decent Homes programme: At the time of reporting the Q3 SRR update to CLT (25 January), SR13 – Failure to secure additional funding for Decent Homes programme was rated as the Council's highest risk reflecting an anticipated significant shortfall in funding. The formal settlement by the Homes & Communities Agency (HCA) on 17 February, resulted in a significantly smaller shortfall than feared. The Programme is now extended from two to four years with funding back loaded to the final two years. Funding for the final two years is conditional on meeting HCA criteria to determine the effectiveness of the programme. To reflect these changes, the RMAP has been updated and the threat level reassessed to 8.

SR22 - Failure to achieve national policy requirements & targets for 'Putting People First': At its 17 December meeting Audit Committee asked to review the Strategic Risk SR22 as part of the Q3 SRR Update. The Director for Adult Assessment asked that this be deferred to the Q4 SRR Update so the outcome of work by Internal Audit could inform the assessment of risks. Internal Audit has now issued a draft audit report and the Director for Adult Assessment has reflected the findings of the draft report in the RMAP which is included in the Q4 SRR Update as Appendix 3 page 13.

SR25 – Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework within the directorate, the council and with partners: Since the Q3 SRR Update, SR25 has been updated to provide a more direct link to the embedding of the Commissioning Framework and the delivery of improved outcomes. As part of this, the constituent risks have been reviewed and significantly updated (see Appendix 4 page 17). Governance arrangements have also been updated and the risk and actions to mitigate it will now come under the auspices of the Commissioning Change Board, made-up of senior representatives from the recently formed integrated Quality and Commissioning Directorate.

5. **FUTURE AUDIT COMMITTEE RISK REVIEWS**

- 5.1 The provision to select strategic risks for review allows the 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 1 for more detailed examination in the SRR Q1 2011/12 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 Quarter 4 2010/11 strategic Risk Management Action Plans.

9. PUBLISHED DOCUMENTS REFERED TO IN COMPILING THIS REPORT

9.1 SRR Q3 Update to reported to Audit Committee 25 February 2011.

APPENDICIES

LIST OF APPENDICES		
Appendix	Description	Page No
1	Risk Summary	7
2	RMAP SR8a – Information management	9
3	RMAP SR22 - Failure to achieve national policy requirements and targets for 'Putting People First'	13
4	RMAP SR25 - Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework	17

Sponsoring Corporate Director

Carole Mills-Evans – Deputy Chief Executive and Corporate Director for Resources

Author(s):

