Risk Register Owner: Andy Keeling, COO

Nisk Register Owner: Andy Reening, 000										
What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex me	k Sc with cistir asu (See corin fable	ng res	Further management actions/controls required	Sc f c	Target ore with urther ontrols e Scorin Γable)	Risk Owner	Review Date
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agenda. Risks associated with large programme of change in challenging financial context.	<ul> <li>Social Care</li> <li>Failure against national commitments on integration</li> <li>Services are not aligned</li> <li>Financial risk</li> <li>Conflict between priorities of organisations</li> <li>Transformation programme targets are not met</li> </ul>	<ul> <li>High visibility at partnership forums</li> <li>Support to frontline staff to maintain operational relationship management</li> <li>Communication strategy for transformation in context of integration includes partners.</li> </ul>	4	4	16	<ul> <li>Establish clear partnership arrangement to agree and deliver Integrated Care in Leicester</li> <li>Maximise Better Care Fund (BCF) opportunity.</li> </ul>	3	3 g		31.07.2017 ongoing
arrangement; integration and	<ul> <li>ASC overspends</li> <li>Insufficient resources to meet</li> </ul>	<ul> <li>Robust mechanisms (such as Resource Allocation System) to ensure resources matched to eligible needs to protect funding</li> <li>Budget monitoring</li> <li>Demand monitoring</li> <li>Use of Better Care Fund (BCF) programme to plan for new funding arrangements and requirements.</li> </ul>	3	5	15	<ul> <li>Further work on BCF to protect social care services and promote efficiencies across the Health &amp;Social Care system</li> <li>Work to review packages of care to maximise resources for those at greatest need</li> <li>Delivery plan now in place</li> <li>to be progressed over 16/17 Maximise income and debt recovery through work with operational finance / legal</li> </ul>		3 9		31.07.2017 Ongoing

Risk Register Owner: Andy Keeling, COO

	Register Owner. Andy R											
What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex me	with kisti easu (See corii	h ing ıres e ng	Further management actions/controls required	Sco fu cc	Targe ore v urthe ontro e Sco Fable	vith er ols oring		Risk Owner	Review Date
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3. Care Services & Commissioning (ASC) - Failure to carry out effective statutory consultation will result in financial and reputational damage to the council.		<ul> <li>Consultations being run as a dedicated project overseen by a senior manager with some temporary additional resource</li> <li>Ensure time is built into each review, development of all strategies etc. to allow for consultation.</li> </ul>	5	4	20	<ul> <li>Stakeholder engagement strategy in place and we always seek advice from legal services and corporate consultation team</li> <li>Legal services sign off all consultation materials and agree the approach and methodology</li> <li>Officers to seek guidance from the corporate consultation team when</li> </ul>	4	3		Pot Multi £M On going Judicial review found in favour of Leicester City Council.	Tracie Rees	31.07.2017 ongoing
	reputational)	- High level Audit processes in places via Adult Social Care contracts and assurance team (This is in addition to Care Quality Commission inspections)	5	4			5	3	15		Tracie Rees	31.07.2017 Ongoing
5. Care Services & Commissioning (ASC) - Implementation of the Sustainability and Transformation Plan (STP)		- An LLR Programme Board has been established that includes health and social care chief officers	5	4		- An LLR Programme Board has been established that includes health and social care chief officers		3	9		Tracie Rees	01.01.2019

Risk Register Owner: Andy Keeling, COO

	Register Owner: Andy R											
Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e: me	ik So with xisti easu (See	n ng ires	Further management actions/controls required	Sco fi cc	urth ontr	with ner ols		Risk Owner	Review Date
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6. Care Services & Commissioning (ASC) - Review of Residential Care; Financial risk - largest area of spend and danger of inappropriate models of care.	<ul> <li>Continued escalation of spend</li> <li>Inappropriate placements</li> </ul>	- The project is overseen by the ASC Programme Board	4	4	16	- Robust governance through project board, Commissioning Board and Lead Member Briefing	3	3		•	Tracie Rees	31.07.2017 Ongoing
7. Care Services & Commissioning (ASC) - Extra Care and Supported Living Developments; Impact of the loss of exemption from the Local Housing Allowance (LHA) for this type of provision.	- Inability to develop extra care and supported housing as the market unable to make sure developments viable as a result of this exemption.	<ul> <li>Awaiting government announcement.</li> <li>Discussion with the market</li> </ul>	4	4		- To explore options to develop options not reliant on the LHA cap	4	3		Loss of capital funds for ASC developments	Tracie Rees	31.07.2017
8. Care Services & Commissioning (ASC) Non compliance with our duties under the Equalities Act; Failure to adequately identify and address (where possible) equality impacts of proposed actions.	5 5 <i>j</i>	<ul> <li>Equality impact assessments (EIA) are built into service reviews, strategy developments and decision making which help to identify equality impacts and actions to be taken.</li> </ul>	5	3	15	<ul> <li>Ensure all staff are fully aware of when to use EIA's and build this into their routine work (when necessary)</li> <li>Training to be offered through Better Care Together.</li> </ul>	5	2	10	Pot Multi £M	Tracie Rees	31.07.2017 ongoing

RISK	Register Owner: Andy K					Risks as at: 30/04	/ 1 /		 	
Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e mi	with existi easu (See Scori	h ing ures e ing	Further management actions/controls required	Sco f co (Seo	Carget ore wit urther ontrols e Scorii Γable)	Risk Owner	Review Date
9. Care Services & Commissioning (ASC) Provision		~ Agreed with Leadership to change the prioritisation system with a view to reducing	1 Impact	Lik	Risk	~ Adhere to prioritisation system	1 Impact	Likelihood 2 2 2	Tracie Rees	31.07.2017 ongoing
		<ul> <li>a view to reducing the number of people not seen at least once</li> <li>a BIAs are fully staffed</li> <li>a Employing services of a barrister</li> </ul>				~ Monitor and review			Rees	Ungoing

Risk Register Owner: Andy Keeling, COO

	Register Owner. Andy R					1\13k3 a3 at: 30/04/	_				
Risk What is the issue: <i>what is the root cause/</i>	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e>	k Sc with cistii easu	n ng	Further management actions/controls required	Sco f	Targe ore w urthe ontrol	th	Risk Owner	Review Date
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			Impact	Likelihood	Risk		Impact	Likelihood	KISK		
10. Tourism Culture and Arts and Investment - Museums - Loss, damage or destruction of council assets. 2016 : Specifically I) general security measures and ii) specifically the problem of mould at Euston St Store damaging precious collections. Both have major scope to cause reputational damage.	damage - Risk of	Strategy for dealing with Euston St store immediate issues now being implemented. Independent review pf security measures been undertaken	4	4		Longer term solution for Euston St still required once urgent actions have been carried out. Implementation of security review recommendations needs to be done including embedding new behaviours throughout staff teams.		4	16 Some costs yet to be established but immediate actions require £0.5m	Mike Dalzell	31.07.2017 ongoing

#### Risk Register Owner: Andy Keeling, COO

	Risk Register Owner. Andy Reeling, OOC					113K3 a5 at. 30/04/					
Risk What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and	Existing actions/controls		sk So with xisti	า	Further management actions/controls required	Sco	arget bre witl urther	Cost	Risk Owner	Review Date
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problem – what could go wrong			S	(See corir Table	ng e)		`	e Scorin Fable)	9		
			Impact	Likelihood	Risk		Impact	Likelihood Risk			
11. Housing - Impact of Welfare Reform on Housing Rents Account (HRA) rental income collection and supported housing. Universal Credit (UC) is to be fully implemented in 2022. Implications of the Housing and Planning Act - Pay to stay, flexible tenancies, sale of high value assets	monthly in arrears. They will have to pay their FULL rent out of this. The biggest challenge to the HRA will be to collect the full rent from those working age claimants whose housing costs are no longer paid directly to the Landlord (LCC) as they are now. - Higher numbers of tenants in rent arrears leading to loss of rental income will adversely affect the HRA income. - Could lead to greater number of evictions. - Further welfare cuts in 2015/16.	<ul> <li>On-going promotion of Clockwise accounts with tenants.</li> <li>Focus STAR team support on those affected.</li> <li>Maximise the number of tenants claiming DHP for bedroom tax affected cases.</li> <li>Identify tenants who are over-occupying in order to help with down-sizing.</li> <li>Promotion/awareness to tenants of Discretionary Housing Payments (DHP).</li> <li>Mandatory direct debits or Clockwise accounts for New tenants has been implemented.</li> <li>Income Management team strengthened.</li> <li>Amended Allocations policy to assist downsizing</li> <li>Introduced pre-tenancy determinations interviews to collate financial information prior to tenancy sign up. This is a risk mitigation exercise to help identify tenants that require extra help to manage their finances /budget</li> </ul>	4	4	16	<ul> <li>Development of Northgate's IT system to support paperless direct debits.</li> <li>Smarter ways of working being developed including self serve, use of QR scanning and mobile technology to help mitigate risk to reduction in rent collection due to welfare cuts.</li> <li>Project Planned and resourced approach to communications, effective policy and procedure review and update to meet the needs of the Welfare reform changes and those subject to them.</li> <li>Further work required at 19.01.17 After all service improvements mentioned above in place to maximise</li> </ul>		3 12	2 Additional cost of Northgate is a combined divisional cost and not identifiable singularly	Chris Burgin	31.07.2017 ongoing

Risk Register Owner: Andy Keeling, COO

What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex me So	k Sc with istir asu (See corin	ng res	Further management actions/controls required	Sc f c (Se	Farget ore with urther ontrols e Scorin Table)		Risk Owner	Review Date
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<b>12. Housing -</b> Risk of Legal challenge, liability and reputational consequence if properties are not adequately maintained. Greater financial investment needed in the future. Rent reduction of 1% per annum for next 4 years will threaten budget for maintenance.	<ul> <li>Poor living conditions</li> <li>H&amp;S risks to tenants</li> <li>properties falling into disrepair</li> <li>Reputational risk</li> </ul>	<ul> <li>On-going capital investment (25 year strategy and planned maintenance programmes)</li> <li>On-going day to day responsive repairs service.</li> <li>Minimum standard for property re-letting.</li> <li>In house Quality Control team.</li> <li>Policies and procedures in place to ensure we continue to be compliant with legislation e.g. for fire safety, water hygiene, asbestos removal</li> <li>Continue to review more effective ways of maintaining the stock.</li> </ul>	5	3		- Identification of fixed costs required to ensure compliance with legislation and to ensure these funding is available for these is future budgets	5	2 10	At current rates we need a minimum spend of £13m to ensure ongoing compliance with legislation.	Chris Burgin	31.07.2017

