

Appendix 3 - Leicester City Council Operational Risk Register

Risk Register Owner: Alison Greenhill, COO

Risks as at: 31/01/2025

RISK REF	RISK THEME / CATEGORY <i>Establish which category the risk falls into using PESTLE definition. See Process tab for more information</i>	LINK TO STRATEGIC RISK <i>Which Strategic Risk does the risk link to? Where relevant, refer to the SRR to establish which strategic risk is impacted by risk identified (Below link provides access to current SRR on SharePoint). Log strategic risk ref no.</i>	RISK <i>What is the problem; what is the cause; what could go wrong? What is it that will prevent you from achieving your objectives?</i>	CONSEQUENCE/EFFECT: <i>What would occur as a result, how much of a problem would it be, to whom and why?</i>	EXISTING ACTIONS/CONTROLS <i>What are you doing to manage this risk now?</i>	RISK SCORE			RESPONSE STRATEGY / ACTION <i>Select from the 4Ts (see Process worksheet for definitions and further guidance): Tolerate, Treat, Transfer, Terminate</i>	FURTHER MANAGEMENT ACTIONS/CONTROLS			TARGET SCORE			COST	RISK OWNER	TARGET DATE
						Impact	Probability	Risk		Impact	Probability	Risk						

STRATEGIC AREA - City Development and Neighbourhoods

1	POLITICAL & LEGAL ECONOMIC	SRR 1.1 SRR 2.1 SRR 2.2 SRR 2.3	<p>Housing - Budget Pressures - Increase in inflationary pressures have led to increasing pressures on the Housing Revenue Account and the Housing General Fund.</p> <p>2023/24 budget has been set with significant savings required and more savings potentially still to be found over the course of the year.</p> <p>The rent increase is capped below inflation for 23/24 and at CPI + 1% for 24/25 and again for 25/26, further limiting options to address this risk.</p> <p>- Homelessness Financial risks amount primarily to increased demand on temporary accommodation forcing use of nightly paid and bed & breakfast in ever increasing numbers, as well as lack of move-on increasing length of stay and further impacting cost. However, additional pressure resulting from the need for an increased staffing base.</p> <p>Heavy reliance on grant funding. Increased burden on the city from the impact of immigration and asylum (See "Refugees").</p>	<p>Budget overspend. Insufficient budget to balance the budget without reducing service offer or capital investment</p> <p>Impact on the resilience of services and their ability to manage and adapt to further change.</p> <p>The erosion of service areas and what we can and can't do.</p> <p>Expectations will need to be managed in the face of potential impacts on services.</p> <p>Negative PR / reputational damage / potential increase in complaints / legal challenges and fines.</p> <p>- LCC Housing stock does not meet decent homes standard</p> <p>- Housing Regulator intervention</p>	<ul style="list-style-type: none"> - Senior Management Team (SMT) monitor and address financial challenges - Year-end forecasting process with Finance team. - Heat metering and billing project (direct consequence of budget pressures on HRA) - Managing and supporting the health and well being of staff as part of having to work within a financially constrained environment with the associated service delivery consequences. - Review of all existing HRA budget to identify potential savings to include in the 24/25 HRA budget - Homelessness financial pressure and controls: <ul style="list-style-type: none"> - B&B elimination plan developed and lodged with DLUCH. - Additional GF budget funding of £10m in 24/25 towards additional TA costs - Homelessness Prevention Grant - £1.07mil initially for 24/25 and increase in the HPG for 25/26 - Homelessness Strategy challenging supply and types of temporary accommodation - Ongoing continuous recruitment exercise in place alongside agreement to recruit over-establishment. Currently successfully up to 27.5 FTE HPOs - Maximising opportunities to bring in further funding - Exploring all avenues with different models of temporary accomm, including in the interim moving to establish more block booking arrangements and contacts re nightly paid accommodation to drive down B&B costs. - Touchdown beds established to absorb some pressure from Singles. - Focus on spending where will make biggest impact - prevention initiatives that prevent entry to TA. - Reviewing our projections (including financial) monthly, and ensuring all projections and tolerances are understood, including contingency measures which need to be implemented. should it be identified that we the authority is failing to maintain legal compliance and support vulnerable households. - HRA Budget for 24/25 approved as a balance budget and 25/26iso proposed as a balanced budget addressing £5m of budget pressures - Full Council approved an additional £45m to buy 225 units of accommodation, lease 125 units and add 25 staff 	4	4	16	Treat	<ul style="list-style-type: none"> - 5 and 30 year capital investment strategy being developed - Identification of savings in HRA to streamline service and deliver efficiencies - FBR savings proposed in Housing GF proposals of savings of over £900k - Bidding to secure additional external funding towards existing costs - Ongoing external bidding for funding - Homelessness financial pressure and controls: <ul style="list-style-type: none"> - Delivery of the £45m 225 TA units / 125 leases and 25 staffing ongoing - Actions as set out in the Homelessness risk above, - Forecasting of the Homelessness budget pressures in tandem with projected New Housing delivery to identify next steps, - Longer term planning for Housing delivery beyond 2027 to ID a pipeline of delivery to continue to tackle this pressure 	4	3	12				Chris Burgin	Ongoing review 31/05/25
2	POLITICAL & LEGAL ECONOMIC SOCIO-CULTURAL	SRR 1.1 SRR 2.1 SRR 2.2 SRR 3.1 SRR 3.2	<p>Homelessness - summary</p> <p>Ongoing pressure and risks associated to statutory homeless responsibilities, exaggerated by cost of living crisis, housing crisis, asylum pressures, budget pressures, state of PRS, low LCC stock and high waiting times.</p> <p>Compounded by a relatively inexperienced team members and staff retention. Further impact following the decision to release offenders earlier causing further pressures on homelessness services. Managing partner and stakeholder expectations. Uncertainty around external uncontrollable factors that impact on level of demand and financial pressure.</p> <p>Risks:</p> <ul style="list-style-type: none"> - Reputational Suitability of Accommodation Orders are being contravened - leaving us open to legal challenge. - Duty of Care - safeguarding and provision of critical services. Not being able to meet the needs of increasingly, chaotic, vulnerable and complex housing needs of customers due to the risks presented i.e. arson. - Reputational, Governance & People Understaffing issues and staff caseloads are excessive, creating a risk of error, maladministration, or unlawful practice - leaving us open to legal challenge. Additional risk of harm or death to those in Council's care. - Impact on Strategic Objectives & Reputational - Risk that performance shown on National Statutory Statistic Returns will worsen in excess of benchmarked changes elsewhere. - Funding - No indication of spending review under new Govt. in relation to additional funding to support homelessness pressures and rough sleeping. - Legislative changes - the introduction of the Renter Reform Act particularly and the impact on the PRS 	<p>Coverage in Local press, or National press. Reputational damage with partners, leading to political lobbying.</p> <p>Inability to meet demand for preventative homelessness services impacting on crisis management, lowered prevention outcome, subsequently leading to increased costs of temporary accommodation and additional pressures in move-on demand for a large cohort of those accommodated.</p> <p>Failure to deliver statutory homelessness services under Part 7 of the Housing Act 1996. Risk of harm to clientele, in worst case - death or injury of customer. Reputational damage due to risk of legal challenges including financial burden due to associated costs.</p> <p>Current burdens causing pressures on staff leading to retention issues, further compounding available resources and pressures.</p> <p>'Significant increase in numbers in temporary accommodation compounding Financial Risk (see below). The lack of suitable accommodation for applicants with high risks and complex needs.</p> <p>Lack of move-on impacting on other local authority strategic objectives e.g. Leaving Care Protocol. St Mungoes who provide EET have decided to withdraw services from Leicester from the beginning of the financial year 25/26 (gap in services)</p>	<ul style="list-style-type: none"> - Staff training - Interim mandate set around priorities within priorities - safeguarding, compliance, protecting people, protecting the authority - Service recovery plan in place with long term objectives to build resilience and manage the increase in pressures as much as possible. - Continuous recruitment and finding ways to retain staff and increasing FTE within Housing Options & Transitions Workers - Monitoring and audit processes - Intensive Caseload Reviews and case management meetings for officers with their manager - Interim Escalation routes set up for senior management sight on legal matters, risks and issues. - Working in tandem with other stakeholders and parties on the Homelessness Charter is delivering and focussing services - Working in conjunction with partners and hosting events like the families in TA summit to support families by identifying new approaches and initiatives - Funding and engaging with partners like (Help the Homeless) HTH to host events in support of families in TA to secure PRS solutions and other types of support - Ensuring pressures are communicated internally and externally, as far as appropriate, and inviting feedback. - Risk of Rough Sleeping assessment tool has now been launched as of Dec 2024 to help reduce the number of rough sleepers and those at high risk in becoming entrenched rough sleepers causing risk to life - Homelessness Strategy developed with consultation and published. Year 1 actions to be delivered. Different accommodation options for move on through homeless pathways being reviewed. - Focus on improved prevention of homelessness to limit ingress to TA, including more face to face contact from the Dawn Centre and further plans to increase face to face contact from community centres / HUBS. Face to face advice is also available from JCP from February 2025 - PRS Strategy developed to enable more housing options and help to prevent and sustain current PRS households. This continues to be working progress. - Call before you serve' for private landlords has commenced alongside enhanced PRS Prevention activity with PRS Tenants, leading to better outcomes for this cohort. To be extended and promoted - Maximising use of LCC Council stock for this cohort & utilising all new acquisitions and new build for this cohort - Work to develop and improve various pathways - e.g. Prison Release - Exploring improved access to move-on - An extended Private Rented Sector (PRS) landlords offer to attract more PRS accommodation for those facing Homelessness is now in effective operation - PRS Schemes reviewed upper operating limit increased to LHA+35%. LHA increased in April 2024, scheme to be reviewed alongside. The LHA has been increased and matched to remain at 35% above current LHA rate. - Maximising use of HomeCome stock and PRS solutions for this cohort - Benchmarking - National data sets indicate pressures are not just within Leicester. - Pressures and trends to be taken into consideration in review and implementation of new Homelessness & Rough Sleeping Strategy, and to be taken into consideration alongside adopting or taking on new pressures or projects. - Working with voluntary sector to share burdens where possible. - Regular updates to all stakeholders. - Carrying out review of housing allocations policy to ensure best use of stock. - Data and Compliance role introduced. - Full Council approved an additional £45m to buy 225 units of accommodation, lease 125 units and add 25 staff. Further business case to be developed to secure more funding for housing solutions. - Utilisation of new large acquisitions (ZIP/Citygate towards move on accommodation for those in TA) - Working alongside Advisors from MHCLG to discuss best practice, promote B&B elimination ideas and access additional funding streams where available 	4	4	16	Treat	<ul style="list-style-type: none"> - Roll out of homelessness strategy actions (preventative) to enhance and expand on existing control; (ongoing) - Delivery of a new Board with partners to oversee these actions (September 24) - Enhanced communications strategy; - From year 25/26 funding Open Hands to support non-statutory cases with PRS solutions - Build new Social Housing & acquire houses to use as Social Housing (ongoing) - Review of the existing PRS strategy (Sept 24 to Dec 24 extended into 2025). - Reviewing and improving the management of customer expectations and the documentation and PHPs provided. - Continue to bid for available external funding - Delivery of the approved business case to deliver new housing outside of the HRA for the Council - Business case to buy 225 units of TA in GF and 125 leased properties for this cohort (ongoing to March 2025) - Development of a second business case to deliver additional acquired affordable housing above what is currently being delivered to meet this need. (January 25 to March 25) - Work with Changing Futures to integrate & maximise their service offer for Homelessness clients - Ongoing review delivery of B&B Elimination Plan. - Creation of a Temporary Accommodation Policy that considers the balance of suitability of offer with financial cost, with a specific focus on out of area placements, and time-limited stays. - Organisational review - Following the service recovery plan, recommendations for reviewing structures and service delivery to continue to meet statutory responsibilities, and to operate more effectively in prevention & relief outcomes. - Make better use of powers in the LAs favour such as 'Non-Cooperation' for ceasing duty where reasonable to ensure we can enforce reasonable expectations on applicants, with regard to their responsibilities to work with us to resolve their housing situation pragmatically. - Continue to roll out improvement to the PRS Schemes and ensure Officers are able to communicate this effectively to reduce expectations and pressures on social housing. - Continue to develop closer working relationship with voluntary sector to be developed via joint working with the Charter and through the launch of the new Homelessness Strategy. - Explore improvements to data sets and the ability of data to aid in service planning. - Progress is reviewed monthly by Director of Housing and Strategic Director City Development & Neighbourhood Services. - Deliver PRS Growth report actions - Review of Severe Weather Emergency Protocol Provision (SWEP) and develop a sit up service to reduce financial burden of significant use of B&B during cold weather (sub-zero temperatures) - Household Support Fund extended until March 2025 March 2026 supporting the prevention activities. - Contract to deliver MDC (Prevention Hub) by March 2025. Risk of Rough Sleeping assessment tool to be developed and piloted in Leicester 	3	4	12				Chris Burgin	Ongoing, Individual dates shown for each item