Simon Burton – Corporate Risk Specialist

☎ 0115 87(63432) simon.burton@nottinghamcity.gov.uk

Duncan James – Organisational Planning and Performance Manager

☎ 0115 87(63435) duncan.james@nottinghamcity.gov.uk

Nottingham City Council Risk Register - Report Summary

Ref.	Risk	SR criteria							Estimated Threat Level / Seriousness / DoT					Target Threat Level	Managing Accountability		
		Highest Pri	Corp Mit	Legal	Reputation	H & S	Citizen well-being	Financial	Q1 2010/11	Q2 2010/11	Q3 2010/11	Q4 2010/11	DoT		Corp. Director (Risk Owner)	Lead Director or Senior Colleague	
SR19	Failure to deliver Council Plan priorities				✓				Date	Jul-10	Oct-10	Jan-11	May-11	↔	Sep-11	C. Mills-Evans DCEX/CDR	A. Probert Director HR & Transformation
								Threat Level	12 (3x4)	16 (4x4)	16 (4x4)	16 (4x4)			9 (3x3)		
									DoT	Stable	Deteriorating	Stable	Stable				
SR26	Failure to support Nottingham citizens and communities to cope with welfare reforms results in increased economic hardship and long term risks to the economy (new risk added to the SRR Nov 2010)		✓				✓		Date		Oct-10	Jan-11	May-11	↔	2014	J. Todd Chief Exec.	P. Wakefield Director Strategic Partnerships
								Threat Level	New risk		16 (4x4)	16 (4x4)	16 (4x4)				
									DoT		N/A	Stable	Stable				
SR6	Failure to safeguard vulnerable children		✓	✓	✓		✓	✓	Date	Jul-10	Oct-10	Jan-11	Apr-11	↑	Jun-11	I. Curryer CD-Ch & Fam	S. Gautam Director Specialist Services
								Threat Level	15 (3x5)	15 (3x5)	10 (2x5)	15 (3x5)			10 (2x5)		
									DoT	Stable	Stable	Improving AT TARGET	Deteriorating				
SR16a	Failure of partners including the City Council to work effectively together to achieve vision and outcomes in the Nottingham Plan to 2020		✓		✓		✓		Date	Jul-10	Oct-10	Jan-11	Apr-11	↑	2014	J. Todd Chief Exec.	P. Wakefield Director Strategic Partnerships
								Threat Level	9 (3x3)	12 (3x4)	12 (3x4)	12 (3x4)			8 (2x4)		
									DoT	Stable	Deteriorating	Deteriorating	Deteriorating				
SR1	Failure to implement harmonised pay, grade & terms & conditions, that are fair to all colleagues & Equal Pay legislation compliant		✓	✓	✓			✓	Date	Jul-10	Oct-10	Jan-11	May-11	↔	Sep-11	C. Mills-Evans DCEX/CDR	A. Probert Director HR & Transformation
								Threat Level	12 (3x4)	12 (3x4)	12 (3x4)	12 (3x4)			6 (2x3)		
									DoT	Improving	Improving	Stable	Stable				
SR3	Failure to mitigate the impact of the economic climate on the Nottingham City and its citizens				✓		✓		Date	Jul-10	Oct-10	Jan-11	May-11	↔	Apr-11	D. Bishop CD-Dev	J. Yarham Dir Economic Innovation & Employment
								Threat Level	9 (3x3)	12 (4x3)	12 (4x3)	12 (4x3)			9 (3x3)		
									DoT	Stable	Deteriorating	Stable	Stable				
SR8a	Failure to implement and embed effective information management structures, policies, procedures, processes (Previously SR8 re-escalated to SRR June 2011)		✓	✓	✓			✓	Date	Jul-10			Jun-11	↑	Jun-14	C. Mills-Evans DCEX/CDR	M. Gannon Director IT
								Threat Level	9 (3x3)			12 (3x4)			9 (3x3)		
									DoT	Improving		Updated risk	N/A				
SR10	Failure to maintain good standards of governance		✓		✓			✓	Date	Jul-10	Oct-10	Jan-11	Mar-11	↔	Jul-11	C. Mills-Evans DCEX/CDR	T. Kirkham Strat Fin Director
								Threat Level	12 (4x3)	12 (4x3)	12 (4x3)	12 (4x3)			6 (2x3)		
									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			Jan-11	Apr-11	↔	Nov-11	I. Curryer CD-Ch & Fam	G. Ellis Director Schools & Learning
								Threat Level			Updated risk	12 (3x4)	12 (3x4)				
									DoT				Stable				
SR14	Failure to deliver culture change		✓						Date	Jul-10	Oct-10	Jan-11	May-11	↔	Apr-11	C. Mills-Evans DCEX/CDR	A. Probert Director HR & Transformation
								Threat Level	12 (3x4)	12 (3x4)	12 (3x4)	12 (3x4)			8 (2x4)		
									DoT	Stable	Stable	Stable	Stable				
SR11	Failure to address medium term financial pressures in a sustainable way		✓		✓			✓	Date	Jul-10	Oct-10	Jan-11	May-11	↓	Mar-11	C. Mills-Evans DCEX/CDR	T. Kirkham Strategic Finance Director
								Threat Level	16 (4x4)	16 (4x4)	16 (4x4)	12 (3x4)			6 (3x2)		
									DoT	Stable	Deteriorating	Deteriorating	Improving				