Risk Register Owner: Andy Keeling, COO

Risk Register Owner. Andy Reening, COO						RISKS as at: 30/04/				 	
Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e mi	sk So with xistine easu (See Scorin	n ng ires e ng	Further management actions/controls required	Sco fu cc	urth ontro	with er ols oring	Risk Owner	Review Date
			Impact	Likelihood	Risk		Impact	Likelihood	Risk		
<ul> <li>13. Housing -Providing thriving, safe communities - Impact of welfare reform on supported housing will mean less income to the general fund. Also affects adults social care support to sheltered housing.</li> <li>Received notification that the 1% rent reduction will be applied to hostels and supported housing.</li> </ul>	fund. Will affect all new tenancies after 2016 Less income to provide services at hostels and supported housing	Housing Transformation Programme Phase 3 set up to deliver HRA and Housing GF savings required this includes the agreed action to decommission internal Supported Housing provision and to service review Hostels landlord and support functions next year. This work will run alongside a full review of the Homelessness strategy that will also feed in to meeting this risk				Executive decision agreed to reduce accommodation based support by the 60 supported housing units.	4	3			31.07.2017
<b>14. Estates &amp; Building Services</b> - Lift Condition Assessment - Asset Capture, Lack of forward planning in terms of planned maintenance and programming change of assets	<ul> <li>ad hoc capital required to make good</li> <li>less reliable assets and more entrapments.</li> </ul>	<ul> <li>Formatting a proposed capital programme of works, based on engineers submissions (Zurich and LES) will be ready in December 2015</li> <li>Lack of internal staffing resource and excessive external consultative cost are prohibiting progress</li> </ul>	3	5		Lift surveys to be undertaken prior to March 2017	2	5		Matt Wallace	31.07.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e) me	k Sc with kistin easur (See	ng res	Further management actions/controls required	Sc f c	urth ontr	with er		Risk Owner	Review Date
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			Impact	Likelihood	Risk		Impact	Likelihood	Risk			
<ul> <li>15. Estates &amp; Building Services</li> <li>Delay and compensation event claims are received leading to extensive costs.</li> </ul>	<ul> <li>Contingency held to address unforeseen issues may be overspent</li> </ul>	<ul> <li>All claims are monitored and are challenged using internal and external resources</li> <li>Continued dialogue with the Finance Team to monitor the financial position.</li> </ul>	5	4	20	<ul> <li>Claims have to date been contained within budget with 1 final claim to resolve</li> </ul>	4	3		0,	Matt Wallace	31.07.2017
<b>16. Estates &amp; Building Services</b> Schools Capital - Raising educational achievement. Reduction in capital investment in schools with ageing school stock and deteriorating condition	<ul> <li>Potential to not meet statutory building requirements.</li> <li>Reputational damage to the council</li> </ul>	- Develop long term strategy across both the Primary and retained Secondary School estate	4	4		<ul> <li>Condition surveys undertaken and a 1 year programme of planned capital maintenance has been formulated, CMB final approval received Sept 2016. The next phases of the proposed capital maintenance programme will be reviewed on an annual basis in accordance with priority/need allowing for flexibility within the programme.</li> <li>CCMP2 to be submitted to CM in summer 2017</li> </ul>	3	4	12	Staff time	Matt Wallace	31.07.2017 review monthly
<b>17. Estates &amp; Building Services</b> - Loss of use of Asset Unsafe asbestos particles found		<ul> <li>Findings of asbestos action plan being implemented.</li> <li>Asbestos monitoring returns to be reported to DivMT and Heads of Property quarterly and to CMT if cause for concern.</li> <li>All buildings constructed before 2000 have an asbestos register</li> </ul>	5	3		<ol> <li>The centralisation of property management functions will enable EBS to mitigate risk identified on management plans</li> <li>Ensure all buildings have an asbestos register</li> </ol>		3 2	6		Matt Wallace	31.07.2017

Risk Register Owner: Andy Keeling, COO

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Fail to maintain Water Hygiene					Risk		Impact	Likelihood Risk			
<sup>-</sup> ail to maintain Water Hygiene	Closure of buildings	<ul> <li>Implementation of control regime comprising ongoing regular monitoring, reports, risk assessment reviews and maintenance with allocated budgets</li> <li>Water hygiene monitoring returns to be reported to DivMT and Heads of Property Quarterly and to CMT if cause for concern</li> <li>Spend of allocated capital budget for water hygiene and production of ongoing prioritised schedule of risk reduction/removal works ongoing</li> <li>Water hygiene responsibilities in non-op estate (apart from communal areas) have been confirmed in the terms and conditions of the lease and necessary action taken.</li> </ul>				<ul> <li>Seek 100% compliance with water hygiene returns with accurate data.</li> <li>Further budget for 17/18 works to be in next Capital Bid report</li> <li>More rigorous audit of Building Responsible Officer monitoring to be undertaken</li> </ul>	3	2	5	Matt Wallace	31.07.2017
<b>18. Estates &amp; Building Services</b> -BSFSnag / Defect Programme - Schools currently have outstanding construction matters which prohibit the issuing of completion certificates	<ul> <li>LCC exposed to risk of system failure or litigation</li> <li>Delay in programme delivery</li> </ul>	Construction phase complete. The programme in now dealing closure of outstanding contractual snag, defects and claims. Internal team established split in three workstreams managed by SA. 1 - Contractual engagement on snags and defects 2 - Delivery of LCC step in actions 3 - EOT contractual claims. External resource provided by MACE to enable delivery of the programme	5	4		- Additional external support being sought via Arcadis to enable the close of contracts	4	2	3 Delay in delivery	Matt Wallace	31.07.2017

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Risk Register Owner. Andy Reening, COO						RISKS as al: 30/04/					
Risk What is the issue: <i>what is the root cause/</i>	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e	sk So with xisti easu	h ng	Further management actions/controls required	Sco fi	Target ore wit urther ontrols		Risk Owner	Review Date
problem – what could go wrong			s	(See corii Table	ng			e Scorii Table)			
			Impact	Likelihood	Risk		Impact	Likelihood			
<ul> <li>19. Neighbourhood and Environmental Services - LACK OF ADEQUATE RESOURCE CAPACITY</li> <li>Increase in the demand led services, along with the reduction in head count could mean that there are insufficient resources to deliver the required service levels.</li> <li>During times of change, staff are not always aware of the changes being made, such as the recent relocation requirements, needs</li> </ul>	unsustainable. - As demand-led services increase, workload and public expectations increase.	<ul> <li>Existing prioritisation arrangements are in place.</li> <li>Policies and procedures are in place.</li> <li>Processes are in place.</li> <li>Regular briefings and PDRs</li> </ul>	4	4	16	<ul> <li>Review of succession planning is to be conducted.</li> <li>Need to assess the service demand against the resource availability to understand impacts and generate action plans.</li> <li>Develop further prioritisation arrangements.</li> <li>Continually assess through performance appraisals and individuals one-to-ones.</li> </ul>	3	4 1	2	John Leach	31.07.2017
in building, parking, licencing,	reduce (e.g. Building Regs) due to the economic climate. - Targets remain the same or increase, against income sources	<ul> <li>Budgets are in place and alternative savings option appraisals are performed and saving plans are implemented.</li> <li>Policies and procedures are in place.</li> <li>Adhoc business development arrangements are in place.</li> </ul>	3	5	15	<ul> <li>Need to review income targets for recurring and 'one off' income with finance to resolve on-going issues.</li> <li>Enhance the business development resources/opportunity.</li> <li>Budget strategy review.</li> <li>Service review/impacts.</li> <li>Further marketing and promotional projects.</li> </ul>	3	4 1	2 N/A	John Leach	31.07.2017 Ongoing

Risk Register Owner: Andy Keeling, COO

	Register Owner. Andy R		-			113K3 a5 at. 50/04/	_					
What is the issue: what is the root cause/	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e	with xistin easu	ng res	Further management actions/controls required	Sc f co	Targe ore v urthe ontro	vith er ols	Cost	Risk Owner	Review Date
problem – what could go wrong				(See Scorir Table	ng			e Sco Table	)			
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RESOURCE & CAPACITY - INCREASED WORKFORCE AGE PROFILE Specialist skills and knowledge within the team may be lost due to future retirement programmes. Furthermore, national surveys have identified a lack of aspiration in individuals (younger	<ul> <li>Teams already at a minimum number and extra workloads may be unsustainable.</li> <li>Likelihood of key person dependency as teams reduce further (fewer people in key roles).</li> <li>Potential non-compliance with legislation/regulation.</li> <li>Potential stress-related absence/claims.</li> <li>Quality of service delivery may be affected.</li> </ul>	<ul> <li>"Step up" - work experience utilise.</li> <li>Graduate project officers.</li> <li>Training &amp; Mentoring</li> <li>Knowledge sharing</li> <li>Apprenticeship Levy</li> </ul>	3	5	15	<ul> <li>Succession planning review is required.</li> <li>Continue to enhance and develop the apprenticeship scheme.</li> <li>Commence positive promotion of the work/career in this area.</li> <li>Seek funding for apprenticeship.</li> <li>Ensure knowledge sharing takes place.</li> <li>Training/ Mentoring/ Structuring.</li> </ul>	3	4	12	N/A	John Leach	31.07.2017 Ongoing
22. Neighbourhood and Environmental Services ASSET CONDITION Condition of buildings creating risks to service delivery and individuals (in certain circumstances)	council - Reputational damage to LCC	<ul> <li>On going review and inspection of building in-house and is liaison with Property services</li> <li>Building conditional surveys reviewed under the Transforming Neighbourhood Services Programme (TNS)</li> </ul>		3		<ul> <li>Building reviewed under TNS</li> <li>Condition surveys commissioned and review to address key issues</li> </ul>	3	3	9		John Leach	31.07.2017 Ongoing
STRATEGIC AREA - Corpor	rate Resources and Support											1

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: <i>what is the root cause/</i>	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e	k Sc with xistii easu	n ng	Further management actions/controls required	Sc f	arget ore with urther ontrols	Cost	Risk Owner	Review Date
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			Impact	Likelihood	Risk		Impact	Likelihood Risk			
23. Delivery, Communications and Political Governance - UNPLANNED ELECTION EVENT The service may struggle to manage a number of unplanned, additional elections, as well as a number of different type of elections e.g. House of Lords, Referendums etc.	- Could lead to increased expectations on the existing trained core team, who hold relevant and detailed knowledge.	<ul> <li>Returning officer and nominated deputies are in place.</li> <li>Insurance is in place.</li> <li>Many elections can be planned and have set dates.</li> <li>May 2015 elections enabled newer members of the core team to develop further skills and experience in specific aspects of the elections process</li> <li>Electoral Commission guidance gives detailed support in the planning and management of each specific type of elections</li> </ul>	4	4	16	<ul> <li>Develop skills and expertise across the wider electoral services team.</li> <li>Ensure that there is a robust planning support structure in place. Develop a potential 'business continuity plan' to build resilience and stability.</li> <li>Use external or peer support where feasible e.g. from other local authorities.</li> <li>Consider training/up- skilling a pool of contingency staff.</li> <li>Review further as a management team. (Actions required to maintain risk score).</li> </ul>	4	4 10		Miranda Cannon	31.07.2017 Ongoing

Risk Register Owner: Andy Keeling, COO

	Consequence effect: what would Existing actions/controls			_		113K3 d3 d1. 50/04/	_		_		1
Risk What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and	Existing actions/controls	e	witł xisti	h ng	Further management actions/controls required	Sc f	Farget ore wit urther		Risk Owner	Review Date
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problem – what could go wrong			s	(See Scori Table	ng		•	e Scorir Table)	g		
			Impact	Likelihood	Risk		Impact	Likelihood Bisk			
24. Delivery, Communications and Political Governance - LEGAL CHALLENGE Increased legal challenges may heighten the need to ensure that processes are effective, efficient, communicated in a uniform manner and that managers and staff follow explicit guidance. Consultation approach and EIAs are increasingly targeted areas for legal challenge.	uniform manner, not consistently worded, communicated or the tone are appropriate), leading to legal challenge. - Equalities Impact Assessments	<ul> <li>Equality Impact Assessments (EIAs) are performed to help ensure the Council meets the Public Sector Equality Duty (PSED).</li> <li>On-going reviews of outcomes of other PSED challenges inform our approach to demonstrating compliance with our PSED, and lessons from these shared / communicated and used to revise our approach where appropriate.</li> <li>Presentation on Judicial Reviews/legal challenges posted on EIA Interface page.</li> <li>Processes and procedures in place.</li> <li>Staff are aware of duties, responsibilities and relevant considerations required to demonstrate compliance with PSED.</li> <li>Expert support e.g. HR, equalities, consultation, CPMO in place with supporting guidance. Equalities e-learning module developed and being rolled out.</li> <li>EIA process (what needs to be considered when) and EIA templates regularly reviewed and revised</li> </ul>	4	4	16	<ul> <li>Continue to review external practice e.g. from other Local Authorities and partners, which have been deemed as best practice and implement locally as appropriate.</li> <li>Ensure the correct resources, with the relevant skills and experience are allocated to roles.</li> <li>Ensure HR support is available.</li> <li>Complete current Equality and Diversity Strategy and refresh</li> <li>Review current consultation guidance for staff</li> </ul>		3 1	2	Miranda Cannon	31.07.2017 Ongoing

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex me	k Sc with distin asur (See corin able)	ng res	Further management actions/controls required	Sc f co (Se	Farget ore wit urther ontrols e Scori Table)		Risk Owner	Review Date
			Impact	Likelihood	Risk		Impact	Likelihood			
24. Delivery, Communications and Political Governance - LEGAL CHALLENGE - Continued	<ul> <li>Unrealistic public/political expectations.</li> <li>Procurement process may be challenged.</li> <li>Legal challenges focus on process rather than content.</li> </ul>	<ul> <li>Equality checklist for different stages of capital projects being developed so that equalities considerations at each stage are recorded and signed off</li> <li>Council EIA template being used for Health &amp; Well Being Board reports and also for Better Care Together reports, standardising our approach with partners particularly in Health sector.</li> <li>Community engagement fund developed to support work with the VCS in support of meeting our PSED</li> <li>Consultation training with a focus on the legal risks recently undertaken by the Comms and Equalities Teams</li> <li>Work underway to refresh the Equality Strategy</li> </ul>									
<b>25. Finance - Financial</b> <b>challenges -</b> the Council fails to respond adequately to the cuts in public sector funding over the coming 4 - 5 years.	<ul> <li>Council is placed in severe financial crisis</li> <li>Reputational damage to the Council and substantial crisis job losses</li> <li>If the process is not properly managed, the Council will have little money for anything but statutory 'demand led services'.</li> </ul>	-Budget balanced in 17/18. -Further work required to balance the medium term, particularly driving the spending review programme. - £8m service transformation fund.	5	4		Heavy involvement of City Mayor in ensuring spending review programme delivers.	5	2	0	Alison Greenhill	31.03.2018 and every year end.