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3	ENVIRONMENTAL ECONOMIC	SRR 2.3 SRR 5.1	Neighbourhood and Environmental Services Ash Dieback - Epidemic of Ash Trees Caused by an introduced pathogen that most local ash trees are unlikely to have resistance to. It is anticipated that up to 95% of the tens of thousands of ash trees in the city will die. Perhaps 50% of the total will be the council's direct liability. Many trees are located on traffic routes or in areas of use and habitation. Dying and collapsing trees will present an injury and property damage risk, and present a hazard risk to staff during removal operations. Under normal conditions £135k per year is devoted to clearing similar problems across all species. It is anticipated this cost will multiply several times at the height of the epidemic.	- Injury to staff and residents, including highway users - Damage to property including animal injury, buildings, parked and moving vehicles, various infrastructure and parks and street furniture - Disruption to traffic routes and areas of high use during removal operations	- Established teams, structures and systems will address problems in the early stages. These can be built on further as the problem starts to strain existing resources. There is no way to limit or control the establishment and spread of the pathogen as it is a windborne micro-organism. In essence management is a reactive process. - A capital bid of £130k for an elevated platform to allow working at height was approved in the 2023/24 programme and introduced in 2024. - Launch of the Ash Die Back Action Plan and on-line educational page on LCC website now live to make residents/ public aware of Ash Dieback. - 26 trees felled in 2021/22, - 276 felled in 2022/23, - 172 felled in 2023/24, - 380 felled in 2024/25 (YTD)	4	4	16	Treat	Effective and timely reactive responses, utilising existing revenue budget and prioritising the T&W work programme. Continue to monitor spread of disease and record on a central register, removal of trees which reach category 3/4.	4	4	16	N/A	Sean Atterbury	Ongoing review 31/05/25		
4	SOCIO-CULTURAL POLITICAL ECONOMIC	SRR 3.5 SRR 1.2 SRR 2.3	Neighbourhood and Environmental Services - Decreasing availability of burial space Burial space is limited in supply and may run out if further provision is not provided before existing capacity is reached. rates of death and grave sales have increased above average due to Coronavirus and continued death rate.	- Significant distress to families requiring a burial if no new burial plots are available. Some faith communities do not permit cremation as an alternative. - Damage to LCC reputation and significant negative press and community tensions arising from failure to meet needs. Reduction in service provision. - Financial losses from lack of new burial space reducing cemetery income (estimated £1m plus per annum).	- Burial Space Strategy 2014 identified the need for a new cemetery. consultation with planners regarding Local Plan provision in the city and outside the city undertaken. - EBS Capital Projects team commissioned to deliver a new cemetery by 2026/27. One site identified for feasibility to date, potential for others being investigated by EBS. £150k budget for feasibility studies agreed. - Mitigation action to reduce demand for graves without a burial proposed.	4	4	16	Treat	- Identify alternative site/s for new burial space. - Secure capital funding (c£4m -£8m) and planning permission for new cemetery construction. - Public consultation on future needs. Update - possibility to gain additional burial space by expanding the city boundary	4	3	12	£150k + £3.8-£8.6m	Sean Atterbury	Planning permission, 2026		
5	ECONOMIC	SRR 2.3	Neighbourhood and Environmental Services - Age and Condition of Specific Leisure Centres Impact and Implications Council is unable to meet the maintenance requirements and needs of centres which as an adverse impact on service delivery and meeting customer expectations and achieving ambitious future income growth targets and FBR savings.	LCC unable to fund repairs as buildings fail which creates service disruption and detrimental impact on customers and income.	- Client account plan in place, close working with EBS, comprehensive leisure centre review undertaken and due to present initial findings and options before Christmas 2023. - Corporate Capital bid process for 25/26 working with EBS/Quarterly meetings in place with EBS on facility management and maintenance. - External Sport England capital funding received from Sport England £180k to improve energy efficiency at ELC	4	4	16	Treat	- Complete and report strategic review. - Submit Sport England Bid. - Prepare for potential capital works if capital bid approved.	4	3	12		Sean Atterbury	Ongoing review, 31/05/2025		
6	ECONOMIC	SRR 2.3	Neighbourhood and Environmental Services - Budget Reductions Reduction in service areas funding from grants, statutory partners and City Council and reduction in traditional income streams - insufficient funding for services to operate effectively. Risk that loss of income generating activity will add further pressure to service budgets. Process of budget reduction and timelines creating a pressure to deliver on the saving plan	- Reduction of service level and performance - Viability of service to continue to operate	- Close management of current service spending - Continuous reductions - Depot Board - Leisure Centre Needs Assessment and future strategy - Libraries and Community Needs Assessment (LCNA) - Waste strategy board	4	4	16	Treat	- Introducing new ways of working to encourage entrepreneurial opportunities - External funding opportunities further explored for example HLF, DEFRA, Forestry Commission, Home Office - LLR Partnership working - Corporate tracking to identify impact on other services	3	3	9		Sean Atterbury	Ongoing review 31/05/25		
7	ECONOMIC	SRR 2.2	Planning, Development and Transport - Failure or delayed delivery of development outcomes, including infrastructure - Ashton Green; new homes, employment land, community social infrastructure, open space, new jobs & skills training etc.	- Delayed or reduced capital receipt for the Council, delayed housing delivery no's inc. affordable, impact on jobs & training. - Impact on Local Plan housing no's. Homes England Clawback of HIF Funding	- Revised Project governance structure, programme board now includes all LP strategic sites, a project specific risk log, development manager lead, project director oversight, regular City Mayor reporting. - External high level review undertake, this has identified priorities and resource requirements. - Recent focus on potential to assist delivery of affordable homes to meet the CM Manifesto commitments. - Change in key personnel within Dev team has resulted in net loss of staff on AG delivery (and wider team). Recruitment has failed twice for senior post replacements and to growth post identified in the delivery review. Interim measures being put in place with consultant support 2 days a week but not a sustainable model for long term delivery, significant officer time spent clienting these resources due to scale of project. - Mid level resource lost, recruitment failed once, advert back out. - Bidding for capacity funding from HE however note resources at this level with experience are in demand across the discipline nationally. - Availability rather than funding is the limiting factor. - Change in delivery strategy to generate unconditional land receipts from Parcel D&E and all employment land at Ashton Green.	4	4	16	Tolerate / Treat	- Need to ensure cross divisional resources & support are available and well utilised. - Need to ensure coordination of highway, drainage and planning responses. - Need to ensure that adequate external consultancy support is available to deliver the project work streams. - Ongoing review of planning conditions requirements, submission of section 73 applications to unlock development parcels - Secured external funding to accelerate delivery of infrastructure. - New Asset Disposals Board set up to review and monitor progress towards target figure.	3	4	12		Andrew L Smith	Ongoing review 31/05/25		
8	ECONOMIC	SRR 2.1	Planning, Development and Transport - Difficulty in securing suitable contractors.	- Delay to projects and programmes; cost increases; funding slippage; potentially politically sensitive on high profile projects	Reviewing options for securing contractors including through frameworks	4	4	16	Tolerate / Treat - consider additional measures / actions	Alternative procurement options are being considered	3	4	12		Andrew L Smith	Ongoing review 31/05/25		
9	ECONOMIC	SRR 2.2	Planning, Development and Transport - Recruitment and Retention of staff to deliver key projects, programmes and strategies. Lack of qualified experienced staff in market. Pay levels not commensurate with other councils. Various external factors impacting e.g. Reed are not a built environment / transport specialist agency so interim staff difficult to source via this single supplier contract, external job market etc. Pressures within HR contribute further service delivery issues.	- Failure to deliver key project/programme - Financial implications. - Poor service level. - Additional pressures on overtime and agency use, increased complaints, reputation issues, stress levels and sickness.	- Service specific progress monitoring meetings with Director. - Prioritising recruitment and replacement of staff as soon as they leave. - Extend Graduate programme. - Comprehensive Planning Workforce Action Plan / Organisational Review consultation now concluded to address the recruitment and retention issues in the service- significant funding required. External consultants appointed where possible. - Organisational review of Transport Team being developed - Succession planning for Transport & Highways in development	4	4	16	Treat	- Escalation of risk reporting to higher management and political level. - Consultant and legal advice to minimise risk. Explore new options around capacity support other than via Reed - Expedite HR, Procurement, Legal and Financial processes.	3	4	12		Andrew L Smith	Ongoing review 31/05/25		
10	POLITICAL & LEGAL SOCIO-CULTURAL	SRR 1.2 SRR 3.5	Planning, Transport and Development - Duty to Protect - Failure to ensure counter terrorism measures are incorporated into the built environment where required in order to meet our new statutory duties under the Duty to Protect legislation, e.g. new public realm schemes incorporating hostile vehicle mitigation measures.	- Council could be deemed at fault if a terrorist incident occurred that could have been prevented by appropriate CT measures/features in the built environment and day to day highway network management activities.	- Maintain regular catch up meetings with CT Police Team. - Establish single point of contact for schemes with CT implications within the public realm. - Project records to include reference to compliance / agreement of alternatives / non agreement and associated rationale with CT police requirements. - Training sessions being delivered - Need to ensure requirement for CT measures is considered and record all decisions. - City Centre PPZ Security measures being delivered in liaison with CT Police Team.	5	3	15	Treat	- Consider inclusion of reference to CT measures in the revised Street Design Guide	5	2	10		Andrew L Smith	Ongoing review 31/05/25		