Ref.	Risk	SR criteria						Estimated Threat Level / Seriousness / DoT					Target Threat Level	Managing Accountability			
		Highest Pri	Corp Mit	Legal	Reputation	H & S	Citizen well-being	Financial	Q1 2010/11	Q2 2010/11	Q3 2010/11	Q4 2010/11		DoT	Corp. Director (Risk Owner)	Lead Director or Senior Colleague	
SR22	Failure to achieve national policy requirement and targets for Putting People First			✓	✓		✓	✓	Date	Jul-10	Oct-10	Jan-11	Apr-11	↓	Mar-11	J. Kelly CD-Comm	H. Jones Director Comm Inclusion
								Threat Level	9 (3x3)	12 (3x4)	12 (3x4)	12 (3x4)	9 (3x3)				
SR25	Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework within the directorate, the council and with partners (added to SRR Q1 2010/11)				✓		✓	✓	Date	Jul-10	Oct-10	Jan-11	Apr-11	↓	Apr-12	I. Curryer CD-Ch & Fam	C. Brudenell Director Quality & Commissioning
								Threat Level	16 (4x4)	12 (3x4)	12 (3x4)	12 (3x4)	6 (2x3)				
SR2	Of the reputation of the City		✓		✓			✓	Date	Jul-10	Oct-10	Jan-11	Apr-11	↔	Mar-11	J. Todd Chief Exec.	S. Barker Director Comms & Mktng
								Threat Level	8 (2x4)	9 (3x3)	9 (3x3)	9 (3x3)	8 (2x4)				
SR4	Inadequate arrangements in place to respond to civil emergencies and / or catastrophic service delivery failure			✓	✓	✓	✓	✓	Date	Jul-10	Oct-10	Jan-11	May-11	↔	Oct-10	C. Mills-Evans DCEX/CDR	P. Millward Head of Service Emergency Planning
								Threat Level	12 (3x4)	9 (3x3)	9 (3x3)	9 (3x3)	9 (3x3)				
SR24	Failure to ensure effective systems are in place to manage health and safety risks (entered to the register May 2010)			✓	✓	✓		✓	Date	Jul-10	Oct-10	Jan-11	May-11	↔	Feb-12	C. Mills-Evans DCEX/CDR	P. Millward Head of Service Emergency Planning
								Threat Level	12 (3x4)	9 (3x3)	9 (3x3)	9 (3x3)	6 (2x3)				
SR7	Failure of NCC's contribution to reduce crime and the fear of crime	✓	✓		✓		✓		Date	Jul-10	Oct-10	Jan-11	Apr-11	↔	Apr-11	J. Kelly CD-Comm	E. Orrock Comm Safety Exec. Coordinator
								Threat Level	8 (2x4)	8 (2x4)	8 (2x4)	8 (2x4)	8 (2x4)				
SR9	Failure of major programmes and projects	✓	✓		✓			✓	Date	Jul-10	Oct-10	Jan-11	May-11	↔	Jun-10	D. Bishop CD-Dev	J. Mason Director Major Programmes
								Threat Level	12 (3x4)	8 (2x4)	8 (2x4)	8 (2x4)	6 (2x3)				
SR5a	Failure to safeguard vulnerable adults		✓	✓	✓		✓	✓	Date	Jul-10	Oct-10	Jan-11	Apr-11	↓	Apr-11	J. Kelly CD-Comm	H. Jones Dir Comm Inclusion E. Yardley Dir Access & Reablement
								Threat Level	12 (3x4)	12 (3x4)	12 (3x4)	8 (2x4)	8 (2x4)				
SR13	Failure to secure additional funding for Decent Homes programme	✓			✓		✓	✓	Date	Jul-10	Oct-10	Feb-11	May-11	↓	Apr-11	D. Bishop CD-Dev	S. Cheesbrough Head of Housing Strategy
								Threat Level	16 (4x4)	16 (4x4)	12 (3x4)	8 (2x4)	8 (2x4)				
SR23	Failure to deliver the 'Local Development Core Strategy'.								Date	Jul-10	Oct-10	Jan-11	Apr-11	↔	Apr-11	D. Bishop CD-Dev	G. Butterworth Head of Planning, Transport & Intelligence Strategy
								Threat Level	12 (3x4)	6 (2x3)	6 (2x3)	6 (3x2)	4 (2x2)				

DIRECTION OF TRAVEL (DoT):

Reducing threat level



Stable threat level



Increasing threat level



SR8a - Failure to implement and embed effective information management structures, policies, procedures, process and controls to support the council’s immediate and future regulatory, legal risk, environmental and operational requirements.

The former strategic risk xSR8 was scoped around GCSX requirements. The risk was delegated from the strategic Risk Register in the SRR Q1 2010/11 Update having been reported as an amber risk and at target threat level for 3 consecutive quarters. Developments since its delegation prompted a re-scoping and reappraisal of the risk in June 2011 to include the council’s wider information management arrangements.

		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:	Paul Martin	Completed by:	Cliff Dean	Date Completed:	17/06/11	Next Review Date:	July 2011
RISK SUMMARY							
Opening (Dec 08)	Previous (July 10)		Latest (March 11)		Target (June 14)	Overall risk mitigation effectiveness (Adequate, Yet to secure improvement, Inadequate)	
Threat level e.g. 2x4=8	Threat level e.g. 2x4=8 (Lxl)	DoT (↔↓↑)	Threat level e.g. 2x4=8 (Lxl)	DoT (↔↓↑)	Threat level 2x4=8 (Lxl)		
3x4=12	3x3=9	↓	3x4=12	↑	3*3=9	Yet to secure improvement	