Risk Register Owner: Andy Keeling, COO

Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e) me	with xisti	h ing ires		Sc f c	Targe ore w urthe ontro e Sco Table	vith er ols ring	Cost	Risk Owner	Review Date
				Likelihood			Impact	Likelihood	Risk			
26. Finance - Information and Customer Access The Council is at constant threat from malicious hacking or human error.	<ul> <li>Loss of data or information</li> <li>Loss of access to systems and services</li> <li>Council-wide impact</li> <li>Potential fines, litigation, penalties etc.</li> <li>Impact on data subjects if sensitive information misused</li> <li>Reputation damage</li> </ul>	<ul> <li>Ensure adequate technology is in place to protect the authority -AlienVault Logging procured.</li> <li>Raise staff awareness</li> <li>Testing procedures</li> <li>Applications kept up to date</li> <li>Processes in place</li> <li>Likelihood of critical systems being affected is low</li> <li>IT security manager post filled</li> <li>PCI scans</li> <li>Penetration testing etc.</li> <li>PSN compliance</li> </ul>	5	3		<ul> <li>Targeted Phishing</li> <li>Promote Human Firewall awareness</li> <li>Implement further defences</li> <li>Consider draconian response to threats</li> </ul>	2	5	10		Alison Greenhill	30.06.2017 Ongoing

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/	<b>Consequence /effect:</b> what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e	witl xisti	h	Further management actions/controls required	Sco fi	arget ore with urther ontrols	Cost	Risk Owner	Review Date
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<b>27. Legal</b> - Key areas of risk are: flexible working practices which expose data to new risks, inappropriate disclosure of personal data, insecure and excessive information sharing externally and internally, lack of universal participation in Information Governance training, lack of awareness of the compliance and enabling role of Information Governance and failure to comply with the Regulation of Investigatory Powers Act 2000. (Also see corresponding risks around Data Protection and Freedom of Information compliance.)	<ul> <li>Data may be lost or shared inappropriately.</li> <li>Potential legal challenge.</li> <li>Breaches in regulation/legislation, which may incur fines, reputational damage and negative media coverage.</li> <li>Local breaches are not reported to the Information Governance Team until a compliant arises.</li> <li>There may be a number of unreported information governance breaches which are unreported and being managed at a local level.</li> <li>Subject Access Requests: this area has failed in compliance in 2013, and could fail again in the future.</li> </ul>	<ul> <li>Policies and procedures in place e.g. security, retention and disposal.</li> <li>Devices are encrypted.</li> <li>Staff briefed on Information Governance (IG) compliance and asset mgmnt.</li> <li>Improvement plan identifies necessary procedural updates etc.</li> <li>Good liaison with Information Commissioners Office (ICO) and increased visibility and compliance.</li> <li>Regular reports to Directors on the importance of IG compliance.</li> <li>Staff are required to complete IG training on induction and all staff were asked to complete training in 2013.</li> <li>Leicester City Council submissions to the NHS Information Governance Toolkit provide a health check on IG policies and systems.</li> </ul>	4	5		<ul> <li>Requirement for all to complete annual IG awareness training should be enforced.</li> <li>Introduce a self-service IG health check for Managers to check their team's compliance and identify their own improvement actions.</li> <li>IG issues to be addressed more consistently in contracts outside IT Procurement (where this is systematic).</li> <li>Need for services facing high staff turnover to prioritise Data Protection and security training to maintain capability levels. NB: in a changing context, controls need to evolve and be constantly refreshed to maintain the risk exposure at the current level and prevent it from increasing. Therefore, no reduction in risk exposure</li> </ul>		3 12		Kamal Adatia	31.06.2017
27. Legal - Continued		<ul> <li>Self service Information Governance</li> <li>Healthcheck tool for managers has been drafted. Next stage is testing.</li> <li>(NB staff turnover and high rates of change are increasing the Council's exposure to risk here)</li> </ul>									

# Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/	<b>Consequence /effect:</b> <i>what would</i> <i>occur as a result, how much of a</i> <i>problem would it be ?, to whom and</i> <i>why</i>	Existing actions/controls	е	with actions/controls required Second		Sco f	arget ore with urther ontrols	Cost	Risk Owner	Review Date	
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STRATEGIC AREA - Educa	tion and Children's Services										
28. Children's Social Care and Early Help- Improvement - Changing for the better LCCIB Improvement Plan -Budget Pressures on the divisional budget	be reduced and affect safeguarding of children, and potentially have an adverse	<ul> <li>Deliver savings as part of the reviews taking place across LCC, including Education &amp; Children's with clear explanations of the potential risks and impact</li> <li>Deliver savings to meet the budget pressure within the CYPF Division</li> </ul>	5	4	4 20	- Identify further projects to ensure delivery of savings, assess impact and agree any further mitigating factors	4	4 16		Caroline Tote	30.06.2017
improvement work	<ul> <li>Workforce continues to be in flux and subject to high turnover, which impairs consistent service and increases risks for vulnerable children and young people.</li> <li>Insufficient funding in local authority and partner services to deliver improvement work and maintain level of Early Help and statutory services.</li> </ul>	<ul> <li>Priorities for short and long term funding of improvement work are being considered by senior managers and elected members.</li> <li>Proposed savings in Early Help services are currently being developed in consideration of Leicester City Council 2017- 2018 budget.</li> <li>Impact on services to Children young people and families is being assessed as part of savings proposals. Pressures on the Out of Authority placement and increase in LAC numbers beyond allocated budget.</li> <li>Advanced Practitioners appointed.</li> <li>Single Assessment Team implemented June 2016.</li> </ul>	5		4 20	other identified improvement areas to be discussed. - Further areas of the Resource Plan under consideration		4 16		Tote	30.06.2017
compensatory savings have to be made in other services	and higher numbers of children and families escalating to higher	<ul> <li>Targeted work to safely and appropriately reduce the numbers of children in care and monitor the numbers of children requiring high cost externally commissioned placements</li> <li>Further work to be carried out to consider future commissioning arrangements for young people who are victims of CSE.</li> </ul>	5	4	4 20	- Examination of existing controls, including social work practice, decision making, work to address young people on the 'edge of care', placement commissioning and exits from care.	4	4 16		Caroline Tote	30.06.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: <i>what is the root cause/</i>	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e	k So with cisti asu	า ng			-		arget ore with urther ontrols	Cost	Risk Owner	Review Date
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Cost of agency social workers, including staffing over capacity, and interim staff working on improvements results in overspend, compensatory savings have to be made in other services	workers; and additional staff to	<ul> <li>Workforce Strategy sets out plans to attract permanent staff to Leicester and retain incoming and existing staff. Strategy includes progression and workforce development</li> <li>Regular monitoring of staff appointments to agency posts.</li> </ul>	5	4	20	<ul> <li>Continued work on recruitment, retention and induction</li> <li>Focus on recruitment of permanent Team ManagersWFD Strategy work has slowed down, needs to be picked up</li> </ul>	4	4 16		Caroline Tote	30.06.2017		
Permanent staff absence (sick leave, maternity leave, disciplinary action) results in higher costs because of the need to pay agency worker	- Regular monitoring of staff performance, and absence.	- Continuing to take a robust approach to managing staff absence and reduce the amount of time that is lost due to sickness.	4	4	16	- Children in Need (CIN) Attendance management- briefings for all CIN managers at induction and dedicated HR support put in place to support management of absence management	4	4 16		Caroline Tote	30.06.2017		
Staff leave, resulting in the need to fill posts with agency workers	<ul> <li>Additional expenditure on agency staff</li> <li>Loss of experience and continuity.</li> </ul>	<ul> <li>Workforce Strategy developed and being implemented</li> <li>Use of agency staff to fill vacant positions while permanent recruitment takes place</li> <li>National and regional problem of availability of experienced social workers and Team Managers is impacting on LCC.</li> </ul>	4	4		<ul> <li>Ensure progression in place for experienced workers following appointment of new Team Managers</li> <li>Individual discussions with staff wanting to progress, or dissuade them from leaving.</li> </ul>	4	4 16		Caroline Tote	30.06.2017		

Risk Register Owner: Andy Keeling, COO

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<b>29. Children's Social Care and Early Help -</b> Safeguarding Publication of Serious Case Reviews for cases that occurred in 2013/14	- Impact on staff morale, engagement with vulnerable families, partner confidence and public reputation	<ul> <li>Two Serious Case Reviews have now been published with clear arrangements in relation to media engagement about the messages to be released. Themes and actions arising from pre-publication messages already included in</li> <li>Improvement Plan, or being communicated separately to staff. Composite review in relation to three babies has not yet been published due to ongoing police investigations, media planning meeting taking place at the end of August. A further SCR has also been commissioned and agency Independent Management Review's</li> </ul>				- Work through Local Safeguarding Children's Board groups to disseminate messages from the Serious Case Reviews.	5			Caroline Tote	30.09.2017
Abuse or injury to children in a range of care placements	- Children would be unsafe and have experienced significant harm while in the Council's care.	<ul> <li>Ensure maintenance of robust safer recruitment processes and Local Authority Designated Officer arrangements.</li> </ul>	5	4	20	<ul> <li>No further controls identified.</li> <li>Compile and monitor critical Young people identified as being at risk of CSE</li> </ul>	5	4 20		Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

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Staff fail to recognise and act to safeguard and mitigate the risks of significant harm to children	- No interventions where action needs to be taken, interventions that do not make enough difference to children's lives - An increased risk of significant harm, and/or an avoidable child death.	<ul> <li>Agreed improvement plan in place, being implemented and monitored, including all Ofsted recommendations</li> <li>Early Help Offer re-launched with training for staff and partners</li> <li>Thresholds documents re-launch</li> <li>Weekly CIN Performance meetings to look at key performance areas and carry out spot checks on identified areas of work</li> <li>Team Manager training to reinforce management oversight</li> <li>Distribution of agreed Service Standards across the Children's Workforce</li> <li>External audit of Ofsted cases</li> <li>Workforce Development Programme with aim of attracting workers to Leicester City, retention programme, growing own social workers and stabilising workforce</li> <li>Revised supervision and case recording policies</li> <li>External auditors feedback on cases with recommendations for improvement</li> <li>Feedback to CIN Service about outcomes of Ofsted support visit with actions to address.</li> <li>Case progression manager appointed to track outcomes of legal planning meetings. This will ensure that there is a timely response to decision making and to ensure drift and delay in care planning is prevented.</li> <li>Principal Social Worker appointed April</li> </ul>	3	5		Further implementation of the Leicester City Children's improvement plan including: - Quality Assurance work by external auditors used to drive up practice and management standards, and enable managers to carry out realistic, robust audits - Outcomes of, and learning from, Serious Case Reviews to be communicated to staff, including recommendations on practice and management work with partner organisations to ensure application of the LLR thresholds, reduce inappropriate contacts and referrals and ensure sufficient detail is given to enable robust decision making.		4 12		Caroline Tote	30.09.2017

# Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/ problem – what could go wrong	occur as a result, how much of a problem would it be ?, to whom and		e: me	sk So with xisti easu (See Scorin Table	h ing ires e ng	Further management actions/controls required	Sco f co (Seo	Farget ore wit urther ontrols e Scorir Table)		Risk Owner	Review Date
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Practitioners and managers do not work to required standards	to children, young people and their families - Increased risk of significant harm	<ul> <li>Weekly performance meetings in CIN</li> <li>Quality Assurance work by external auditors in conjunction with social workers and team managers, with immediate corrective action for cases identified.</li> <li>Reports produced on 'Practice Analysis with results of the Quality Assurance work.</li> <li>Workforce Development Programme in place</li> <li>Briefings and rollout implementation of the Service Standards, Supervision Policy and Guidance and the Performance and Quality Assurance Framework</li> <li>External auditors feedback on cases with recs for improvement</li> <li>Induction programme in place</li> </ul>		5		<ul> <li>Implementation of the improvement plan including:</li> <li>Use established frontline (practitioner) Group as 'Champions'</li> <li>Practice and performance quarterly workshops for all staff</li> <li>Continued implementation of the Workforce Improvement Plan including recruitment, retention and induction of agency and permanent staff and action to reduce imbalance of agency Team Managers to permanent Team Managers</li> <li>Equipping social workers with appropriate mobile</li> </ul>		4 1	2	Caroline Tote	30.09.2017 ongoing
Abuse or injury to children and young people in the City.	<ul> <li>Children would be unsafe living with their parents. Where known to Children's Social Care or Early Help, services would not have protected them.</li> <li>Where a child suffered significant harm or death, there could be a Serious Case Review, with outcomes published nationally.</li> </ul>	<ul> <li>Recruitment of staff. Staff training</li> <li>Supervision and management oversight.</li> </ul>	3	5	15		3	4 1	2	Caroline Tote	30.09.2017 and ongoing

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	as a result, how much of a m would it be ?, to whom and me So T		k Sc with kistin easu (See corir Fable	ng res	Further management actions/controls required	Sco fu cc	arget ore with urther ontrols Scoring Table)	Risk Owner	Review Date
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Child Sexual Exploitation: Non-recent cases of CSE where police investigation and/or victims statements demonstrate local authority involvement or culpability in failing to protect victims. Current work on CSE where local authority/partnership working have failed to protect young people from perpetrators	Reputational risk in a high profile area: - Allegations against staff or former staff - Media coverage - Claims against the Council	<ul> <li>For non recent cases</li> <li>Local authority engagement with police in non-recent investigations.</li> <li>For current work</li> <li>CSE Strategy and Action Plan in place across Leicester, Leicestershire and Rutland Leicester Safeguarding Children Board (LSCB).</li> <li>Training for local authority and partner agency staff provided through the LSCB and single agency training.</li> <li>Communications Planning.</li> <li>Liquid Logic workspace in place from July 2015.</li> <li>Problem profile (perpetrator information) being put into place by the police</li> <li>Performance Framework being established.</li> <li>Developing CSE / Missing / Trafficked Hub with Police LCC and Health</li> </ul>		5		team across Leicester, - Leicestershire and Rutland to work on CSE , Missing and Trafficked to be in place Oct 2016 - Work to ensure more robust approach		5 15	Tote	30.09.2017
Increased demand for service following the publication of the Ofsted report; or due to increasing population of the City		- Regular checks on demands for Early Help and Children's Social Care through performance information	3	5	15	<ul> <li>Continue to monitor, raise with partners through LSCB</li> <li>Examine through Children's Trust and consider multi-agency solutions</li> <li>Encouraging schools to buy in Family Support work</li> </ul>	3	5 15	Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e: me	with xistin easu (See corir	ng res	Further management actions/controls required	Sco f co (Seo	Targe ore w urthe ontro e Sco Table	vith er Is ring	Risk Owner	Review Date
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<ul> <li>30. Children's Social Care and Early Help - Workforce - Staff fail to recognise and act to safeguard and mitigate the risks of significant harm to children - Insufficient high quality workforce at practitioner and manager levels including:</li> <li>Turnover/retention of agency staff</li> <li>Poor quality agency staff</li> <li>Current Permanent staff leaving</li> <li>Difficulty in recruiting permanent staff to Service Manager, Team Manager and Social Worker posts due to pressure to perform to required standards</li> <li>Practical problems that affect day to day work</li> <li>Leicester not able to attract staff while 'inadequate'</li> </ul>	a ripple effect from CIN Teams to other teams in social care. - New agency staff struggle to pick up cases that have been through several interim social workers causes stress to new staff	<ul> <li>Retention package has been approved</li> <li>Workforce Improvement Plan in place</li> <li>Implementation of recruitment and retention aspects of the Workforce Strategy and Improvement Plan</li> <li>Health check by Liquid Logic Original Suppliers</li> <li>Contact with Other LAs successfully using Liquid Logic</li> <li>Non-compliant or poor quality agency staff asked to leave</li> <li>Capability/disciplinary action in relation to permanent staff</li> <li>Exit interviews with departing staff</li> <li>SAT implemented June 2016.</li> <li>Principal Social Worker in post April 2016.</li> </ul>	5	4		- Continued work to implement Service Standards, address key areas of staff performance through management action, follow up findings from - Performance and Quality Assurance reports	4	4	16	Caroline Tote	30.06.2017
Insufficient high quality workforce in support services resulting in key support functions not being carried out including Business Support, Liquid Logic report writing, Liquid Logic training and floor walking	Improvement Plan not carried out, or delayed due to lack of staff	<ul> <li>Continued recruitment of key staff including consideration of secondments</li> <li>Business Analysis of the critical area (CIN teams)</li> <li>Roll out of mobile technology to staff</li> </ul>	5	4		<ul> <li>Recruitment of an additional trainer for Liquid Logic, and further work to recruit report writers</li> <li>Consideration of Business Support functions in business analysis work</li> </ul>	4	4	16	Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex	with cistir	ng	Further management actions/controls required	Sco f	Target ore wi urther	ith r	Risk Owner	Review Date
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problem – what could go wrong			S 1	(See corin ſable	ig :)			e Scor Table)	-		
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31. Children's Social Care and Early Help - Liquid Logic - Liquid Logic's children's recording system does not work effectively to ensure business processes, support good practice or evidencing children are appropriately safeguarded	<ul> <li>Practitioner/manager training does not enhance system use</li> <li>Resistance among some staff hampers the use of the system</li> <li>Due to increased demand for social care requirements from the Business Application Support Team (ICT for Liquid Logic), the early help reporting roll out in September is at risk.</li> <li>Change is not embedded and the system is unable to discover where things are going wrong and progress is not being maintained</li> <li>Turnover of staff prevents effective use of the system</li> <li>Shortage of training not enabling effective use of system</li> <li>ICT support for use of system is hampered by insufficient report writers and trainers</li> <li>Inconsistent use of system leads to errors in recording and performance of system</li> </ul>	<ul> <li>Training and helpline in place</li> <li>Priority list in place for LL reports</li> <li>Contact with Other LAs successfully using Liquid Logic</li> <li>New staff undergo induction programme including Liquid Logic training.</li> <li>Implementation of V11 July 2016</li> <li>Liquid Logic User Group meet monthly</li> </ul>	5	4		Actions taken with provider: - Prioritisation and implementation identified through the Health check and for V11. - High level project plan to be developed. - Recruitment of Liquid Logic report builders and training of others in Performance team to undertake query and report building in Liquid Logic - Training Programme being developed to include CP, CIN and LAC. - Champion group being developed linked to the role of the AP (Advanced Practitioner)		4	16	Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and	Existing actions/controls		k So with kisti	h	Further management actions/controls required	Sc f	Farget ore with urther	Cost	Risk Owner	Review Date
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problem – what could go wrong			(Se Scor Tab		ng			e Scoring Table)			
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Early Help module system - partners not participating and taking on role of Lead Practitioner.	<ul> <li>Lack of confidence in Early Help Assessment (EHA)</li> <li>Partners not engaging in Liquid Logic training or using the system</li> <li>Partners not signing Information Sharing Agreement therefore information cannot be shared or partners do not take on the LP role.</li> <li>Many social workers are still not trained on EHM due to turnover of staff or not attending compulsory briefings, This has led to a lack of information in quality assurance processes and duplication of work.</li> <li>EHM report are still not accurate with no fixes due to prioritisation of social care requirements. This has led to inaccurate reporting and lack of reports to inform work e.g.) re-referrals.</li> <li>V12 upgrade still has many problems, one of them major re: step up to social care when it should be EHA, decision required 28.10.16 re: whether we should upgrade or delay but this will have implications for Professional Portal and DCS pathway, if delayed it will be Mar 17 before we can go live</li> </ul>	<ul> <li>LL User group now in place to deal with business as usual with one external partner represented on this group.</li> <li>ISA almost complete, one partner still to provide information.</li> <li>LL user group meeting on 27.10.16 to discuss issues from testing with decision made for sign off, this will be discussed with CT.</li> <li>12 week plan underway working with key partners to review front door arrangements, EH pathway and Police contacts, good progress seeing made.</li> </ul>		4		<ul> <li>Allocation of trainers and BAS report writers to the Early Help system through deployment of existing resources and temporary recruitment of additional staff Discussion at the LCCIB and the Early Help Group of the Children's Trust Board about how to increase the allocation of Lead Practitioners in partner agencies</li> <li>EHM briefings to be put on again for SW staff.</li> <li>Mtg set up with County to look at external EHA processes.</li> </ul>	4	4 16		Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

	Keeling, COO				RISKS as at: 30/04/	•••			 		
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32. Children's Social Care and Early Help - Inspections - Impact of poor outcomes from Ofsted Inspections.	families - Additional expenditure for improvement work - External scrutiny from Ofsted	<ul> <li>Ofsted inspection of Children's Social Care under the Single Inspection Framework took place in January/February 2015, report published March 2015, judgement of 'inadequate'</li> <li>Inspections and monitoring visits of Children's Residential Homes are carried out regularly and tracked through the 'Residential Improvement Plan'.</li> <li>Preparation work in place for inspection of Children's Centres.</li> <li>Ongoing monitoring visits by Ofsted in key areas of identified improvement</li> </ul>		5	20	<ul> <li>Performance and Quality</li> <li>Framework in place</li> <li>Regular monitoring of performance and quality of service</li> <li>Meet key targets set by the Improvement board</li> </ul>	4	2	8	Caroline Tote	30.09.2017
to identify and meet the needs of vulnerable young people. Extent and gearing of department budget cuts from April 17 onwards compromises operations and generates a	outcomes increases resulting in reduced life chances, subsequent high reliance on specialist high cost services and potentially death. - Poorer outcomes overall, children's plans priorities compromised, loss of education,	Project board in place chaired by Strategic Director, comprehensive project plan in place with communications plan. - Planning group in place to develop draft implementation plan to deliver against proposal if approved. - Risks are managed via a risk log which is subject to scrutiny by the project board. - Refer to separate risk management plan for Early Help Remodelling and summary pasted below		4		Analyse consultation findings as they come in to asses impact and risk and report to DCS.	4	4	16	Caroline Tote	30.09.2017