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STRATEGIC AREA - Corporate Resources & Support

11	TECHNOLOGICAL	SRR 4.1 SRR 4.3	<p>Corporate Services - Loss of Key Divisional IT Systems / Data Compromised</p> <p>Failure of a critical IT system or cyber attack affecting the division, systems such as HR system, Xpress, Agresso systems - staff may be unable to deliver their roles, duties etc. If this was to exceed to more than 2 days, this would significantly impact on service delivery and financial targets.</p> <p>The data held within the current systems is not available, robust or accurate to allow adequate management reporting.</p>	<ul style="list-style-type: none"> - Adverse effect on budget/finances. - Reputational damage. - Services cannot be delivered. - Current systems may not be able to support the required level of management information regarding performance, staff, electorate, media relationships etc. - Management decisions/process decisions/system improvements cannot be met. 	<ul style="list-style-type: none"> - IT DRP is in place. Back-ups taken across systems in the division. - Business Continuity plans are in place and regularly reviewed to identify ways to continue service delivery should systems be unavailable. - Desktop exercises to test plans in relation to ICT loss have been undertaken for the division to ensure plans are robust and plans revised as appropriate in light of the learning from these - Ongoing awareness raising with staff about cyber security risks and lessons learned activity undertaken post cyber-incident.. - Continue to operate desk top training exercises. - Completed assessment of critical systems using the Cyber Assessment Framework (CAF) as part of the Future Councils engagement. 	4	5	20	Treat	<ul style="list-style-type: none"> - Implementing Active-Active Data Centres which will improve resilience for critical systems. - Work with other LGAs and 3rd parties to improve staff awareness of Cyber Security responsibilities and to share best practice in respect of cyber preparedness. - Implement mandatory Cyber Security training with OD. - Develop a revised Digital Operating Model taking account of NSCS '10 steps to Cyber Security' framework and which will include measures to improve our organisational footing and resilience. - Reflect increased risk of Cyber Attack in Corporate Risk Register. - Post cyber incident debrief and lessons learned event –learning points to be discussed and so specific divisional learning can be identified. 	4	4	16		Andrew Shilliam	Ongoing 31/05/2025 Proposals - End December 2024 End December 2024. First draft - October 2024
12	ECONOMIC	SRR 2.2	<p>Corporate Services - Shortages in terms of staff capacity/key skills</p> <p>Skill shortages - Difficulties recruiting to specific posts and high demand for specific expertise such as business analysis and business change, and specific technical skills such as ICT development posts in a competitive marketplace for such skills.</p> <p>Key person dependency - Continuing reductions in staff may lead to increasing reliance on fewer people, some of whom may not have critical knowledge/skills, creating additional pressures at times e.g. unplanned absence; inability to transfer knowledge and skills before key staff leave. Ageing workforce also carries risk of loss of critical knowledge, experience and expertise.</p> <p>Increase in demand arising from level of organisational change and need to deliver efficiencies/savings.</p> <p>There maybe an increased demand for support of which available expertise is limited or competing requirements/expectations. Therefore, support services such as HR and Comms may not be able to meet expectations or deliver to the right level of quality</p>	<ul style="list-style-type: none"> - Increase in key person dependency and increased dependency on line managers to deliver a number of technical capabilities. - Lean staffing structures put pressure on staff. - Existing staff health and wellbeing may deteriorate, including morale. - Service demand cannot be met and members demand/expectations cannot be met. - Tasks are not completed/delivered and/or critical projects may be halted. - Statutory/regulatory requirements may not be adhered to and deadlines breached. - Reputational damage. - Adverse effect on finances. - Specialist expertise and knowledge is not available to deliver the required duties. - Corporate memory diminishes when staff leave the Council. - Highly skilled technical roles cannot easily be filled - Perception of blame culture leads to senior and/or skilled staff leaving - Inadequate/inappropriate decisions are made by management, resulting on increased involvement by HR and/or other services in a reactive capacity. - Changes may not be made quickly and effectively and/or changes may be made prior to all parties consent. - Poor and risky management practices. 	<ul style="list-style-type: none"> - Continued use of graduate and other entry level roles to bring in additional capacity and support 'grow our own' as well as maximising use of apprenticeship funding. 	4	5	20	Treat	<ul style="list-style-type: none"> - Engage with OD to utilise corporate workforce planning framework to develop a divisional action plan to address the key risks in terms of critical posts and succession planning. - This has to include developing better visibility required over (1) POSTS, and (2) PEOPLE that we consider to be of a highly specialist skillset and that are considered to be both more difficult to recruit to (reasons required) and where the current postholders are flight risks. - It also has to include consideration of the workforce profile and where we have specific issues around age, knowledge retention etc. - Use of DMU internships and other placement opportunities to add short-term capacity and to link with grow our own approach. 	3	5	15		Andrew Shilliam	Ongoing review 31/05/2025 and prioritisation of critical roles/areas. End Dec 2024 review
13	TECHNOLOGICAL	SRR 4.1	<p>Corporate Services - Cyber Security</p> <p>Increasing profile and expertise of threat actors such that they are able to circumvent established defences and which therefore increases the vulnerability of LCC systems and data.</p>	<ul style="list-style-type: none"> - Data hacked and released into public domain; - Reputational damage - seek alternative more expensive solutions; - Fines from ICO; - Staff stress increases; - Damage to identified individuals; - Denial of service / major service disruption 	<ul style="list-style-type: none"> - Enhanced technology defences; - Awareness campaign; - Targeted follow up's; - Built into new system standards from 3rd party applications (secure passwords, TLS); - Daily back-up of systems - Maintain clear Major Incident Management processes - Understand RPO and RTO capability for recovering critical systems - Appointed Security Operations Centre Lead to review and respond to threat intelligence - Undertaking Cyber Security Gap Analysis in light of increased flexible and mobile working - Implemented solutions to respond to the new threat from Ransomware which could attack / compromise backup data - Implemented new End Point security - Implemented 3rd party Security Operations Centre service providing 24x7 cyber security monitoring. - Completed NCSC Cyber Assessment Framework (CAF) as part of DLUHC Future Councils and develop a remediation plan. - Amended SOC Playbook so they may unilaterally shutdown systems if a potential cyber security incident is identified. 	4	5	20	Treat	<ul style="list-style-type: none"> - Assess and implement new Technology solutions as appropriate to address any changing/new threats - Continued Staff awareness training etc.. - Review where we currently are against the NCSC Cyber Assessment Framework (CAF) as part of DLUHC Future Councils and develop a remediation plan. - Ensure Cyber Security evaluation of partners is undertaken during procurements as part of DDaT playbook. - Work with other LGAs and 3rd parties to improve staff awareness of Cyber Security responsibilities. - Undertake Cyber Essentials assessment. - Implement mandatory Cyber Security training with OD. - Review technical skills of DDaT Security Team 	3	4	12		Andrew Shilliam	Ongoing 31/05/2025
14	ECONOMIC	SRR 2.3	<p>Corporate Services - Loss of Income Opportunities</p> <p>Commercial arrangements such as trading with schools are lost due to heightened market competition, rising costs and therefore increased prices, and due to a lack of staff resources and expertise to undertake marketing and business development.</p> <p>The withdrawal of specific LCC traded services could create angst amongst 'customer base' and reduce appeal of other services.</p> <p>Our reduced shopping basket of services provided to schools puts the remaining services at greater risk when it comes to other providers who may be able to provide multiple services.</p>	<ul style="list-style-type: none"> - Reduced income opportunities against increasing budget pressures. - Loss of available budget reallocations from the centre e.g. HRA. - Reputational damage. - Adverse effect on finances. - Loss of morale. - Requirement to reduce headcount if service discontinues or reduces and potential associated costs of redundancy etc. - Income levels and budgets are significantly impacted. - Reputational damage caused by ceasing the City Catering service to schools and requiring them to make an additional financial contribution this year. - Possible impact on the schools / Council relationship. 	<ul style="list-style-type: none"> - Communications and Marketing progressing work on income opportunities from advertising using council assets such as lamppost banners. 	4	4	16	Treat	<ul style="list-style-type: none"> - Competitive analysis required of our HR traded services around model, price point, feedback/satisfaction, opportunities for further trade etc. - Explore joint trading/account management arrangements - ensure that relevant functions continue to focus sufficiently on income opportunities and business development. - Assess the sensitivity of remaining traded services to schools because of the cessation of City Catering, and consider whether some account management activities need to be enhanced. - Link in with Sophie Maltby re the likely decision around ceasing the City Catering provision in schools and to make sure that schools feel that they are supported from a financial wellbeing point of view because of the challenges created by the additional one off charge. - Refocus our traded services into a key package/offer of 'support' that includes both services that we have to charge for and other services that they receive (at our cost) that are provided by LCC. 	4	3	12		Andrew Shilliam	Ongoing 31/05/2025