CONSTITUENT RISKS TO BE RISK MANAGED							
Risk Ref:	Constituent Risk Description	Opening Threat Level e.g. 2x4=8	Previous Threat Level e.g. 2x4=8	Latest Threat Level e.g. 2x4=8	Direction of Travel (DoT) (Stable ↔ Improving ↓ Deteriorating ↑)	Target Threat Level e.g. 2x4=8	
1	External theft by hacking: Unauthorized Data Access, Intrusion (by scanning techniques) and Hardware failure due to external cause.		2x3=6	2x5=10	↑	2x4=8	
2	Lack of compliance with IT and information security : Acceptable Use Policy and IT Services Information security Policy		3x4=12	4x4=16	↑	2x4=8	
3	Internal theft of sensitive information: ensure laptop computers are encrypted and use of unencrypted USB memory devices is not allowed.		3x4=12	3x4=12	↔	2x4=8	
4	Virus attack corrupts storage		3x3=9	3x3=9	↔	2x3=6	

5	External loss of information by employee		3x2=6	3x4=12	↑	2x4=8
6	Loss Hosting environments significantly impacts on Service Areas being able to carry out business as usual		2x3=6	2x4=8	↑	2x4=8
7	Lack of compliance to Council's corporate disposal policy and practice		3x4=12	3x4=12	↔	2x4=8
8	Poor security arrangements with partners using NCC data and information		3x4=12	4x4=16	↑	2x4=8
9	External theft of data due to poor physical access and site security		3x4=12	2x4=8	↓	2x3=6
10	Poor quality data resulting in significant financial and reputation risk	3x4=12 (16/6/2011)	New	3x4=12	↑	2x3=6
11	Fail to embed records management controls leading to significant adverse reputation or financial impact	4x4=16 (16/6/2011)	New	4x4=16	↑	2x3=6
12	A disaffected employee seeks to carry out significant damage to systems, network or storage.	2x4=8 (16/6/2011)	New	2x4=8	↑	2x4=8
13	Technical failures in network, security or applications significantly impacts Service Areas ability to carry out business as usual.	3x3=9 (16/6/2011)	New	3x3=9	↑	2x4=8

	EXISTING MANAGEMENT ACTIONS			ADDITIONAL MANAGEMENT ACTIONS			ALL
Risk Ref.	Description of actions already in place to mitigate identified risks	Person Accountable	Adequacy of those actions (Adequate, Yet to secure improvement, Inadequate)	Description of additional actions to be put in place (mandatory where current adequacy rating is anything other than "adequate")	Person Accountable	Date action due to be completed	Review date
1	Firewall reviewed and improved configuration applied.	SS	Yet to secure improvement	Appointment process is being followed to appoint to vacant security posts. (contributes to 2, 4, 8, 12)	SS	28.10.11	26.08.11
	Only non sensitive data within DMZ, web application security have been improved.	JP	Yet to secure improvement		JP	28.10.11	26.08.11
	Data protection policies & procedures; network security controls; system security controls	SS	Yet to secure improvement	Information security management system statement of applicability.(contributes to 11)	SS	16.12.11	28.10.11
2	Improved monitoring and detection tools being deployed, Action is now taken in respect of breach. Implementation of information security management system	SS	Yet to secure improvement	Information Security Management System GAP analysis review. Creation of draft information security management system core policies (contributes to 8).	SS	16.12.11	26.08.11
				HR Transformation team to introduce security responsibilities into the induction programme (contributes to 6).	SS	16.12.11	26.08.11

				Communications and Marketing Team to work across the whole Council to increase compliance and understanding with IT and information security (contributes to 6).	SS	16.12.11	26.08.11
3/5	Domain access status reviewed on monthly basis by IT Managers.	JP	Yet to secure improvement	Process has been reviewed and changed to be more reactive regarding domain access status.	JP	26.08.11	30.09.11
4	New processes in place to keep anti-virus software up to date. Managed incidents reviewed on monthly basis by IT Managers.	JP	Yet to secure improvement	Performance improvement plan with clear actions for improvements and ownership is being developed to improve performance (contributes to 13).	JP	26.08.11	29.07.11
6	Ongoing awareness program for the Information security Policy	SS/JP	Yet to secure improvement		SS	16.12.11	26.08.11
	Performance improvement plan with clear actions for improvements and ownership is being developed to improve performance.	JP	Yet to secure improvement		JP	29.07.11	26.08.11
7	A plan has been developed to manage configuration items and ensure the policy is followed.	SS/JP	Yet to secure improvement	Implementation of CMDB within Service Desk software to record movements, changes and disposals.	SS	28.10.11	26.08.11
8	Implementation of information security management system.	SS	Yet to secure improvement	An ICS system is to be developed and introduced into the authority and its use with partners will be progressed.	SS	23.03.12	26.08.11
	Deliver the identified action plan targets arising from external inspections and from O & S engagement.	PM	Yet to secure improvement	Review of the processes for information governance by IDEA. Implement restructure of Information Governance team.	PM PM	30.04.11 30.09.11	30.04.11 30.09.11
9	Access to data storage and desktop assets is restricted via secondary use security.	JP	Adequate				
	Increased CCTV and monitoring	GH	Adequate				
	Employees have been recently reminded of their responsibilities in this area	GH	Adequate				
10	Built-in integrity checks; routine procedures for checking & correcting data; ad hoc re-checks	SS/PM	Yet to secure improvement	Business Intelligence Review paper taken to IT Managers and SRO agreed to progress, report to RLT requesting posts to support the work (contributes to 8, 11).	SS	16.12.11	28.10.11