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: what is the root cause/	problem would it be ?, to whom and why (See	Further management actions/controls required	Sc 1	Targe ore v urthe ontro	/ith er	Risk Owner	Review Date				
problem – what could go wrong			S	(See corii Fable	ng		`	e Sco Table	•		
			Impact	Likelihood	Risk		Impact	Likelihood	Risk		
34. Children's Social Care and Early Help - Placements for children and young people who are looked after Inability to recruit and retain foster carers	0 0	<ul> <li>Targeting resources to focus on mainstream foster carers</li> <li>Foster carer allowances report to be considered by DMT to review payment</li> <li>Foster carer scheme for teenagers to be considered as part of an 'invest to save' bid.</li> </ul>	4	4	16	<ul> <li>Consideration of raising foster care allowances to national requirement</li> <li>Consideration of teenage fostering scheme.</li> </ul>	3	4	12	Caroline Tote	30.09.2017
nability to find sufficient suitable residential placements for children and young people with complex needs	<ul> <li>Insufficient/unsuitable residential care that does not meet children and young people's needs and leads to higher costs for the council and poor outcomes for children and young people.</li> <li>Council's statutory responsibilities as a Corporate Parent are not fulfilled</li> </ul>	<ul> <li>Management decision making. Placement</li> <li>Commissioning service.</li> <li>Implementation of a placement planning process</li> <li>for sibling groups and complex cases.</li> </ul>	4	4		<ul> <li>Proposals for invest to save for young people 'on the edge of care'</li> <li>Increased use of Wigston Lane for young people moving into independence.</li> </ul>	3	4	12		30.09.2017 and ongoing
	-	Seeking to develop school-led capacity Leicester Education Strategic Partnership (LESP) engaged and have funded a senior consultant post to help develop capacity	5	4		Develop traded capacity Further support for school- led system	5	4	20	lan Bailey	31.07.2017

Risk Register Owner: Andy Keeling, COO

	Register Owner. Andy h					NISKS as al. 30/04/			 	
Risk What is the issue: what is the root cause/ problem – what could go wrong	<b>Consequence /effect:</b> <i>what would</i> occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ez me	with are existing neasures (See Scoring Table)			Sco fi cc	Target ore with urther ontrols e Scorin Table)	Risk Owner	Review Date
			Impact	Likelihood	Risk		Impact	Likelihood Risk		
36. Learning Services - Insufficient school places for 2017/18 and 2018/19 Increased demand due to demographic changes Academisation and legislation changes affecting statutory powers to create new capacity Loss of commitment by schools to expansions Failure of new free schools to open when needed	is not met ~ Potential for safeguarding issue	Development of robust data for pupil place planning, review forecasting methodology, verification of data by Education Funding Agency Schools Capacity Survey team	5	4		Decision report to Mayor early May 17 to agree to temporary accommodation at seven secondary schools. Other schools will be required to take on some overfill across most year groups.	4	3 12	lan Bailey	31.07.2017
<b>37. Learning Services -</b> Insufficient SEND specialist places	Impact on mainstream school "holding onto" pupils who have agreed special places. Potential increase costs of Out Of City places (vastly more expensive than in-city places).	Development of strategy for provision, building on trend analysis, numbers of Early Health Care Plan, pupils, identified primary needs, review of existing provision	5	5		Paper detailing proposed increase in special school places is scheduled for discussion by DMTearly in Summer Term. Detailed work with special schools has identified capacity for 2017/18	3	39	lan Bailey	31.07.2017
<b>38. Strategic Commissioning</b> <b>and Business Development -</b> Safeguarding/ teaching and learning workforce programmes are ineffective and Local Authority has insufficiently trained staff to deliver and manage the range.	- Potential adverse impact on inspection outcomes.	<ul> <li>Work Life Balance policies, and supporting wellbeing website www.childrensworkforce/ supporting wellbeing Learning Training &amp; Development Plan refreshed</li> <li>new Department priority and focus on qualification and safeguarding training.</li> </ul>	4	4		<ul> <li>Management to implement health and safety and wellbeing policies and seek advice and support to mitigate risk of undue stress in the workforce</li> <li>New corporate team to actively engage in implementing workforce strategy and limited</li> </ul>	4	3 12	Frances Craven	31.07.2017
STRATEGIC AREA - Public	Health					implementing workforce				

Risk Register Owner: Andy Keeling, COO

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Risk What is the issue: <i>what is the root cause/</i>	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e>	with a existing measures		Further management actions/controls required	Sc f	Target ore with urther ontrols	Cost	Risk Owner	Review Date
problem – what could go wrong			S 1	(See Scoring Table)				e Scoring Table)			
			Impact	Likelihood	Risk		Impact	Likelihood Risk			
<b>39. Public Health-Claiming</b> <b>Process for GP Providers-</b> The clinical systems used by GP providers to claim payment for public health commissioned services are insufficiently robust to ensure payment accuracy	- Loss of confidence of GP Providers in payment structure - Risk of overpayment or underpayment by Public Health which would need to be rectified at a later date	<ul> <li>Alternative spread sheet based payment claim system has been introduced</li> <li>Working with contracts team and CCG to provide a verification system for claims</li> <li>External audit of clinical services delivered by GP practices underway for the NHS Health Check Programme</li> </ul>	4	5		<ul> <li>Audit of Health Checks Programme complete by 360 Assurance</li> <li>The use of a bespoke audit and payment module to be placed within GP systems is being pursued.</li> <li>UPDATE: 24.01.17:</li> <li>Procurement of above noted audit and payment module is being progressed and will be in place by early spring 2017.</li> </ul>	4	4 16		Ruth Tennant	30.06.2017

Risk Register Owner: Andy Keeling, COO

	Concernance (effects and a work of the strain of the strai										
Risk	Consequence /effect: what would occur as a result, how much of a	Existing actions/controls		k Sc with		Further management actions/controls required		arget bre with	Cost	Risk Owner	Review Date
What is the issue:	problem would it be ?, to whom and			cistir		actions/controls required		urther		Gwilei	
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problem – what could go wrong				(See corin			-	e Scoring Fable)			
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			Impact	Likelihood	R		Impact	Likelihood Risk			
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40. Public Health - Data Access	- If unresolved only able to offer a	- Division of Public Health is at Information	4	4	16	More timely data being	4	3 12			30.06.2017
	limited services in terms of core	Governance Toolkit Level 2.				released nationally on line				Tennant	
inadequate data for PH function	offer and other analyses required	- Audit Information Governance within				(aggregated - and does not					
1. Unresolved issues in national		Division to support move to IG Toolkit Level				support analysis at lower					
guidance on this matter.		<ul> <li>Application made and authorisation</li> </ul>				level). Maintain IG Toolkit Level 2					
2. Pseudominised Hospital Episode Statistics (HES) data for		received from HSCIC for access to HES				and work towards Level 3.					
10 years has not yet been		(liaising with GEMCSU on details).				HES data has been					
released to us.		- Data agreement has been signed to make				authorised - awaiting					
3. No current access to GEM		data available via the Risk Stratification				national decisions from					
(SUS Impatient Data) - Access to		project (Adjusted Clinical Groups).				HSOC re warehousing					
SUS planned for Jan 2017. HES		- ONS have requested further information				through GEM CSU.					
data not yet released -		into special uses of individual level mortality				Can now make HES data					
unresolved issues in data		data prior to authorising release of data. Info				required through PHE					
processing by ArdenGEM.		supplied and awaiting outcome on mortality				N3 issues followed up with					
4. Data from GP (SystmOne)		data. (Risk left at 16 due to this item).				IT. Partially resolved for					
		- The Public Health Team has recently been				access to ArdenGEM CSU					
		made aware that no data can be received				(SUS data)					
		from the CCG, as the current agreement				Access to HIS data					
		between the CCG and Leicester City GPs has lapsed, as of 31.03.17. As such, no				warehouse from City Council PC not yet					
		monthly data is being received for any of the				resolved					
		Community Based Services (CBS) that the				Awaiting national decisions.					
		Public health team commission.				- Information agreements					
						being drawn up for specific					
						projects (for primary care					

Risk Register Owner: Andy Keeling, COO

	Register Owner: Andy P								 		
Risk What is the issue:	Consequence /effect: what would occur as a result, how much of a	Existing actions/controls		k So with		Further management actions/controls required		Targo ore v		Risk Owner	Review Date
	problem would it be ?, to whom and		e	kisti	ng	· · · · · ·	f	urth	ər		
what is the root cause/	why		me	easu	ires		c	ontro	ols		
problem – what could go wrong			s	(See Scoring Table)				e Sco Table	-		
			Impact	Likelihood	Risk		Impact	Likelihood	Risk		
41. Public Health- Capability and Capacity- Maintaining sufficient specialist capacity to deliver on objectives whilst undergoing organisational review e.g. loss of specialist staff with local knowledge.	<ul> <li>Inability to to recruit the required specialist staff</li> <li>Less effective commissioning of specialist programmes which could lead to increased health inequalities</li> <li>Incurring additional cost pressures through a need for agency and temporary staff to provide cover for key work areas</li> <li>Lack of the requisite expertise/knowledge in key areas could result in sub-standard</li> </ul>	<ul> <li>Close monitoring and review of current PH budget</li> <li>Planning for the announced future reductions in the PH budget</li> <li>Adherence to Local Government Association/Public Health England Guidance relating to recruitment of staff</li> <li>Pay scales broadly similar to NHS/ market forces</li> <li>Engaged with HR colleagues to understand and put in place steps to shape our recruitment offering to entice high calibre, relevant etc. candidates in future recruitment and enable successful succession planning.</li> <li>Capability interviews conducted for staff moving into new roles</li> </ul>	4	4	16	- Divisional and staffing review	4	4	16	Ruth Tennant	30.06.2017

Risk Register Owner: Andy Keeling, COO

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Risk	Consequence /effect: what would	Existing actions/controls				Further management		arget	Cost		Review Date
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	problem would it be ?, to whom and why			cisti	-			urther			
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problem – what could go wrong				(See			(50)	e Scorino			
problem – what could go wrong				corir			•	Fable)			
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			Impact	Likelihood	Risk		Impact	Likelihood Risk			
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							1				
42. Public Health - Healthy	- Possible reputational risk through	- Procurement options considered and taken	4	4	16	Negotiation stage was	4	3 12		Ruth	30.06.2017
	the LA being forced to reduce	to Executive Briefing for decision.		•		successful and a final 0-	1			Tennant	0010012011
0 0	service levels to meet budget cuts	- Final service specification for the new				19HCP submission has	1			r of infant	
commission adequate capacity		Integrated Healthy Child Programme was				been received from LPT	1				
from the Healthy Child		sent to partners for comments to assure that				that reflects all the issues	1				
Programme may escalate		gaps in service provision were not				discussed and negotiated	1				
safeguarding issues and increase		inadvertently opened.				on. LCC are awaiting final	1				
health inequalities for children		- Healthy Child Programme Assurance and				information and a Section	1				
and young people in Leicester.		Development Group established.				256 from LCCCG	1				
		- Service specification includes a				regarding the Care Of Next	1				
		requirement for the provider to be				Infant (CONI)	1				
		responsible for any costs to the Child Health				subcontracting. Once this	1				
		Information System.				has been received and	1				
		- Appropriate budget and core-offer				reviewed the contract can	1				
		determined.				be awarded. Timescales	1				
		- TUPE questionnaire undertaken.				for award are 16th Dec-9Th	1				
		- Healthy Child Programme Review				January depending on	1				
		undertaken.				when the paperwork arrive	1				
		- Procurement exercise commenced for an				from LCCCG. According to	1				
		initial 2 year contract with the option to				initial timetable contract	1				
		extend to a maximum of 2 years.				was due to be awarded	1				
		- Healthy Child Programme Procurement				17th January so we are still	1				
		Group established.				ahead of planned	1				
		- Extended review with Early Help				timescales.	1				
		commenced.									