Appendix 3 - Leicester City Council Operational Risk Register

Risk Register Owner: Alison Greenhill, COO

Risks as at: 31/01/2025

RISK REF	RISK THEME / CATEGORY	LINK TO STRATEGIC RISK	RISK	CONSEQUENCE/EFFECT:	EXISTING ACTIONS/CONTROLS	RISK SCORE			RESPONSE STRATEGY / ACTION	TARGET SCORE			COST	RISK OWNER	TARGET DATE	
						Impact	Probability	Risk		Impact	Probability	Risk				
		https://leicestercitycouncil.sharepoint.com/sites/sec025/SitePages/Risk-management.aspx														
15	ECONOMIC	SRR 2.3	<p>Corporate Services - Ongoing Budget Pressures and Savings Impacting on Service Delivery</p> <p>Division unable to meet future level of savings required and/or the level of future savings required leads to unsustainable services/loss of services and support to the organisation impacting on the ability of the Council to operate effectively, lawfully and deliver particularly on its statutory obligations.</p> <p>Financial position of the Council and local government more generally will add increased pressure on the need to make substantial savings and therefore consequent impacts of this along with the impacts of the wider cost of living crisis and a weak national economy</p>	<p>Unable to generate additional income, e.g. via trading with schools to help sustain budgets. Potential for a significant budget income gap.</p> <p>- Savings are not delivered, division overspends and puts pressure on corporate budgets</p> <p>- Statutory requirements are not met resulting in risks to service users and legal/reputational issues</p> <p>- Impact on the quality and levels of services being provided.</p> <p>- Impact on staff health and wellbeing.</p> <p>- Vacant posts are not appointed, increasing pressure on the existing workforce</p>	<p>Divisional outturn was an underspend for 2023/24 for majority of the division with the exception of City Catering.</p>	4	4	16	Treat	<p>HR organisational review by calendar year end required so to realise first round of savings and to create a clearer and fit for purpose structure in HR, to remove numerous honoraria that are currently in place, and so we're ready to support the wider organisation as part of the likely need to restructure.</p> <p>1:1 discussions around specific cost centres required, and opportunities to drive further reductions in mainly non-staffing expenditure as well as opportunities to increase income.</p> <p>Competitive analysis of HR traded services model and delivery. Clarity around model of delivery.</p> <p>Implement 'Corporate Services Financial Sustainability Board' so there are more controls around what we're doing to deliver savings.</p>	3	3	9		Andrew Shilliam	Ongoing 31/05/2025
16	ECONOMIC	SRR 2.3	<p>Corporate Services - Technology Costs:</p> <p>Potential shortfall of IT OpEx Revenue fundings to cover increasing costs of IT licencing, support and services in light of WoW, a migration to consumption-based licencing and cloud platforms</p>	<p>- A need to review service provision and potentially reduce the functionality and scope of services e.g. laptops versus desktops, reduced cyber security capabilities.</p>	<p>- Reprofitting services funded from reserves into Revenues to provide forecasts.</p> <p>- Seeking approval for use of WOW capital provision to support replacement of desktops.</p> <p>- Working with Finance to profile Reserves against anticipated spend</p> <p>- Phase 4 device replacement analysis complete</p> <p>- Consideration of funding options as part of medium-longer term budget planning</p> <p>- Reviewed options to rationalise MS licence estate</p> <p>- Implement role-based profiling for devices</p> <p>- Implemented zero-usage mobile phone policy</p> <p>- Created Capital Bid forecasting plan</p>	5	3	15	Treat	<p>- Rationalise application estate on MS Dynamics 365</p> <p>- Consider a shared costing model to recharge services for new platform-based services</p>	4	3	12		Andrew Shilliam	Ongoing 31/05/2025
17	LEGAL	SRR 1.1	<p>Corporate Services - Impacts Arising from Future Legislation 'Martyn's Law'</p> <p>- Council is unprepared to respond to the potential requirements of forthcoming legislation related to counter-terrorism and therefore fails in the duty to protect people</p>	<p>- LCC fails to respond effectively to a terrorist attack and places staff and public lives in danger</p> <p>- LCC services which fall under the scope of the requirements are unprepared and could be subject to enforcement</p> <p>- Additional cost implications and pressure on budgets</p> <p>- Reputational impacts</p>	<p>- Internal working group in place and has been meeting facilitated by the REBR Team Manager. Review of potential services/buildings in scope completed and a number of other services have been contacted to prompt consideration and preparations. A number of services have already embedded a range of actions including Planning in relation to relevant major development schemes and DMH in terms of staff preparedness and risk assessments. Ongoing monitoring of draft legislation as details are published and REBR Manager attending national network to keep updated. Ongoing communication of details as they emerge. Close working with counter-terrorism Police including training planned for staff and a range of frontline services, and ongoing liaison and support in relation to city events. Update delivered to CMB and also Directors/HoS with support from Counter-Terrorism Policing.</p>	5	3	15	Treat	<p>- Ongoing support and work with the internal working group and ensuring membership reflects all relevant services</p>	5	2	10		Andrew Shilliam	Ongoing work with internal working group
18	TECHNOLOGICAL	SRR 4.1	<p>Finance - Lack of critical skills, resources & capabilities</p> <p>BCP not fit for purpose if total or partial loss of key IT systems occurs at the same time e.g.:</p> <p>1. Loss of Unit 4 results in feeder system BCP's not working correctly</p> <p>2. Feeder systems such as CONTRocc are reliant on Unit 4 functioning for BCP to be effective</p>	<p>- Loss/delay of all payments to individuals and suppliers</p> <p>- Loss/delay of income, e.g. from Direct Debit runs</p> <p>- Loss of lines of communication</p> <p>- Loss of ability to produce routine documents, e.g. letters</p>	<p>- All areas have individual BCP's and all are fit for purpose if single systems or teams fail. These are robust and each plan relies on alternative systems to still be working.</p>	5	3	15	Treat	<p>Work with ICT to create BCP's for the Finance division as a whole in addition to individual plans within each service. These plans will recognise interdependencies within systems.</p>	5	1	5	Fines and penalties could be many £0000's depending upon multiple factors. Plus untold reputational damage	Amy Oliver	31/03/25
19	POLITICAL	SRR 1.2	<p>Legal - Workloads & Pressure - Client Care</p> <p>Services within the Council are stretched with increased demands and pressures. Unrealistic deadlines at times can be set for major projects, procurement and contracts. There is a concern that whilst corporate policy is correct and general awareness of correct procedures/rules exists, it may not be implemented effectively within services.</p>	<p>- Timely legal advice from clients not sought.</p> <p>- Failure to comply with laid down guidelines.</p> <p>- Breach of regulations or law e.g. data protection.</p> <p>- Council found to act unlawfully.</p> <p>- Challenges to procurement processes.</p> <p>- Cost implications from requirements not being followed/deadlines being missed/ not delivering value for money for Council.</p> <p>- Award made against council etc.</p> <p>- Staff demotivated</p> <p>- Negative Press/Reputation of Council</p>	<p>- Reviewing practices to be improve flexibility of approach.</p> <p>- Channel Shift.</p> <p>- Raising awareness - corporate messages.</p> <p>- Early engagement - feeding into deadlines.</p> <p>- Attending project boards.</p> <p>- Projects to look at new ways of working.</p> <p>- Improved use of technology e.g. Electronic Signatures/Virtual Hearings.</p>	4	4	16	Treat	<p>- Review of practices.</p> <p>- Increase comms program/training and awareness of current practices (deadlines with project plan).</p>	4	3	12		Kamal Adatia	Ongoing 31/05/2025