11	Records management database, back records and controls the transfer	PM	Adequate				
	Konica printer / scanner upgrade successfully completed on 41 units, 6 further units to be completed	PM	Yet to secure improvement	Work is in progress	JP	26.08.11	30.09.11
	Contract in place with 3 rd party and part of this is meeting and exceeding the data compliance requirements, undertaking CRB checks	PM	Adequate				
12	Action is now taken in respect of breach. Implementation of information security management system	SS	Inadequate	A records management post is going through the recruitment process to help in the implementation.	SS	16.12.11	28.10.11
13	A desktop exercise has been carried out and lessons learned will be developed to form an action plan	SS/JP/PM	Inadequate	Performance improvement plan with clear actions for improvements and ownership is being developed to improve performance.	SS	29.07.11	26.08.11

Key to assessment of the effectiveness of management actions:

Adequate	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is already acting to reduce threat levels; <p><i>and</i></p> <ul style="list-style-type: none"> • Is sufficient to achieve the target threat level by the target date.
Yet to secure improvement	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is anticipated to reduce threat levels, but requires further time to take effect; <p><i>and</i></p> <ul style="list-style-type: none"> • Is considered sufficient to achieve the target threat level by the target date.
Inadequate	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is not anticipated to reduce threat levels; <p><i>and/or</i></p> <ul style="list-style-type: none"> • Is not considered sufficient to achieve the target threat level or achieve the target threat level by the target date. <p>An assessment of "Inadequate" requires additional management action and/or a review of the target threat level to tolerate the risk or the target date.</p>

SR22 - Failure to achieve the national policy requirement, milestones and targets for Putting People First.

Putting People First is a national policy requirement for the transformation of adult social care. Its purpose is to improve independence and choice to service users and ensure that this is financially sustainable. The change programme of has significant financial implications for the City Council and partners. Key partners include the PCT, Health Authority and current service providers.

		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:	Ian Curryer, CD Children & Families	Completed by:	H. Jones Dir Adult Assessment	Date Completed:	May 2011	Next Review Date:	July 2011
--------	-------------------------------------	---------------	-------------------------------	-----------------	----------	-------------------	-----------

Risk Summary

Opening (Q2 2009/10)		Previous (Q3 2010/11)		Latest (Q4 2010/11)		Target (Mar 11)		Overall Risk Mitigation Effectiveness (Adequate, Yet to secure improvement, Inadequate)
Threat level e.g. 2x4=8	Threat level e.g. 2x4=8 (Lxl)	DoT (↔↓↑)	Threat level e.g. 2x4=8 (Lxl)	DoT (↔↓↑)	Threat level 2x4=8 (Lxl)			
3x4=12	3x4=12	↑	3x4=12	↓	3x3= 9	Yet to secure improvement		

Constituent risks to be risk managed:

Risk Ref:	Constituent Risk Description	Opening Threat Level e.g. 2x4=8	Previous Threat Level e.g. 2x4=8	Latest Threat Level e.g. 2x4=8	Direction of Travel (DoT) (Stable ↔ Improving ↓ Deteriorating ↑)	Target Threat Level e.g. 2x4=8
Project Outcome Risks						
1	Failure to deliver personal budget targets leading to low level of choice in control and quality of services to citizens.	3x3=9	3x3=9	3x3=9	↔	2x4=8
2	Failure to effectively implement prevention/early intervention strategies which underpin financial sustainability.	4x4=16	4x3=12	3x4=12	↔	2x4=8
Project Quality Risks						