Risk Register Owner: Andy Keeling, COO

	Risk Register Owner. Andy Reening, 000									
Risk What is the issue: what is the root cause/ problem – what could go wrong	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	e m	with ac existing measures (See Scoring Table)		Further management actions/controls required	Sco fi cc	Target ore with urther ontrols e Scorin Table)	Risk Owner	Review Date
			Impact	Likelihood			Impact	Likelihood Risk		
review there is potential for reduction in capacity and capability in commissioning and contract management relating to substance misuse treatment services. There has been a reduction in the number of staff and currently there is no identified commissioner for these services (Note total contract value of these services is in excess of £4	to assure the DPH that the services provided are clinically safe -Inpatient specialist detox services are due to be recommissioned and currently there is not a commissioner identified to lead this	- Clarify with ASC Head of commissioning arrangements, immediate mitigation and long term plans to manage commissioning, contract management and performance management of substance misuse contracts	4	4	16	Situation is ongoing with some new staff due to start in post in the summer. Risk remains pending their appointment JO'B 26/04/17	3	39	Ruth Tennant	30.06.2017
<b>44. Public Health - Fitness and</b> <b>Health</b> - Continued decline in health and fitness membership results in increased income budget pressures	• .	Servicing to maintain and monitor on a constant basis	4	4	16	Health & Fitness business case being developed based on lease options and within option appraisal. Marketing Partner	4	3 12	Ruth Tennant	30.06.2017 Ongoing
		Budget profiling and budget monitoring Sports Services Review	4	4	16	Leisure Facilities Review including PPS Options Appraisal approved	3	39	Ruth Tennant	30.06.2017 Ongoing

## Risk Register Owner: Andy Keeling, COO

What is the issue:	Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why	Existing actions/controls	ex me (See 1	with a existing r neasures ee Scoring Table)			S v fu coi ( Sc	arge core with rthe ntro (See corin able)	er Is	Cost	Risk Owner	Review Date
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AMENDMENTS						1	_					
STRATEGIC AREA - A 2. Adult Social Care & Safeguarding - Failure to meeting statutory need; keeping people safe - Difficult financial climate; complexities with funding arrangement; integration and pooled budgets - risk of inadequate resources to meet need	<ul> <li>ASC overspends</li> <li>Insufficient resources to meet need</li> <li>Vulnerable people not receiving sufficient care packages resulting in legal challenge and increase in complaints.</li> </ul>	<ul> <li>Robust mechanisms (such as Resource Allocation System) to ensure resources matched to eligible needs to protect funding</li> <li>Budget monitoring</li> <li>Demand monitoring</li> <li>Use of Better Care Fund (BCF) programme to plan for new funding arrangements and requirements.</li> </ul>	3	5	15	<ul> <li>Further work on BCF to protect social care services and promote efficiencies across the Health &amp;Social Care system</li> <li>Work to review packages of care to maximise resources for those at greatest need</li> <li>Delivery plan now in place - to be progressed over 16/17. Maximise income and debt recovery through work with operational finance / legal</li> </ul>	3	3	9		Ruth Lake	31.07.2017 Ongoing

4. Care Services & Commissioning (ASC) Quality of care in the Independent regulated services including; residential homes, domiciliary care and supported living providers falls below standards	- Detriment (harm) to individuals, groups or the Council (financial or reputational)	- High level Audit processes in places via Adult Social Care contracts and assurance team (This is in addition to Care Quality Commission inspections)	5	4	<ul> <li>Quality Assurance</li> <li>Framework to be used to support identified failing providers.</li> <li>Risk Management process in place to identify appropriate action to be taken in the event of failing providers.</li> <li>Risks have been reduced due to introduction of the MAIPP process and the weekly internal information sharing with the Providers.</li> </ul>	5	3	15			31.07.2017 Ongoing
5. Care Services & Commissioning (ASC) - Implementation of the Sustainability and Transformation Plan (STP)	- Financial impact/legal challenge	- An LLR Programme Board has been established that includes health and social care chief officers	5	4	- An LLR Programme Board has been established that includes health and social care chief officers	3	3	9		Tracie Rees	01.01.2019
6. Care Services & Commissioning (ASC) - Review of Residential Care; Financial risk - largest area of spend and danger of inappropriate models of	<ul> <li>Continued escalation of spend</li> <li>Inappropriate placements</li> </ul>	- The project is overseen by the ASC Programme Board	4	4	- Robust governance through project board, Commissioning Board and Lead Member Briefing	3	3	9	Current spend £44M gross/£286k 17/18		31.07.2017 Ongoing
STRATEGIC AREA - C	City Development and Neighb	ourhoods									

10. Tourism Culture and	- Cost of repairs/replacement costs	Risk assessments in place.	4	4	16	Security review of high	4	4	16 Potential	Mike	31.07.2017
Arts and Investment -	<ul> <li>Major reputational damage</li> </ul>	<ul> <li>Seek specialist advice (don't assume</li> </ul>				<del>value items in</del>			storage and	Dalzell	ongoing
Museums - <del>Loss, damage</del>	<ul> <li>Risk of litigation</li> </ul>	anything).				collections about to be-			security-		
or destruction of council	- Distress to	-Effective collections management plan in place				undertaken.			costs being		
assets. 2016 : damage to	lenders/donors/owners/staff/public.	and disaster/emergency plan specific to				<ul> <li>Options for dealing</li> </ul>			established		
Highcross by Ferris wheel .	<ul> <li>Impact on stakeholders and</li> </ul>	museums as well as overall council disaster				with environmental			Some costs		
Break-in at New Walk-	potential funders	<del>plans.</del>				<del>issues have not</del>			yet to be be		
Museum . 2015 : theft of	<ul> <li>possible effect on council's</li> </ul>	- Processes and procedures developed				developed further (this-			established		
print at New Walk	insurance premiums.	including normal operating procedures				now constitutes a			but		
Museum. Failure to		Strategy for dealing with Euston St store				<del>serious risk)</del>			immediate		
manage environmental		immediate issues now being implemented.				'Longer term solution			actions		
conditions causes mould		Independent review of security measures been				for Euston St still			require		
damage to collections.		undertaken				required once urgent			£0.5m		
Root problem: Insufficient						actions have been					
security measures / lack of						carried out.					
planning / budget						Implementation of					
<del>pressures</del> . Loss, damage						security review					
or destruction of council						recommendations					
assets. 2016 : Specifically						needs to be done					
I) general security						including embedding					
measures and ii)						new behaviours					
specifically the problem of						throughout staff teams.					
mould at Euston St Store											
damaging precious											
collections. Both have											
major scope to cause											
reputational damage.											
·											

(UC) is to be fully implemented in 2022. Implications of the Housing and Planning Act - Pay to	biggest challenge to the HRA will be to collect the full rent from those working age claimants whose housing costs are no longer paid directly to the Landlord (LCC) as they are now. - Higher numbers of tenants in rent arrears leading to loss of rental income will adversely affect the HRA income. - Could lead to greater number of evictions. - Further welfare cuts in 2015/16.	<ul> <li>On-going promotion of Clockwise accounts with tenants.</li> <li>Focus STAR team support on those affected.</li> <li>Maximise the number of tenants claiming DHP for bedroom tax affected cases.</li> <li>Identify tenants who are over-occupying in order to help with down-sizing.</li> <li>Promotion/awareness to tenants of Discretionary Housing Payments (DHP).</li> <li>Mandatory direct debits or Clockwise accounts for New tenants has been implemented.</li> <li>Income Management team strengthened.</li> <li>Amended Allocations policy to assist downsizing</li> <li>Introduced pre-tenancy determinations interviews to collate financial information prior to tenancy sign up. This is a risk mitigation exercise to help identify tenants that require extra help to manage their finances /budget</li> </ul>	4	4	16	<ul> <li>Development of Northgate's IT system to support paperless direct debits.</li> <li>Smarter ways of working being developed including self serve, use of QR scanning and mobile technology to help mitigate risk to reduction in rent collection due to welfare cuts.</li> <li>Project Planned and resourced approach to communications, effective policy and procedure review and update to meet the needs of the Welfare reform changes and those subject to them. Further work required at 19.01.17 After all service improvements mentioned above in place to maximise rent collection for households affected by UC. Further- consideration to be- aiven to convit</li> </ul>	4	3	12	Additional cost of Northgate is a combined divisional cost and not identifiable singularly Potential- additional cost of- staffing to- mitigate and- identified- increase in- rent arrears- but this is not defined.	Chris Burgin	31.07.2017 ongoing
<b>12. Housing -</b> Risk of Legal challenge, liability and reputational consequence if properties are not adequately maintained. Greater financial investment needed in the future. Rent reduction of 1% per annum for next 4 years will threaten budget for maintenance.		<ul> <li>On-going capital investment (25 year strategy and planned maintenance programmes)</li> <li>On-going day to day responsive repairs service.</li> <li>Minimum standard for property re-letting.</li> <li>In house Quality Control team.</li> <li>Policies and procedures in place to ensure we continue to be compliant with legislation e.g. for fire safety, water hygiene, asbestos removal</li> <li>Continue to review more effective ways of maintaining the stock.</li> </ul>	5	3	15	- Identification of fixed costs required to ensure compliance with legislation and to ensure these funding is available for these is future budgets		2		At current rates we need a minimum spend of £13m to ensure ongoing compliance with legislation.	Chris Burgin	31.07.2017

<ul> <li>13. Housing -Providing thriving, safe communities - Impact of welfare reform on supported housing will mean less income to the general fund. Also affects adults social care support to sheltered housing.</li> <li>Received notification that the 1% rent reduction will be applied to hostels and supported housing.</li> </ul>	fund. Will affect all new tenancies after 2016 Less income to provide services at hostels and supported housing	Housing Transformation Programme Phase 3 set up to deliver HRA and Housing GF savings required this includes the agreed action to decommission internal Supported Housing provision and to service review Hostels landlord and support functions next year. This work will run alongside a full review of the Homelessness strategy that will also feed in to meeting this risk	4		Executive decision agreed to reduce accommodation based support by the 60 supported housing units.				uncertainty of the Supported Housing Model and 1% rent reduction further savings will need to be considered as part of HTP3.Additio nal costs to mitigate this risk further are not known at this stage as the guidance for the new model is still not available. The closure of supported housing is estimated to be completed by end of June and this will reduce	Burgin	31.03.2017
<b>14. Estates &amp; Building</b> <b>Services -</b> Lift Condition Assessment - Asset Capture, Lack of forward planning in terms of planned maintenance and programming change of assets	<ul> <li>Continued failure of assets</li> <li>run to failure</li> <li>ad hoc capital required to make good</li> <li>less reliable assets and more entrapments.</li> <li>Lift users may be compromised in terms of access/egress/mobility - as per the Beatty Ave experience</li> </ul>	<ul> <li>Formatting a proposed capital programme of works, based on engineers submissions (Zurich and LES) will be ready in December 2015</li> <li>Lack of internal staffing resource and excessive external consultative cost are prohibiting progress</li> </ul>	3	5	Lift surveys to be undertaken prior to March 2017	2	5	10	50K to undertake surveys by framework consultant	Matt Wallace	31.03.2017

16. Estates & Building Services Schools Capital - Raising educational achievement. Reduction in capital investment in schools with ageing school stock and deteriorating condition	<ul> <li>Potential to not meet statutory building requirements.</li> <li>Reputational damage to the council</li> </ul>	- Develop long term strategy across both the Primary and retained Secondary School estate	4	4		- Condition surveys undertaken and a 1 year programme of planned capital maintenance has been formulated, CMB final approval received Sept 2016. The next phases of the proposed capital maintenance programme will be reviewed on an annual basis in accordance with priority/need allowing for flexibility within the programme. - CCMP2 to be submitted to CM in summer 2017	5	3 2	1:	2 Staff time	Wallace	31.07.2017 review monthly
<b>17. Estates &amp; Building</b> <b>Services -</b> Loss of use of Asset 'Unsafe asbestos particles found	Closure of buildings	<ul> <li>Findings of asbestos action plan being implemented.</li> <li>Asbestos monitoring returns to be reported to DivMT and Heads of Property quarterly and to CMT if cause for concern.</li> <li>All buildings constructed before 2000 have an asbestos register</li> <li>Asbestos removal works at De Montfort Hall- planned and being actioned in phases.</li> <li>Temporary containment measures carried out- and monitoring ongoing</li> </ul>	5	3	15	<ol> <li>The centralisation of property management functions will enable EBS to mitigate risk identified on management plans</li> <li>Ensure all buildings have an asbestos register</li> </ol>		3	2 (	5 Staff time	Matt Wallace	31.07.2017