Appendix 3 - Leicester City Council Operational Risk Register

Risk Register Owner: Alison Greenhill, COO

Risks as at: 31/01/2025

RISK REF	RISK THEME / CATEGORY <i>Establish which category the risk falls into using PESTLE definition. See Process tab for more information</i>	LINK TO STRATEGIC RISK <i>Which Strategic Risk does the risk link to? Where relevant, refer to the SRR to establish which strategic risk is impacted by risk identified (Below link provides access to current SRR on SharePoint). Log strategic risk ref no.</i>	RISK <i>What is the problem; what is the cause; what could go wrong? What is it that will prevent you from achieving your objectives?</i>	CONSEQUENCE/EFFECT: <i>What would occur as a result, how much of a problem would it be, to whom and why?</i>	EXISTING ACTIONS/CONTROLS <i>What are you doing to manage this risk now?</i>	RISK SCORE			RESPONSE STRATEGY / ACTION <i>Select from the 4Ts (see Process worksheet for definitions and further guidance): Tolerate, Treat, Transfer, Terminate</i>	FURTHER MANAGEMENT ACTIONS/CONTROLS			TARGET SCORE			COST	RISK OWNER	TARGET DATE
						Impact	Probability	Risk		Impact	Probability	Risk	Impact	Probability	Risk			

STRATEGIC AREA - Social Care and Education

20	ECONOMIC	SRR 2.2	Children's Social Care and Community Safety - Workforce - availability Diminishing availability of experienced skilled social workers	- National shortage of qualified SW's impacting on local recruitment; recruitment challenges in other specialist roles e.g. psychiatrist, youth justice officers etc: - Increased reliance on agency staff to fill vacancies - Increased SW case loads - Increased budget pressures; - Lack of continuity of staff in roles	- Developing a workforce recruitment and retention strategy including international recruitment and permanent solutions.	4	4	16	Treat	ASYE Programme Apprenticeship Programme Grow our own Programme International Recruitment Phase 2; Frontline programme; Career progression scheme	4	3	12			Damian Elcock	Dec-25	
21	SOCIO-CULTURAL	SRR 3.3	Education, SEND and Early Help School collapses due to Reinforced Autoclaved Aerated Concrete failure. Surveys undertaken to determine the risk. These surveys are intrusive and so the schools are unable to remain open while investigations and remedial works are undertaken.	- Major incident and loss of life - Face to face education cannot be maintained for all or some children - Education is unable to continue on site and new school places will need to be identified and arranged. - Poor education outcomes and staff mental health due to poor and inconsistent accommodation whilst permanent solutions are found. - Impact on school places and school sufficiency - Financial impact on schools and the local authority - Capacity within the council to deliver an effective response	- Working with the Department for Education to identify and source the provision of temporary and permanent solutions. - These solutions will not be in place until 6 to 9 months from the school closure. - Current ad hoc arrangements are in place for 2 out of 5 schools that may be affected. - For one school these ad hoc arrangements are unsustainable and new arrangements are being sought. - impact on other services who have been displaced due to using their buildings to provide temporary solutions	4	4	16	Treat	Work closely with DfE and colleagues in the council to expedite solution for both temporary and permanent solutions. Identify possible places for re-location of schools in this event. Ensure schools have BCP in place that include full closure and the actions required.	3	3	9			Sophie Maltby	Spring 2025 review	
22	SOCIO-CULTURAL	SRR 3.4	Education, SEND and Early Help External pressures from migration and Government policies for asylum seeker and refugee placements within the city. This has added significant in year migration pressure on primary and secondary school places. Migration also increases the demand for support in school and from specialist services. The majority of the in-year pressure is from children moving into the city and pupil growth has nearly tripled expected forecasts in some year groups. This has put accelerated pressure on particular areas and year groups. Without taking further measures there is a significant risk of not having sufficient places.	Planned school place capacity, including historical migration factors are not keeping up with actual migration demand, leading to localised sufficiency issues and being unable to place pupils within a reasonable distance. Additional specialist support costs and travel, impacting on support budgets and capacity of support staff. Increased migration could lead to the LA running out of school places and being unable to provide education. This could also lead to increased challenges of attendance, SEND support, movement of pupils across the city and community cohesion. It would likely increase costs for transport and admissions appeals.	Monitored at the strategic board for immigration and education sufficiency board to link in with wider council services. Distribution of government grant funding directly to schools to go towards full cost of provision required. Monitoring of admissions applications and type of migration. Updating forecast models to include current levels of migration, however, it is impossible to predict if the trends will continue and reduce.	4	4	16	Treat	- Develop data model with schools to understand demand and drive policy and support. Complex cases referred to fair access as required. Incorporate potential numbers in place planning monitoring. - Highlighting the issue with the DfE at regular meetings who are aware migration has impacted the midlands authorities significantly. - Discussions with schools and trusts about solutions to rapid increases in migration to increase surplus places to meet demand through creating additional capacity and using powers to offer above schools planned admission number - Approached schools and trusts for additional school places immediately and for 2025/26 and in future years. Action plan to create additional capacity as required.	3	3	9	Potential for £1m in growth funding for 2025/26 depending on solutions required.			Sophie Maltby	Monthly monitoring of demand.
23	POLITICAL & LEGAL ECONOMICAL	SRR 1.1 SRR 1.2 SRR 2.3	Education, SEND and Early Help Impact of post-16 SEND transport policy implementation following consultation and decision making	Possible risk to life/reputational damage to the council/significant financial impact/legal challenges. Parents may not understand when they can apply if the policy has to change again. If the policy is challenged the overspent budget could contribute to s114 risk. Judicial review likely and may mean policy implementation is paused. Increase in parent complaints.	Current review of policy with review of independent travel training sufficiency to follow. System procurement to promote efficiency. Stakeholder communication re consultation and barrister guidance obtained.	4	4	16	Treat	Plans to mitigate and limit impact in place and considered in the planning stages. Most likely consequence is legal challenge.	4	2	8			Sophie Maltby	01/09/25	

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						Impact	Probability	Risk		Impact	Probability	Risk						