3	Failure to implement structure, operating model and ways of working to support transformation of adult social care.	N/A	3x4=12	3x4 = 12	↔	2x4=8
4	Failure to deliver cost effective integration with health.	3x4=12	3x3=9	3x3=9	↓	2x3=6
5	Failure to deliver new information and advice services to enable citizens to locally find information and advice.	3x4=12	2x3=6	2x3=6	↓	3x2=6
6	Failure to deliver IT system to efficiently and effectively support assessment & care management processes	3x4=12	2x3=6	3x4=12	↑	2x3=6
7	Failure to deliver commissioning strategies leading to lack of appropriate services available to meet predicted demand for services.	3x4=12	3x4=12	3x4=12	↑	2x3=6
8	Failure to build effective partnerships with Citizens and Service Users.	N/A	3x4=12	3x3=9	↓	2x3=6
9	Failure of PPF programme management.	N/A	3x4=12	3x4=12	↔	2x4=8
10	Failure to implement new and more efficient processes for financial assessments and care purchasing.	N/A	4x4 =16	4x4 =16	↔	2x3=6
11	Failure to support suppliers in transitioning to a new way of engaging with the authority and citizens	N/A	3x4 = 12	3x4 = 12	↓	2x3 =6

Risk Ref.	Management actions to mitigate identified risks	Adequacy of action risk (Effective, Yet to secure improvement, May not be enough)	Responsibility for action		Completion date/ review cycle
			Owner	Support	
Existing management actions					
2, 7	Localised co-production of services for adults is available in Bilborough and Beechdale through Support Net.	Yet to secure improvement	HJ		Pilot completed March 2011
2, 4	Pilots with Telehealth and Telecare shared with the Health.	Yet to secure improvement	EY	DM	Pilot ongoing Review Mar 2011
1, 10	Resolve outstanding issues and agree the revised RAS.	Yet to secure improvement	HJ	TV	Completed Nov 2010
1, 10	Implement and monitor the new RAS.	Yet to secure improvement	HJ	TV	Implemented Nov 2010 & ongoing monitoring
7	Develop commissioning requirement, including performance and accreditation criteria (link to citizen engagement) including targets.	Yet to secure improvement	CB	AD	Completed Dec 2010
1, 7	Implement the commissioning plan for development of external brokerage.	Yet to secure improvement	CB	AD	Completed Dec 2010
5	Deliver the new service portal.	Adequate	CY		Completed Oct 2010

Risk Ref.	Management actions to mitigate identified risks	Adequacy of action risk (Effective, Yet to secure improvement, May not be enough)	Responsibility for action		Completion date/ review cycle
			Owner	Support	
Additional management actions					
1	Operating model designed to deal with citizen demand for personal budgets through more efficient ways of working.	Yet to secure improvement	HJ		Restructure complete Sept 2011
1	Establish special reviewing team to ensure 30% met by 31/3/11.	Yet to secure improvement	HJ	LS	Completed and target exceeded!
1, 3, 7	Develop accreditation scheme for Personal Assistants to address capacity & capability risks.	Yet to secure improvement	CB	AD	Provider commissioned April 2011 Scheme to go live July 2011
2, 4	Assess Telehealth and Telecare pilots and scale up to extend availability of assisted technology.	Yet to secure improvement	EY	DM	Complete Mar 2011
3	Consultation with Trade Unions begins 17 May	Yet to secure improvement	HJ		May 2011
3	New structure implemented	Yet to secure improvement	HJ		Sept 2011
4	Develop and implement a joint strategy with regard to a joint venture.	Yet to secure improvement	EY		Joint venture agreement in April 2011
7	Secure invest to save to build social capacity across the city.	Yet to secure improvement	HJ		Invest to save for SMAMO agreed Exec. Board March 2011
2, 7, 8, 11	Prepare and implement Vulnerable Adult Strategy Head of Market Development and Commissioning post recruited	Yet to secure improvement	CB		Intended approval by Councillors by July 2011
8	Establish user led organisation.	Adequate	CB	AD	Completed and ongoing development
9	Identify at January Programme Board what programme resource is required from transformation grant.	Yet to secure improvement	HJ		Completed
9	A close down report prepared for Transformation Board to seek agreement to transfer the risks between Vulnerable Adults Strategy (HJ) or Community Health Partnership Project or Commissioning.	Yet to secure improvement	HJ		Programme closure report to Trans Board June 2011
10	Secure project manager resource.	Yet to secure improvement	TK	TN	Project Manager to be recruited April 2011
10	Establish Director led project board to deliver financial system for SDS	Yet to secure improvement	HJ		Completed
11	Develop mechanisms for capturing citizen feedback on SDS	Yet to secure improvement	HJ	LS	TBA
11	1. Agree policy for future relationship with suppliers,	Yet to secure	CB	AD	Supplier group