Fail to maintain Water	Closure of buildings	- Implementation of control regime comprising	5	3	15	- Seek 100%	3	2	6	Matt	31.03.2017
Hygiene		ongoing regular monitoring, reports, risk				compliance with water				Wallace	
		assessment reviews and maintenance with				hygiene returns with					
		allocated budgets				accurate data.					
		<ul> <li>Water hygiene monitoring returns to be</li> </ul>				<ul> <li>Further budget for</li> </ul>					
		reported to DivMT and Heads of Property				17/18 works to be in					
		Quarterly and to CMT if cause for concern				next Capital Bid report					
		<ul> <li>Spend of allocated capital budget for water</li> </ul>				- More rigorous audit of					
		hygiene and production of ongoing prioritised				Building Responsible					
		schedule of risk reduction/removal works				Officer monitoring to be					
		ongoing				undertaken					
		<ul> <li>Water hygiene responsibilities in non-op</li> </ul>									
		estate (apart from communal areas) have been									
		confirmed in the terms and conditions of the									
		lease and necessary action taken.									
STRATEGIC AREA -	Corporate Resources and Su	pport									

24. Delivery,	- Communications are not	- Equality Impact Assessments (EIAs) are	4	4	16	- Continue to review	4	3	12	١	Miranda	31.07.2017
Communications and	appropriate (present the right	performed to help ensure the Council meets the				external practice e.g.				(	Cannon	Ongoing
Political Governance -	information, performed in a uniform	Public Sector Equality Duty (PSED).				from other Local						
LEGAL CHALLENGE	manner, not consistently worded,	- On-going reviews of outcomes of other PSED				Authorities and						
Increased legal challenges	communicated or the tone are	challenges inform our approach to				partners, which have						
may heighten the need to	appropriate), leading to legal	demonstrating compliance with our PSED, and				been deemed as best						
ensure that processes are	challenge.	lessons from these shared / communicated and				practice and implement						
effective, efficient,	<ul> <li>Equalities Impact Assessments</li> </ul>	used to revise our approach where appropriate.				locally as appropriate.						
	cannot address all potential areas of	<ul> <li>Presentation on Judicial Reviews/legal</li> </ul>				<ul> <li>Ensure the correct</li> </ul>						
manner and that managers	legal challenge on Public Sector	challenges posted on EIA Interface page.				resources, with the						
and staff follow explicit	Equality Duty grounds.	<ul> <li>Processes and procedures in place.</li> </ul>				relevant skills and						
guidance.	- Lack of legal expertise/appropriate	- Staff are aware of duties, responsibilities and				experience are						
	resources.	relevant considerations required to demonstrate				allocated to roles.						
Consultation approach and	<ul> <li>Potential for legal</li> </ul>	compliance with PSED.				- Ensure HR support is						
EIAs are increasingly	challenge/judicial review by	<ul> <li>Expert support e.g. HR, equalities,</li> </ul>				available.						
targeted areas for legal	providers, staff, service users, etc.	consultation, CPMO in place with supporting				<ul> <li>Complete current</li> </ul>						
challenge.		guidance. Equalities e-learning module				Equality and Diversity						
	•	developed and being rolled out.				Strategy and refresh						
	<ul> <li>Unplanned adverse effect on</li> </ul>	<ul> <li>EIA process (what needs to be considered</li> </ul>				<ul> <li>Review current</li> </ul>						
	-	when) and EIA templates regularly reviewed				consultation guidance						
	- Resource intensive to defend legal	and revised				for staff						
	challenges/judicial reviews.											

24. Delivery, Communications and Political Governance - LEGAL CHALLENGE - Continued	<ul> <li>Unrealistic public/political expectations.</li> <li>Procurement process may be challenged.</li> <li>Legal challenges focus on process rather than content.</li> </ul>	Well Being Board reports and also for Better Care Together reports, standardising our approach with partners particularly in Health sector. - Community engagement fund developed to support work with the VCS in support of meeting our PSED - Consultation training with a focus on the legal risks recently undertaken by the Comms and Equalities Teams - Work underway to refresh the Equality Strategy	5		20				10	Alison	31.03.2018
<b>25. Finance - Financial</b> <b>challenges -</b> the Council fails to respond adequately to the cuts in public sector funding over the coming 4 - 5 years.	<ul> <li>Council is placed in severe financial crisis</li> <li>Reputational damage to the Council and substantial crisis job losses</li> <li>If the process is not properly managed, the Council will have little money for anything but statutory 'demand led services'.</li> </ul>	-Budget balanced in 17/18. -Further work required to balance the medium term, particularly driving the spending review programme. - £8m service transformation fund.	5	4		Heavy involvement of City Mayor in ensuring spending review programme delivers.	5	2	10		and every year end.

26. Finance - Information	~ Loss of data or information	~ Ensure adequate technology is in place to	5	3	15	Targeted Phishing	2	5	10	Alison	30.06.2017
and Customer Access		protect the authority -AlienVault Logging				Promote Human				Greenhil	Ongoing
The Council is at constant	services	procured.				Firewall awareness				I	
threat from malicious	<ul> <li>Council-wide impact</li> </ul>	~ Raise staff awareness				<ul> <li>Implement further</li> </ul>					
hacking or human error.	~ Potential fines, litigation, penalties	~ Testing procedures				defences					
	etc.	<ul> <li>Applications kept up to date</li> </ul>				Consider draconian					
	<ul> <li>Impact on data subjects if</li> </ul>	~ Processes in place				response to threats					
	sensitive information misused	~ Likelihood of critical systems being affected is									
	<ul> <li>Reputation damage</li> </ul>	low									
		<ul> <li>IT security manager post filled</li> </ul>									
		~ PCI scans									
		~ Penetration testing etc.									
		~ PSN compliance									
		<ul> <li>Data loss prevention activities and mitigations</li> </ul>									
		- IG team deliver monthly reporting									
		~ Lessons learnt e.g. from Lincolnshire									
STRATEGIC AREA - E	ducation and Children's Serv	vices									
28. Children's Social	- Increase in overspend, due to the	- Workforce Strategy sets out plans to attract	5	4	20	- Continued work on	4	4	16	Caroline	30.06.2017
Care and Early Help-	higher costs of agency workers; and	permanent staff to Leicester and retain				recruitment, retention				Tote	
Improvement - Changing	additional staff to carry out	incoming and existing staff. Strategy includes				and induction					
for the better LCCIB	improvement work, reduce	progression and workforce development				- Focus on recruitment					
Improvement Plan -	caseloads and ensure capacity to	- Regular monitoring of staff appointments to				of permanent Team					
Budget	carry out key jobs is in place	agency posts.				ManagersWFD					
Cost of agency social						Strategy work has					
workers, including staffing						slowed down, needs to					
over capacity, and interim						be picked up again.					
staff working on											
improvements results in											
overspend, compensatory											
savings have to be made in											
other services											

<b>29. Children's Social</b> <b>Care and Early Help -</b> Safeguarding Publication of Serious Case Reviews for cases that occurred in 2013/14	families, partner confidence and public reputation	<ul> <li>Two Serious Case Reviews have now been published with clear arrangements in relation to media engagement about the messages to be released. Themes and actions arising from pre- publication messages already included in</li> <li>Improvement Plan, or being communicated separately to staff. Composite review in relation to three babies has not yet been published due</li> </ul>	4	5	20	- Work through Local Safeguarding Children's Board groups to disseminate messages from the Serious Case Reviews.	5	4	20	Caroline Tote	30.09.2017
		to ongoing police investigations, media planning meeting taking place at the end of August. A further SCR has also been commissioned and agency Independent Management Review's are being progressed.									
Abuse or injury to children in a range of care placements	- Children would be unsafe and have experienced significant harm while in the Council's care.	- Ensure maintenance of robust safer recruitment processes and Local Authority Designated Officer arrangements.	5	4	20	<ul> <li>No further controls identified.</li> <li>Compile and monitor critical Young people identified as being at risk of CSE</li> </ul>	5	4	20	Caroline Tote	30.06.2017

Staff fail to recognise and	- No interventions where action	- Agreed improvement plan in place, being	3	5	15	Further implementation	3	4 12	2	Caroline	30.09.2017
act to safeguard and	needs to be taken, interventions that	implemented and monitored, including all				of the Leicester City			·	Tote	
mitigate the risks of	do not make enough difference to	Ofsted recommendations				Children's improvement					
significant harm to children	children's lives	- Early Help Offer re-launched with training for				plan including:					
_	- An increased risk of significant	staff and partners				- Quality Assurance					
	harm, and/or an avoidable child	- Thresholds documents re-launch				work by external					
	death.	- Weekly CIN Performance meetings to look at				auditors used to drive					
		key performance areas and carry out spot				up practice and					
		checks on identified areas of work				management					
		- Team Manager training to reinforce				standards, and enable					
		management oversight				managers to carry out					
		- Distribution of agreed Service Standards				realistic, robust audits					
		across the Children's Workforce				- Outcomes of, and					
		<ul> <li>External audit of Ofsted cases</li> </ul>				learning from, Serious					
		- Workforce Development Programme with aim				Case Reviews to be					
		of attracting workers to Leicester City, retention				communicated to staff,					
		programme, growing own social workers and				including					
		stabilising workforce				recommendations on					
		- Revised supervision and case recording				practice and					
		policies				management work with					
		<ul> <li>External auditors feedback on cases with</li> </ul>				partner organisations to					
		recommendations for improvement				ensure application of					
		- Feedback to CIN Service about outcomes of				the LLR thresholds,					
		Ofsted support visit with actions to address.				reduce inappropriate					
		- Case progression manager appointed to track				contacts and referrals					
		outcomes of legal planning meetings. This will				and ensure sufficient					
		ensure that there is a timely response to				detail is given to enable					
		decision making and to ensure drift and delay in				robust decision making.					
		care planning is prevented.									
		- Principal Social Worker appointed April 2016.									
		- Advanced Practitioners appointed July 2016.									

Practitioners and managers do not work to required standards	<ul> <li>Poor quality, inconsistent service to children, young people and their families</li> <li>Increased risk of significant harm</li> </ul>	<ul> <li>Weekly performance meetings in CIN</li> <li>Quality Assurance work by external auditors in conjunction with social workers and team managers, with immediate corrective action for cases identified.</li> <li>Reports produced on 'Practice Analysis with results of the Quality Assurance work.</li> <li>Workforce Development Programme in place</li> <li>Briefings and rollout implementation of the Service Standards, Supervision Policy and Guidance and the Performance and Quality Assurance Framework</li> <li>External auditors feedback on cases with recs for improvement</li> <li>Induction programme in place</li> </ul>	3			<ul> <li>Implementation of the improvement plan including:</li> <li>Use established frontline (practitioner) Group as 'Champions'</li> <li>Practice and performance quarterly workshops for all staff</li> <li>Continued implementation of the Workforce Improvement Plan including recruitment, retention and induction of agency and permanent staff and action to reduce imbalance of agency Team Managers to permanent Team Managers</li> <li>Equipping social workers with appropriate mobile technology</li> </ul>				Tote	30.09.2017 ongoing
Abuse or injury to children and young people in the City.	<ul> <li>Children would be unsafe living with their parents. Where known to Children's Social Care or Early Help, services would not have protected them.</li> <li>Where a child suffered significant harm or death, there could be a Serious Case Review, with outcomes published nationally.</li> </ul>	<ul> <li>Implementation of Improvement Plans at Operational and Strategic Level</li> <li>Recruitment of staff. Staff training</li> <li>Supervision and management oversight.</li> </ul>	3	5	15		3	4	12	Caroline Tote	30.09.2017 and ongoing