STRATEGIC AREA - Public Health

24	ECONOMIC	SRR 2.3	<p>Wider Economy & Supply Chain</p> <p>Brexit / covid related pressures increases prices or reduced availability of IT stock / services / logistics / medicines etc within the supply chain.</p> <p>Increased costs result in contracted services becoming economically unviable for providers. This is already beginning to present in multiple contracts / services. e.g. Emergency hormonal contraception contract with pharmacies previously held by Boots has not seen the incumbent bid on the tender citing it is not cost effective for them to continue without an uplift.</p> <p>Cost of living crisis exacerbates existing inequalities and food / fuel poverty for the poorest and most vulnerable in the city.</p>	<ul style="list-style-type: none"> - Changes in financial call / contracts due to fluctuations in drug / treatment market prices making delivery otherwise unviable - Logistical and financial difficulties to delivery for services or programmes. - Prioritisation / decommissioning / reduction of existing service delivery model(s) - Negative impact on population health and reduction in health services pathways available to access - Call on public health reserves - Staff are unable to be supplied with appropriate IT equipment leading to reduced efficacy and wasted capacity - Suppliers are unable to deliver minimum viable output as per contracts, and either underperform or serve notice on contracts. - Financial impact to maintain existing contracts or retender at short notice - Increased capacity pressure impacts on staff and wider portfolios - Economic crisis within the city as households cannot meet rising costs leading to increased levels of food and fuel poverty. - Increase in health issues caused by poor nutrition or cold / damp environments and sustained stress and pressure. - Overall reduction in population health. - Static or widening inequalities across the city 	<ul style="list-style-type: none"> - Internal governance, decision making processes, and budgetary oversight leveraging expertise within team to assess choices and inform management briefings / options appraisal - Strong engagement with national partners to aid horizon scanning and early signposting of potential issues - Good relationships with peers in other organisations are maintained as a matter of course to aid communication and working efficiencies - Contract management team maintain strong relationship with services and stress importance of business continuity plans to ensure fallbacks and contingencies where possible - Fuel poverty programme launched to raise awareness and signpost support pathways to the most vulnerable. Project manager post recruited to manage and provider currently delivering. Extension option being exercised for an additional 12 months after a successful first year. - Cross organisation working groups set up to communicate, monitor, and manage response 	5	4	20	Treat / Tolerate	<ul style="list-style-type: none"> - Continue with existing controls and close monitoring of national landscape - Maintain oversight of staffing levels and associated IT requirements and open communication with IT services to inform appropriate actions - Reserve could potentially be used to mitigate short term supply shock. - Alternate IT routes being explored for new starters / initiatives (IGEL / mobile working) - Analysis of need and potential response actions to potential poverty crisis ongoing 	4	4	16		Rob Howard	Review by 19 March 2025
25	ECONOMIC	SRR 2.2	<p>Staffing and Recruitment - External</p> <p>A national skill shortage and recruitment crisis in conjunction with Leicester being a challenging area in comparison to neighbouring areas creates difficulties in securing appropriately trained professionals within commissioned services and / or partner organisations - in particular Public Health Nurses and Health Visitors.</p> <p>Disruption to workforce of NHS or other partners due to strikes or industrial action.</p> <p>Significant staff loss coupled with recruitment difficulties within commissioned services reduce capacity to the extent that statutory functions or contractual terms are not adequately maintained.</p> <p>Providers struggle to maintain staff levels due increasing payroll costs and budgetary pressures.</p>	<ul style="list-style-type: none"> - Impact on front line service delivery of statutory functions - Knock-on impact on capacity and ability to deliver of non-participating staff impacted by strike action - Negative impact on service users - The ability of our commissioned services to provide adequate safeguarding is reduced, leading to an increased risk of support needs not being identified or met, or an increase in likelihood of serious incidents occurring. - This could also present a risk of increase to the likelihood of serious incidents occurring leading to: <ul style="list-style-type: none"> - Serious injury or loss of life - Legal challenge - Severe reputational damage - Increased strain on existing staff leading to increased turnover, loss of embedded knowledge and experience, and fatigue impacting quality of work. Risk of entering a negative feedback loop (pressure causes staff loss, staff loss causes further pressure etc) further increasing difficulties in securing trained professionals 	<ul style="list-style-type: none"> - Close monitoring and communication with commissioned services by Lead Commissioners and Group Manager - Scrutiny and support from contract management team - Commissioned children's service has introduced a skill mix framework to alleviate Health Visitor pressures whilst maintaining adequate safeguarding. This involves splitting post duties and allocating less skilled work to appropriate staff to ease pressure on caseloads and health visitors. - Ongoing work to make Leicester a more attractive location for Health Visitors to attract and retain skilled workers. - Providers to be queried over planned response specifically around occurrence of strike action and widespread loss of staff and holding of adequate BCPs to manage incidents. How will delivery be maintained / how will affected service users be captured and engaged etc. 	5	4	20	Treat / Tolerate	<ul style="list-style-type: none"> - Continual oversight of supplier business continuity plans and engagement on current pressures / concerns - Continual internal public health business continuity plans review ongoing with consideration given to response in the event of risks presenting - Ongoing close monitoring of suppliers and skill / workforce concerns - Supplier business continuity plans audit to be undertaken in rolling fashion 	5	3	15		Rob Howard	Review by 19 March 2025
26	TECHNOLOGICAL	SRR 4.1	<p>Data</p> <p>Complex data sharing agreements with external organisations not in place or understood by officers which restricts information flow into public health required to deliver objectives.</p> <p>Self reported data that is difficult to verify for activity based contracts leads to uncertainty over financial position and potential over payments</p> <p>Increased appetite for data and ongoing reporting needs due to covid have hindered ability to deliver BAU reporting functions and caused a backlog of Health Needs Assessments awaiting completion / attention.</p> <p>Updated NHS Patient Safety Incident Reporting Framework is incompatible with LLR Serious Incident Reporting Protocol negatively impacting data availability and workflow surrounding reporting of incidents. Risk that we lose sight of incidents / cases and are unable to assess provider quality and contract performance adequately.</p> <p>The English Devolution White paper which details the development of new Strategic Authorities and Mayoral responsibilities will involve reorganisation of local government, which may result in boundary changes which will impact Public Health Data sets.</p>	<ul style="list-style-type: none"> - Delay or complete stoppage in obtaining information required to make timely decisions for service users, may result in outdated data that is not useful for commissioning and partnership work. - Distress to service users - Reputational damage to LCC - Potential financial burden or incorrect overspend for activity - Potential litigation claims for failure to deliver - Increased stress on LCC staff - Difficulties in workload management and timely production of existing reports and statutory functions as well as making capacity management difficult. - Impact on service delivery and response agility - Reduced data provision and indicators potentially being missed or identified later than they may have been delaying (or preventing) mobilisation. - Negative impact on our ability to both proactively and reactively manage NHS providers that we commission to deliver services due to reduction of oversight and visibility of issues arising in NHS providers for all of public health / LCC. Analysis and ongoing management of service quality is severely hampered without insight or access to incident data. - Obfuscation and extension of timelines for responses and investigations into serious incidents increase the likelihood of unsatisfactory outcomes for users as well as increased waiting times - Boundary changes will have data collection, analysis and trend implications, both locally and for online data sources. Data sets will require re-working to fit new boundaries. 	<ul style="list-style-type: none"> - Work-around arrangements in place with key organisations to share basic information - Working with wider network of organisations to establish data sharing protocols and file transfers - Engagement with information governance to ensure that any risks of data sharing are identified and managed. - Increased relationship building and engagement across system partners - Continued close communication and engagement with Integrated Care Board / Leicestershire Health Informatics Service (LHIS) regarding the issues surrounding data availability and access. <ul style="list-style-type: none"> - Data sharing agreement recently secured with LHIS that will allow for direct access to anonymised GP data in order to better track performance and volumes. This is currently embedding with positive results on the payments aspect in terms of accuracy and assurance. Data streams for performance analysis are still being assessed to ensure accuracy and are expected to be available for use in the near term. An independent audit is underway to assess these workflows and processes. - Close working relationship with IT, procurement, and information governance to establish and maintain data sharing agreements with services external to LCC - Additional resource added to data function - Close working relationship with LPT as 0-19 provider with the aim of maintaining adequate management oversight with visibility of reports and attendance of weekly oversight meetings. Additional agreements have been built into the new Section 75 agreement with LPT to ensure robust governance is in place around serious incidents. This has been signed off by the Public Health Clinical Governance Group. 	4	5	20	Treat / Tolerate	<ul style="list-style-type: none"> - Ongoing engagement with information governance and partners to resolve existing and arising issues - Undertake an exercise to identify all organisations and data needs and perform gap analysis - Ongoing horizon scanning of other services where NHS Patient Safety framework changes could become an issue (potential to effect all NHS services and generate complications when commissioning procurement of new services). - Continue to work with providers to understand implications of NHS Patient Safety framework changes on services, and liaise with multi-agency partners to plan a way of managing this. Continued close contractual oversight with LPT to ensure current level of visibility for 0-19 contract is maintained - Agree a corporate LCC stance on NHS Patient Safety framework changes 	5	3	15		Rob Howard	Review by 19 March 2025

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Risk Register Owner: Alison Greenhill, COO