	2. Review of all suppliers, 3. Align procurement and contracts with SDS finance processes.	improvement			established ongoing
--	---	-------------	--	--	---------------------

Key to assessment of management actions:	
Adequate	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is already acting to reduce threat levels; <p><i>and</i></p> <ul style="list-style-type: none"> • Is sufficient to achieve the target threat level by the target date.
Yet to secure improvement	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is anticipated to reduce threat levels, but requires further time to take effect; <p><i>and</i></p> <ul style="list-style-type: none"> • Is considered sufficient to achieve the target threat level by the target date.
Inadequate	<p>The identified management action:</p> <ul style="list-style-type: none"> • Is not anticipated to reduce threat levels; <p><i>and/or</i></p> <ul style="list-style-type: none"> • Is not considered sufficient to achieve the target threat level or achieve the target threat level by the target date. <p>An assessment of "Inadequate" requires additional management action and/or a review of the target threat level to tolerate the risk or the target date.</p>

SR25 – Failure to deliver improved outcomes through the implementation and embedding of the Commissioning Framework within the directorate, the council and with partners.

Commissioning is the overall process for deciding how to use the total resources available in order to improve outcomes in the most efficient, equitable and sustainable way. The current risk description was updated in April 2011 from *Failure to develop a strong and well resourced commissioning programme to improve the delivery of services in pursuit of improved outcomes.*

			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:	I. Curryer CD Children & Families	Completed by:	C. Brudenell Dir Quality & Commissioning	Date Completed:	21 April 11	Next Review Date:	30 June 11
Risk Summary							
Opening (Jun 10)	Previous (Jan 11)		Latest (Apr 11)		Target (Apr 12)	Overall risk mitigation effectiveness (Adequate, Yet to secure improvement, Inadequate)	
Threat level	Threat level (LxI)	DoT (⇔↓↑)	Threat level e.g. (LxI)	DoT (⇔↓↑)	Threat level (LxI)		
4x4=16	3x4=12	↓	3x4=12	↓	2x3=6		

CONSTITUENT RISKS TO BE RISK MANAGED							
Risk Ref:	Constituent Risk Description	Opening Threat Level	Previous Threat Level	Latest Threat Level	Direction of Travel (DoT) (Stable ⇔ Improving ↓ Deteriorating ↑)	Target Threat Level	
1	Failure to deliver Commissioning Change Programme	4x4=16	4x4=16	3x4=12	↓	2x3=6	
2	Lack of clarity about decision making/delegated powers and/or delays in making key decisions	4x3=12	4x3=12	3x3=9	↓	2x3=6	
3	Failure to agree and get ownership of strategic commissioning intentions.	4x4=16	4x3=12	3x4=12	⇔	1x4=4	
4	Early Intervention and other key enablers not effectively integrated into Commissioning Framework/ Pathway	3x4=12	3x4=12	3x4=12	↓	1x4=4	

5	Commissioning Framework not embedded across the Council, within schools and/or with partners, in particular Health	3x4=12	3x4=12	3x4=12	↕	2x3=6
6	Strategic commissioning intentions not aligned to, or supported by, effective citizen engagement, market development and/or contracting/procurement activity	3x4=12	2x4=8	2x4 =8	↕	1x4=4
7	Strategic commissioning reviews do not deliver significant improvement in outcomes and/or required level of cost efficiencies	4x5=20	3x5=15	3x5=15	↕	2x4=8

	EXISTING MANAGEMENT ACTIONS			ADDITIONAL MANAGEMENT ACTIONS			ALL
Risk Ref.	Description of actions already in place to mitigate identified risks	Person Accountable	Adequacy of those actions (Adequate, Yet to secure improvement, Inadequate)	Description of additional actions to be put in place (mandatory where current adequacy rating is anything other than "adequate"	Person Accountable	Date action due to be completed	Review date
1	Senior level governance in place to oversee/drive change and delivery (CCB)	CB	Adequate				
	Prioritised and resourced Commissioning Change Programme (CCP) developed.	CB	Yet to secure improvement	Quarterly review by CCB of overall CCP to ensure actions remain relevant and are driving required level of change.	KeB	July 11, Oct 11, Jan 12, Apr 12	After each review
	Senior level programme manager recruited to support CCB and oversee and drive delivery of CCP.	CB	Adequate				
	Robust performance management arrangements in place through CCB to ensure priority actions within CCP are delivered.	KeB	Yet to secure improvement	Quarterly review by CCB of overall CCP to ensure actions remain relevant and are driving required level of change.	KeB	July 11, Oct 11, Jan 12, Apr 12	After each review
2	Agree decision making routes for strategic governance. Review internal commissioning boards & rationalise governance.	CB	Adequate				
	Joint commissioning governance arrangements in place (Shadow Health and Wellbeing Board)	CB	Adequate				
	Priority actions in CCP aligned with Exec Board sub-committee forward plan and informing when/where key decisions are required.	KeB	Adequate	Commissioning sub-committee and Shadow H&W Board forward plan to be reviewed and, where appropriate, updated after each formal plan review.	KeB	July 11, Oct 11, Jan 12, Apr 12	After each review
	Agreed commissioning pathway in		Adequate				