Risks as at: 31/01/2025

RISK REF	RISK THEME / CATEGORY <i>Establish which category the risk falls into using PESTLE definition. See Process tab for more information</i>	LINK TO STRATEGIC RISK <i>Which Strategic Risk does the risk link to? Where relevant, refer to the SRR to establish which strategic risk is impacted by risk identified (Below link provides access to current SRR on SharePoint). Log strategic risk ref no.</i>	RISK <i>What is the problem; what is the cause; what could go wrong? What is it that will prevent you from achieving your objectives?</i>	CONSEQUENCE/EFFECT: <i>What would occur as a result, how much of a problem would it be, to whom and why?</i>	EXISTING ACTIONS/CONTROLS <i>What are you doing to manage this risk now?</i>	RISK SCORE			RESPONSE STRATEGY / ACTION <i>Select from the 4Ts (see Process worksheet for definitions and further guidance): Tolerate, Treat, Transfer, Terminate</i>	FURTHER MANAGEMENT ACTIONS/CONTROLS			TARGET SCORE			COST	RISK OWNER	TARGET DATE
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27	ECONOMIC	SRR 2.3	<p>Budget</p> <p>Changes to service delivery to operate within increasingly tight financial envelopes and increased savings targets. Continued reductions could force termination of services to ensure priority services remain available.</p> <p>If the authorities financial position continues to degrade then increasing financial pressures contribute to the likelihood that increased level of funding are taken away from the public health reserves and revenue budget to support general council budget pressures following covid, especially in the context of ongoing austerity and the cost of living crisis.</p> <p>Uncertainty over non-recurrent or unconfirmed recurrent funding coupled with ambitious targets leads to reduced delivery and higher probability of project failure. Long term sustainability of initiatives is brought into question meaning economies of scale or efficiencies derived from long term planning cannot be capitalised on,</p> <p>Income generation has been impacted by the pandemic and remains in recovery, and the cost of living crisis is reducing the take-up and renewal of paid memberships. For the Live Well portfolio this is hindering the ability to hit targets and increasing budgetary pressures. While the funding gap is currently being met by reserves this is a finite and dwindling resource and the above financial pressures can be expected to increase wider demand and reduce the ability to route any funds to reserves each year.</p> <p>Increased demand for public health services in response to covid recovery coupled and the cost of living / fuel poverty crisis create resource / capacity strain that cannot be mitigated due to a lack of available budget for extra posts.</p>	<ul style="list-style-type: none"> - Public health non-statutory programmes are reduced in size or allocated resource, or closed down altogether creating long term impacts and poorer health outcomes for citizens. This is beginning to present in some areas e.g. tier 2 weight management service has been decommissioned with no replacement provision. . - Reputational damage, and reduced credibility and trust of both public health and LCC in communities and voluntary organisations which is difficult to recoup hindering ability to reach specific groups in the city for interventions. - Levels of public health grant diverted to other council areas may draw attention and scrutiny from government and result in judicial review on grant usage if core PH services begin to struggle to maintain adequate delivery. - Reduced ability to deal with emerging public health emergencies, uncertainty in our ability to respond flexibly to unpredictable emerging needs and to ensure stability and sustainability of programmes. This may be exacerbated by the pandemic in the medium / long term when secondary impacts emerge widening public health response needs. - Increased demand on other public services (primary or secondary health care / Social Care / Leisure Centres) leading to knock on stress to other council services and budgets - Risk of missing safeguarding issues impacting on council statutory duties resulting in serious injury or loss of life, legal challenge, severe reputational damage - Financial viability of Live Well at risk. - Potential redundancy costs arising from non-recurrent or unconfirmed funding. - Decisions regarding resource allocation without up to date data may overlook current insights and hinder ability to make precise spending decisions. 	<ul style="list-style-type: none"> - Annual public health return to Central Government to demonstrate appropriate use of grant funding - Portfolio restructure, continual review of landscape and exploration of alternative funding streams to ensure we are positioned to meet upcoming needs - Decisions taken to deprioritise or close certain services in order to meet budgets and savings targets. - Employing new commissioning, monitoring, and delivery model for key services to streamline and identify adverse effects. Public health invite and engage with audit services annually as good practice to identify inefficiencies and areas for process improvement. - Bids for funding being written and submitted across the team as opportunities arise, external funding streams or grants utilised to fullest extent to relieve budget pressures as far as possible. . - Internal governance to closely manage budgets and ensure intelligent and planned use of reserves over time to ensure maximum efficacy and sustainability - Political oversight / scrutiny - Identifying and articulating associated risks through spending review process - Clinical Governance Process in place for review of providers, performance, and to sense check direction of travel to ensure optimum delivery quality and value for money - Customer retention plans and actions put in place to reduce subscription cancellations from customers unable to use services which would impact income generation - Strong service / programme planning to cover possible funding scenarios, allowing for adaptations to be made at pace. - Volunteer network being built and grown through community champions workstreams. - Budget monitoring discussions are held to track spending, prioritise resources, and identify potential overspends or shortfalls early to enable timely corrective action. 	4	4	16	Treat / Tolerate	<ul style="list-style-type: none"> - Continue with existing controls - Secure additional revenue e.g. income generation through commercial opportunities. - Continue to explore a variety of potential local and national funding opportunities including commercial, government, academic, grant funding, - Investigate creation of a resource to help officers bid for funding with more guidance to increase consistency and success rate - Utilise in kind support / asset sharing where possible - Cross organisational opportunity review of priorities and resources ongoing through partnership programmes and system level board pathways. Public health consultant employed to stimulate engagement throughout and across the system. - Continued engagement and growth of various volunteer networks and community organisations. - Business case to outline justification and need for ringfencing reserves to mitigate / respond to any further public health emergencies, and to deal with longer term impacts of covid as they arise. 	4	3	12		Rob Howard	19/03/25		
28	ECONOMIC	SRR 2.3	<p>Commissioning</p> <p>Reduced budget for services impacts on financial viability to suppliers at the tender stage who may deem package to be unviable leading to a lack of bids reducing competition or tender failing altogether. Suppliers may also not bid on tenders due to staff / skill shortages leaving them unable to meet requirements. This is exacerbated by tight financial envelopes and increased costs due to inflation.</p> <p>In the context of increasing costs and reduced or static budgets, providers could become unsustainable without an uplift or adjustment to the funding received from public health. In conjunction with the below concerning partner organisations and Risk 8 this increases the likelihood that suppliers will serve notice on contracts or be unable to deliver.</p> <p>Services commissioned on activity based contracts are difficult to predict in times of uncertainty and risk under / over provision each of which come with financial and logistical challenges and risks.</p> <p>Partner organisations we joint commission with are restructured or undergo a change in policy resulting in changes which negatively impact our work / agreements or ability of supplier to deliver services. Partners opting to leave or disengage from working agreements adds additional pressures to teams and services.</p>	<ul style="list-style-type: none"> - Providers could become unsustainable and serve notice on contracts without an uplift or adjustment to the funding received from public health. Loss of existing contractors due to inability to reconcile increased costs within static or reducing financial envelope. - Failed tenders. Capacity required to assess and alter the specification / tender go to re-spec and go to market again, Disruption to, or reduced / ceased delivery of statutory services. Potential legal and governance implications for LCC if delivery ceased. - Dependent on service, retendering may be extremely difficult given the increased complexity of the landscape as well as the budgetary and time constraints we would be under. Risk of being without a service which would come with legal / governance implications, or having to pay inflated costs for interim delivery. - Our offer may not be attractive to new providers during tenders; risk of failed procurement or lack of competition leading to sub-standard delivery - Loss or alteration of service provision and impact on community who require service leading to poorer outcomes, increased sickness rates and impact on NHS as demand increases for other services - Decreased morale and reputational damage to LCC - Funding gap leads to other programmes needing to be terminated to balance the budget. Immediate reduced provision and range of services to city residents with unknown long term impacts. - Underspends result from reduced activity that do not reflect underlying / actual budget pressures that will resume when pre-existing baseline is re-established. Budget is reduced or removed based on lower activity costs creating business critical issues when this occurs - Increased costs due to reduction in economy of scale due to moving from a joint to solo re-procurement 	<ul style="list-style-type: none"> - Strong forward planning, bespoke procurement methods, and robust internal governance - Clinical governance board in place for improved oversight and robust governance framework to ensure that commissioned services are robustly reviewed and monitored. - Performance review group provides oversight, early issue identification, and escalation process - Both of the above boards are having ToR and framework re-assessed to ensure optimal oversight of services - Lead Commissioners and contracts team within Public Health undertake regular performance and quality reviews with continual engagement and communication with providers and partners - Timely briefing of lead members to highlight potential risks and consequences - Expertise within team to assess choices, identify and profile future need in a proactive fashion, and inform management briefings / options appraisals - Advocacy by LCC Director of Public Health with national bodies - Provider negotiations - providers have continued to be paid regardless of performance due to the pandemic to ensure the suppliers (and the wider delivery chain) stay afloat - Based on joint analysis between the sexual health service provider (MPFT) and public health regarding financial pressures, continuity funding at 100% of the contract value will be issued and services amended to ensure viability and effective delivery, particularly to identified vulnerable populations. Additional monitoring and ongoing analysis will continue to be conducted. - Close working with internal departments (legal / procurement / contract management / finance) - Services jointly commissioned where possible / appropriate to increase efficiencies relating to economies of scale and cross border activity as well as available resource to mitigate issues - Relationships built and maintained with partnership organisations to retain collegiate working environment and aid flow of information. Public health consultant employed to stimulate engagement throughout and across the system. - Supplier business continuity plans review and audit ongoing to ensure continual sight of level of supplier resilience. Internal audit of this area by County colleagues is ongoing. 	4	4	16	Treat / Transfer	<ul style="list-style-type: none"> -Continue with existing controls; -Continue to joint commission where appropriate (internal with LCC, and external with county and regionally) - Continued exploration of new and novel approaches to commissioning including encouraging consortium applications and use of section 75 - Continued monitoring and increased engagement of suppliers to pre-emptively identify potential issues - Regularly review Business Continuity Plans to ensure minimal service disruption in the event of supplier failure. 	4	3	12		Rob Howard	Review by 19 March 2025		