	place which aligns with and informs formal decision making cycle.	CM					
3	Year 1 strategic commissioning intentions identified based on robust analysis of need.	CM	Adequate				
3, 5 and 7	Year 1 intentions subject to extensive consultation, agreed by appropriate governance bodies (including shadow H&W Board) and owned by all key stakeholders.	CM	Yet to secure improvement	Work directly with partners to ensure that strategic commissioning intentions drive activity and action on the ground, and deliver improved outcomes.	CM	Jul 11 onwards	Dec 11
3 and 7	Intentions and agreed Commissioning Pathway communicated proactively to providers.	CM	Yet to secure improvement	Work directly with providers to ensure strategic commissioning intentions drive activity and action and deliver improved outcomes.	CM/KaB	Jul 11 onwards	Dec 11
4	EI integrated and embedded at heart of Commissioning Framework/Pathway.	KaB	Adequate				
4 and 7	Other key enablers (including total place, whole systems approach, co-production) integrated/embedded at heart of Commissioning Framework/Pathway.	CB/KaB/CM/KeB/AD	Yet to secure improvement	Develop range of specific action plans (incorporated into CCP) to embed key enablers into Commissioning Pathway (and apply to year 1 priority commissioning reviews)	KaB/CM/KeB/AD	Jun 11	Dec 11
5 (and 3)	Improved Commissioning Framework approved through Council and Partnership governance processes, including Shadow H&W Board	CM/KaB	Adequate				
5 and 7	Programme of priority commissioning reviews delivered – with outcomes/results/learning communicated widely	CB	Yet to secure improvement	“Mid-year” formal review of progress in delivering improved outcomes from Year 1 reviews.	CM	Oct 11	n/a
5	Year 2 strategic commissioning reviews (covering wider council and partner priorities) agreed and delivered	CM	Adequate				
6	Priorities for different parts of Q&C aligned through Q&C strategic service plan.	CB	Adequate				
	Strategic commissioning intentions aligned to and drive citizen engagement, market development, and contracting/procurement strategies and priorities.	KaB/JP	Adequate				

	Personalisation agenda aligned to delivery of strategic commissioning intentions.	KaB	Adequate				
6 (and 4, 7)	Market development and co-production integrated into Commissioning Framework/Pathway.	KaB	Adequate				
7	Improved Commissioning Pathway implemented and embedded within the council, with partners and with providers.	CM/KaB/JP	Adequate				
	Streamlined and improved contracting and procurement arrangements in place which deliver cost efficiencies.	HoS Q&E/JP	Adequate				
7 (and 3, 5)	Intentions subject to extensive consultation agreed through appropriate governance processes (including schools) and owned by all key stakeholders.	CM	Adequate				
7 and 5	Programme of strategic commissioning reviews successfully delivered following improved Commissioning Pathway.	CB	Yet to secure improvement	"Mid-year" formal review of progress in delivering improved outcomes from Year 1 review	CM	Oct 11	n/a
				Work directly with partners and providers to ensure that strategic commissioning intentions drive activity and action on the ground, and deliver improved outcomes	CM/KB	Jul 11 onwards	Dec 11

Key to assessment of the effectiveness of management actions:

Adequate	The identified management action: <ul style="list-style-type: none"> Is already acting to reduce threat levels; <i>and</i> Is sufficient to achieve the target threat level by the target date.
Yet to secure improvement	The identified management action: <ul style="list-style-type: none"> Is anticipated to reduce threat levels, but requires further time to take effect; <i>and</i> Is considered sufficient to achieve the target threat level by the target date.
Inadequate	The identified management action: <ul style="list-style-type: none"> Is not anticipated to reduce threat levels; <i>and/or</i> Is not considered sufficient to achieve the target threat level or achieve the target threat level by the target date. <p>An assessment of "Inadequate" requires additional management action and/or a review of the target threat level to tolerate the risk or the target date.</p>