Appendix 3 - Leicester City Council Operational Risk Register

Risk Register Owner: Alison Greenhill, COO

Risks as at: 31/01/2025

RISK REF	RISK THEME / CATEGORY <i>Establish which category the risk falls into using PESTLE definition. See Process tab for more information</i>	LINK TO STRATEGIC RISK <i>Which Strategic Risk does the risk link to? Where relevant, refer to the SRR to establish which strategic risk is impacted by risk identified (Below link provides access to current SRR on SharePoint). Log strategic risk ref no.</i>	RISK <i>What is the problem; what is the cause; what could go wrong? What is it that will prevent you from achieving your objectives?</i>	CONSEQUENCE/EFFECT: <i>What would occur as a result, how much of a problem would it be, to whom and why?</i>	EXISTING ACTIONS/CONTROLS <i>What are you doing to manage this risk now?</i>	RISK SCORE			RESPONSE STRATEGY / ACTION <i>Select from the 4Ts (see Process worksheet for definitions and further guidance): Tolerate, Treat, Transfer, Terminate</i>	FURTHER MANAGEMENT ACTIONS/CONTROLS			TARGET SCORE			COST	RISK OWNER	TARGET DATE
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29	POLITICAL	SRR 1.1	<p>Policy / Governance / Partnerships</p> <p>Population health and the wider determinants of health impact, and are impacted by, a broad range of activities LCC undertakes. There is an opportunity to increase the focus on the public health aspects of service area activities and aid in corporate strategy / policy discussions. By engaging more strongly with service areas that impact wider determinants and creating a 'health in all policies' culture across the Council health outcomes across the city could be significantly improved by leveraging a multiplier effect that PH could not achieve alone. Risk is that this is not supported or implemented in timely fashion and the opportunity is lost. Ongoing budgetary pressures and savings targets across LCC may lead to public health focus and engagement being deprioritised within service areas.</p> <p>Service areas with public health impacts (Housing / Transport / Sports etc) experience cuts to budgets and programmes leading to delivery challenges and knock on health impacts across the population that then require additional resource to manage and tackle in the longer term.</p> <p>External national imperatives are introduced without associated budget creating difficulties in local delivery, or national policy changes impact existing work or ability to respond in a place appropriate manner.</p> <p>Changes in structure / leadership to partner organisations i.e. PCC elections or changes to working agreements with city organisations impact project outcomes or hinder engagement / reach of community support work. Some aspects of the divisions work are undertaken in partnership with other service areas or organisations and are reliant on their capacity or capital to function effectively and achieve marketing or delivery goals. Risk of factors outside of our controls hampering programme success.</p> <p>Governance structures surrounding funding allocations and sharing between partner organisations are not formalised reducing ability to adequately oversee and manage funding streams and outcomes. Additionally, internal governance challenges and pressures within procurement and finance add complexity and cause delays in executing contractual processes.</p>	<ul style="list-style-type: none"> - Reduced outcomes over time lead to long term budgetary and resource drain that could be reduced by small tweaks to wider LCC activities - Reduced influence on corporate policies and strategy, and significant potential for improvement to wider determinants not capitalised on - Reduction of, or failure to realise improvements to, health outcomes for city residents. - Call on finances from NHS pay award, reducing available budget for existing work - Logistical difficulties to delivery for services or programmes. - Prioritisation / decommissioning / reduction of existing service delivery model - Call on public health reserves - Change in leadership may result in changes to organisations agendas which may negatively impact our work, agreements, and ability to deliver. - Reduced efficacy as work is not tailored to the local area or possible efficiencies by operating collaboratively in cross geographical areas is not leveraged - Partners organisations operate outside of the spirit of agreements placing undue financial or capacity strain on LCC teams (e.g. County not paying rent to the SH service due to a loophole, OPCC being unresponsive in renewal of suicide bereavement service) 	<ul style="list-style-type: none"> - Internal governance, decision making processes, and budgetary oversight leveraging expertise within team to assess choices and inform management briefings / options appraisal - Advocacy by the Director of Public Health with local and national bodies - Close relationships built and maintained with service areas around the organisation. Capacity has been added to the team to increase corporate engagement - Strong engagement with local and national partners to aid horizon scanning and early signposting of potential issues - Strong engagement, communication, and partnership working maintained with system partners and the Health & Wellbeing Board membership - Good relationships with peers in other organisations are maintained as a matter of course to aid communication and working efficiencies - Specific workstreams created within the division to engage partners and to embed Public Health considerations in day to day operations 	4	4	16	Treat	<ul style="list-style-type: none"> - Continued: - Political escalation - Corporate responsibility - Service & budget planning - Utilisation of partnership approach - Continued exploration of alternative treatment / therapy options or approaches within services or by programmes - Safeguard public health reserves in order to preserve ability to provide adequate response without significant detriment to corporate purse - Continued monitoring of medical landscape, and updates to guidance and clinical standards - Continued presence within LCC and corporate engagement to provide visibility to public health concerns and considerations that work of discrete service areas may unknowingly be able to positively impact - Establishing a cross division working group on health in all policies to increase capacity to deliver on wider determinants of health 	3	4	12		Rob Howard	Review by 19 March 2025		
30	ECONOMIC	SRR 2.2	<p>Staffing and recruitment - Internal</p> <p>An emerging recruitment crisis across a variety of sectors creates difficulty, both within public health and our commissioned services or system partners, in securing sufficient staff with the appropriate skills and experience to meet public health challenges posed by covid response and recovery, and emerging issues.</p> <p>Unsuccessful recruitment (increased in likelihood due to the above point) or approval to recruit delays for existing and new posts cause capacity and timeframe pressures on ongoing delivery and rollout of new initiatives that would benefit from proceeding at pace.</p> <p>Key staff members are set to leave Public Health before April 2025, their posts will need to be filled. Extended recruitment processes and external notice periods could result in lengthy start dates, potentially overlapping with internal notice periods and creating a gap.</p> <p>In addition to the above point, key staff retiring, going on maternity leave, leaving the division or moving into new posts within the division creates disruption, the risk increases if there are multiple departures simultaneously. Potential risks to wider public health aims or outcomes if significant losses in other LCC service areas.</p> <p>Capacity increase within the public health division is being outpaced by the broadening of scope and increased need that is resulting from current societal context - this is exacerbated by financial pressures and difficulties in recruitment.</p> <p>LCC Pay Scales pay less for professional posts than other LAs in there region.</p>	<ul style="list-style-type: none"> - This is currently presenting with a number of senior roles being vacated and needing to be filled creating capacity and continuity pressures. While our existing plans, investment into staff and wider training, and support networks have significantly lessened the impact gaps in post are creating additional pressures. - Increased demand on remaining capacity impacting on team morale. The health and wellbeing of existing staff is impacted resulting in individual burnout or increased staff turnover. - Loss of key specialist skills, knowledge and expertise, and working relationships that are very difficult to replace due to national shortage of skilled workers - Significant loss of capacity means programme targets are delayed or not achieved, or need to be revised downwards to match ability to deliver. - Cover for posts splits capacity between existing workstreams negatively impacting both. - If demand and workloads are consistently high for extended periods existing staff do not gain a breadth of public health experience. This could result in an underkilled workforce, or increased turnover as further development is sought after by individuals (with associated difficulty in sourcing adequate replacements for posts). - Negative impacts on delivery of work and an inability to meet emerging objectives of individual services as well as divisional strategic objectives. - Reduction in ability to front run issues and adequately assess complex situations before being required to act. - Loss of in-year funding available if staff / initiatives cannot be put in place in a timely fashion. - Delay in advertising / filling vacant posts exacerbating capacity issues - Gap in leadership / delivery of public health functions - Capacity issues may lead to elements of work being deprioritised. 	<ul style="list-style-type: none"> - Close management and oversight of individual workloads and projects - General training and development opportunities and organisational development utilised - Upskilling team - public health supporting staff to undertake a Masters in Public Health and for staff to follow work based public health training pathways - Specific courses identified and allocated to appropriate staff. Mandatory and suggested training framework created and rolled out across the team. Reviewed and managed across the division to ensure all staff are in compliance with minimum training requirements and are encouraged to develop skills and knowledge as required. - Early identification of potential staffing needs / vacancies with early engagement with HR to ensure timeframes to recruit are sensible - Capacity in across the team increased and analysis of need ongoing. - Team restructure undertaken to more efficiently redistribute capacity and portfolios - Increased team awareness at all levels of importance of self care, with support offered necessary. Ongoing team building events / exercises in place to aid wellbeing and an internal pastoral support scheme has been implemented to ensure support pathways are available to those who require it. - Recruitment concerns escalated - Contracts staff are being trained and developed across the whole Public Health portfolio in order to reduce single points of failure and reduce impact of staff loss. This approach is also encouraged across commissioning teams. Handover plans are being developed for the HIAP portfolio, 	4	4	16	Treat	<ul style="list-style-type: none"> - Continual audit of needs and skills against public health key skills framework to identify and fill key knowledge and skills gaps across division - Produce a public health workforce strategy including succession planning. Task and Finish group working on this and we are linking in with regional and national Public Health workforce planning initiatives. - Business continuity plan review and update regularly scheduled to ensure succession planning and key staff availability plan is adequate. - Ongoing identification of single points of failure and planning / documentation to mitigate risk of project lead unavailability - Consideration within service plans for posts and building in long time scales for recruitment as standard practice to be considered in forward planning - Continued monitoring of capacity needs and fixed term recruitments to mitigate issues where appropriate - Continued focus on employee wellbeing and provision of adequate support where necessary - Centralising of important data and guides detailing workflow processes ids ongoing to minimise impacts of loss of key staff and knowledge and to increase pace of training new staff. 	4	3	12		Rob Howard	Review by 19 March 2025		

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31	SOCIO-CULTURAL	https://leicestercitycouncil.sharepoint.com/sites/sec025/SitePages/Risk-management.aspx	<p>Health Protection / Covid 19</p> <p>Variant strains or other diseases emerge requiring a significant response, further local lockdowns, preventative measures, or a continuance of efforts that have been tapered off.</p> <p>There is only a single Infection Prevention Control (IPC) Specialist within public health providing all IPC support to the city, with no budgetary scope to provide additional capacity. This is a significant bottleneck and single point of failure.</p> <p>A secondary impact of the pandemic may be other health aspects experiencing significant increases in occurrence as a knock on effect i.e. mental health, substance use, obesity, oral health that require increased resource to tackle</p> <p>Reduced access and low take-up of offered services during the pandemic impacts long term health outcomes, widens inequalities, and reduces opportunity to create income to reduce budget pressures. Further risk that low uptake / referrals that resulted from covid persist negatively impacting outcomes and inequalities.</p>	<ul style="list-style-type: none"> - Negative impact on resident health and wider public health outcomes and improvements, leading to a less healthy and resilient population - Significant operational impact on division in the event of a scenario comparable to Covid 19 - Potential variant or other disease cause large increase in case numbers that are unreported lead to further pandemic duration / restrictions. Increased infection rates mean further local lockdowns or preventative measures are enacted. - Further lockdown or restrictive measures would decrease morale across the city, hinder general recovery efforts, and create difficulties for LCC operations - Inadequate capacity and single point of failure for IPC operations means <ul style="list-style-type: none"> - Service objectives not achieved/service not provided. - Increased outbreaks in vulnerable settings increasing potential for individual harm. <ul style="list-style-type: none"> - Pressure on sole member of staff to provide an unreasonable level of cover for one person - Reputational damage to the authority if outbreaks poorly managed - Reduced ability to 'Live with Covid', recover, or respond quickly to contain future outbreaks - Potential serious impact on health and wellbeing of whole population, particularly those most vulnerable - Reputational damage to the authority if outbreaks poorly managed - If covid secondary impacts activities persist without associated funding from Treasury to support this will create significant budget pressures. - Static or widening health inequalities - Needs increase over the longer term as a result of secondary impacts requiring increased (and sustained) resource and budget to tackle 	<ul style="list-style-type: none"> - Continued monitoring of covid data and national landscape - Monitoring of at risk health areas to determine level of future need - Consultants appointed to lead on health inequalities and system wide engagement and health protection, and covid response / recovery - Health Protection team / function created within the division with a focus on supporting settings with infection prevention control processes and managing incidents as they occur nationally and across the city <ul style="list-style-type: none"> - Forward planning of recruitment and mitigation of impacts of gap in IPC provision - Service objectives set within context of limited capacity - Close relationship with social care teams to share capacity burden where appropriate - Training activities being built in to existing service to increase skills and knowledge of social care and care home staff - Sustained messaging reiterating the continued importance of following the national guidance to increase awareness - Horizon scanning and forward planning to intelligently balance potential resource pressures and safeguard agility in the event of a call to action against current needs and financial state - Ongoing monitoring particularly via governance mechanisms such as LLR Health & Wellbeing Partnership and City Health and Wellbeing Board. 	5	3	15	Treat	<ul style="list-style-type: none"> - Continue with existing controls - Increase capacity of HP team to enable more robust resilient response to current and emerging issues - Ongoing assessment of priority areas to continually determine needs and enable a timely data driven response - Continued close monitoring of outbreak data - Continued engagement with settings in the city to maintain standards and encourage continual improvement. Communications to be undertaken with all settings to signpost gap in provision and advice and guidance on where to go to for support if required. - Community wellbeing and vaccine champion programmes created and currently embedding to promote education and awareness of both covid and general health information - Service evaluations over time to inform discussions with partner teams. - Assess options to increase capacity. 	4	3	12		Rob Howard	Review by 19 March 2025		