Child Sexual Exploitation:	For non-recent and current	For non recent cases	3	5	15	- Plans for a multi-	3	5	15	Caroline	30.09.2017
Non-recent cases of CSE	Reputational risk in a high profile	- Local authority engagement with police in non-				agency team across				Tote	
where police investigation	area:	recent investigations.				Leicester,					
and/or victims statements	- Allegations against staff or former	For current work				- Leicestershire and					
demonstrate local authority	staff	- CSE Strategy and Action Plan in place across				Rutland to work on					
involvement or culpability	- Media coverage	Leicester, Leicestershire and Rutland Leicester				CSE, Missing and					
in failing to protect victims.	<ul> <li>Claims against the Council</li> </ul>	Safeguarding Children Board (LSCB).				Trafficked to be in					
Current work on CSE		- Training for local authority and partner agency				place Oct 2016					
where local		staff provided through the LSCB and single				- Work to ensure more					
authority/partnership		agency training.				robust approach					
working have failed to		<ul> <li>Communications Planning.</li> </ul>									
protect young people from		- Liquid Logic workspace in place from July									
perpetrators		2015.									
		- Problem profile (perpetrator information) being									
		put into place by the police									
		- Performance Framework being established.									
		- Developing CSE / Missing / Trafficked Hub									
		with Police, LCC, and Health									
Increased demand for	- Higher numbers of contacts and	- Regular checks on demands for Early Help	3	5	15	- Continue to monitor,	3	5	15		30.09.2017
service following the	referrals diverts core role of social	and Children's Social Care through				raise with partners				Tote	
•	workers from increased time	performance information				through LSCB					
	pressures to potentially affect					- Examine through					
	quality of work with children at					Children's Trust and					
	higher risks of neglect and/or abuse.					consider multi-agency					
						solutions					
						- Encouraging schools					
						to buy in Family					
						Support work					

Workforce - Staff fail to recognise and act to safeguard and mitigate the risks of significant harm to children - Insufficient high quality workforce at practitioner and manager levels including: • Turnover/retention of agency staff • Poor quality agency staff • Current Permanent staff leaving • Difficulty in recruiting permanent staff to Service Manager, Team Manager and Social Worker posts due to pressure to perform to required standards • Practical problems that affect day to day work • Leicester not able to attract staff while 'inadequate'	- De-stabilisation of workforce and a ripple effect from CIN Teams to other teams in social care. - New agency staff struggle to pick up cases that have been through several interim social workers causes stress to new staff	<ul> <li>Retention package has been approved</li> <li>Workforce Improvement Plan in place</li> <li>Implementation of recruitment and retention aspects of the Workforce Strategy and Improvement Plan</li> <li>Health check by Liquid Logic Original Suppliers</li> <li>Contact with Other LAs successfully using Liquid Logic</li> <li>Non-compliant or poor quality agency staff asked to leave</li> <li>Capability/disciplinary action in relation to permanent staff</li> <li>Exit interviews with departing staff</li> <li>SAT implemented June 2016.</li> <li>Principal Social Worker in post April 2016.</li> </ul>	5		20	implement Service Standards, address key areas of staff performance through management action, follow up findings from - Performance and Quality Assurance reports	4		16	Tote	30.06.2017
	- Key tasks underpinning Improvement Plan not carried out, or delayed due to lack of staff	<ul> <li>Continued recruitment of key staff including consideration of secondments</li> <li>Business Analysis of the critical area (CIN teams)</li> <li>Roll out of mobile technology to staff</li> </ul>	5	4	20	<ul> <li>Recruitment of an additional trainer for Liquid Logic, and further work to recruit report writers</li> <li>Consideration of Business Support functions in business analysis work</li> </ul>	4	4	16	Caroline Tote	30.09.2017

31. Children's Social	- Practitioner/manager training does	- Training and helpline in place	5	4	20	Actions taken with	4	4	16	Caroline	30.09.2017
Care and Early Help -	not enhance system use	<ul> <li>Priority list in place for LL reports</li> </ul>				provider:				Tote	
Liquid Logic -	<ul> <li>Resistance among some staff</li> </ul>	- Contact with Other LAs successfully using				<ul> <li>Prioritisation and</li> </ul>					
Liquid Logic's children's	hampers the use of the system	Liquid Logic				implementation					
recording system does not	<ul> <li>Due to increased demand for</li> </ul>	<ul> <li>New staff undergo induction programme</li> </ul>				identified through the					
work effectively to ensure	social care requirements from the	including Liquid Logic training.				Health check and for					
business processes,	Business Application Support Team	<ul> <li>Implementation of V11 July 2016</li> </ul>				V11.					
support good practice or	(ICT for Liquid Logic), the early help	<ul> <li>Liquid Logic User Group meet monthly</li> </ul>				- High level project plan					
evidencing children are	reporting roll out in September is at					to be developed.					
appropriately safeguarded	risk.					- Recruitment of Liquid					
	- Change is not embedded and the					Logic report builders					
	system is unable to discover where					and training of others in					
	things are going wrong and					Performance team to					
	progress is not being maintained					undertake query and					
	- Turnover of staff prevents effective					report building in Liquid					
	use of the system					Logic					
	<ul> <li>Shortage of training not enabling</li> </ul>					- Training Programme					
	effective use of system					being developed to					
	<ul> <li>ICT support for use of system is</li> </ul>					include CP, CIN and					
	hampered by insufficient report					LAC.					
	writers and trainers					- Champion group					
	<ul> <li>Inconsistent use of system leads</li> </ul>					being developed linked					
	to errors in recording and					to the role of the AP					
	performance of system					(Advanced Practitioner)					

Early Help module system -	- Lack of confidence in Early Help	- LL User group now in place to deal with	5	4	20	- Allocation of trainers	4	4 1	6		30.09.2017
partners not participating	Assessment (EHA)	business as usual with one external partner				and BAS report writers				Tote	
and taking on role of Lead	- Partners not engaging in Liquid	represented on this group.				to the Early Help					
Practitioner.	Logic training or using the system	<ul> <li>ISA almost complete, one partner still to</li> </ul>				system through					
	- Partners not signing Information	provide information.				deployment of existing					
	Sharing Agreement therefore	- LL user group meeting on 27.10.16 to discuss				resources and					
	information cannot be shared or	issues from testing with decision made for sign				temporary recruitment					
	partners do not take on the LP role.	off, this will be discussed with CT.				of additional staff					
	- Many social workers are still not	12 week plan underway working with key				Discussion at the					
	trained on EHM due to turnover of	partners to review front door arrangements, EH				LCCIB and the Early					
	staff or not attending compulsory	pathway and Police contacts, good progress				Help Group of the					
	briefings, This has led to a lack of	seeing made.				Children's Trust Board					
	information in quality assurance					about how to increase					
	processes and duplication of work.					the allocation of Lead					
	- EHM report are still not accurate					Practitioners in partner					
	with no fixes due to prioritisation of					agencies					
	social care requirements. This has					- EHM briefings to be					
	led to inaccurate reporting and lack					put on again for SW					
	of reports to inform work eg) re-					staff.					
	referrals.					- Mtg set up with					
	-V12 upgrade still has many					County to look at					
	problems, one of them major re:					external EHA					
	step up to social care when it should					processes.					
	be EHA, decision required 28.10.16										
	re: whether we should upgrade or										
	delay but this will have implications										
	for Professional Portal and DCS										
	pathway, if delayed it will be Mar 17										
	before we can go live with V12 and										
	DCS pathway										
32. Children's Social	- Poor quality, inconsistent service	- Ofsted inspection of Children's Social Care	4	5	20	- Performance and	4	2 8	3	Caroline	30.09.2017
Care and Early Help -	to children, young people and	under the Single Inspection Framework took		Ī	<b> </b> _	Quality Framework in		-		Tote	
Inspections -		place in January/February 2015, report				place					
Impact of poor outcomes	- Additional expenditure for	published March 2015, judgement of				- Regular monitoring of					
from Ofsted Inspections.	improvement work	'inadequate'				performance and					
	- External scrutiny from Ofsted and	- Inspections and monitoring visits of Children's				quality of service					
	-	Residential Homes are carried out regularly and				- Meet key targets set					
		tracked through the 'Residential Improvement				by the Improvement					
	, , , , , , , , , , , , , , , , , , ,	Plan'.				board					
	Council.	- Preparation work in place for inspection of									
		Children's Centres.									
		- Ongoing monitoring visits by Ofsted in key									
		Singoing monitoring visits by Orstod in Key			L	l					

33. Children's Social Care and Early Help - Early Help - Failure of services and processes to identify and meet the needs of vulnerable young people. Extent and gearing of department budget cuts from April 17 onwards compromises operations and generates a higher safeguarding failure.	, ,		5	4		Analyse consultation findings as they come in to asses impact and risk and report to DCS.	4	4	16	Caroline Tote	30.09.2017
34. Children's Social Care and Early Help - Placements for children and young people who are looked after - Inability to recruit and retain foster carers	<ul> <li>Insufficient internal foster care placements leading to greater use of Independent Fostering Agencies and greater cost to the Council.</li> </ul>	<ul> <li>Targeting resources to focus on mainstream foster carers</li> <li>Foster carer allowances report to be considered by DMT to review payment</li> <li>Foster carer scheme for teenagers to be considered as part of an 'invest to save' bid.</li> </ul>	4	4	16	<ul> <li>Consideration of raising foster care allowances to national requirement</li> <li>Consideration of teenage fostering scheme.</li> </ul>	3	4	12	Caroline Tote	30.09.2017
Inability to find sufficient suitable residential placements for children and young people with complex needs	<ul> <li>Insufficient/unsuitable residential care that does not meet children and young people's needs and leads to higher costs for the council and poor outcomes for children and young people.</li> <li>Council's statutory responsibilities as a Corporate Parent are not fulfilled</li> </ul>		4	4		<ul> <li>Proposals for invest to save for young people 'on the edge of care'</li> <li>Increased use of Wigston Lane for young people moving into independence.</li> </ul>	3	4	12		30.09.2017 and ongoing
<ul> <li>35. Learning Services - Funding reduction leading to inadequate school improvement capacity</li> <li>From 2018/19 funding to support monitoring and intervention in maintained schools will reduce from £1.3m to around £300k.</li> </ul>	Significant increases in schools rated RI and Inadequate Reputational damage for the council	Seeking to develop school-led capacity Leicester Education Strategic Partnership (LESP) engaged and have funded a senior consultant post to help develop capacity	5	4		Develop traded capacity Further support for school-led system	5	4	20	lan Bailey	31.07.2017

Insufficient school places for 2017/18 and 2018/19 Increased demand due to demographic changes Academisation and legislation changes affecting statutory powers to create new capacity Loss of commitment by schools to expansions	s Development of robust data for pupil place planning, review forecasting methodology, verification of data by EFA SCAP team	5	4	20	Decision report to Mayor early May 17 to agree to temporary accommodation at seven secondary schools. Other schools will be required to take on some overfill across most year groups.	4	3	12	lan Bailey	31.07.2017
Failure of new free schools to open when needed       Impact on mainstream school         37. Learning Services - Insufficient SEND specialist places       Impact on mainstream school         "holding onto" pupils who have agreed special places. Potential increase costs of OOC places (vastly more expensive than in-city places).         STRATEGIC AREA - Public Health	Development of strategy for provision, building on trend analysis, numbers of EHCP pupils, identified primary needs, review of existing provision	5	5	25	Paper detailing proposed increase in special school places is scheduled for discussion by DMTearly in Summer Term. Detailed work with special schools has identified capacity for 2017/18	3	3	9	lan Bailey	31.07.2017

40. Public Health - Data	- If unresolved only able to offer a	- Division of Public Health is at Information	4	4	16	More timely data being	4	3	12	F	Ruth	30.06.2017
Access and Sharing -	limited services in terms of core	Governance Toolkit Level 2.				released nationally on				1	Tennant	
Insufficient and	offer and other analyses required	- Audit Information Governance within Division				line (aggregated - and						
inadequate data for PH		to support move to IG Toolkit Level 3.				does not support						
function		- Application made and authorisation received				analysis at lower level).						
1. Unresolved issues in		from HSCIC for access to HES (liaising with				Maintain IG Toolkit						
national guidance on this		GEMCSU on details).				Level 2 and work						
matter.		- Data agreement has been signed to make				towards Level 3.						
2. Pseudominised Hospital		data available via the Risk Stratification project				HES data has been						
Episode Statistics (HES)		(Adjusted Clinical Groups).				authorised - awaiting						
data for 10 years has not		- ONS have requested further information into				national decisions from						
yet been released to us.		special uses of individual level mortality data				HSOC re warehousing						
3. No current access to		prior to authorising release of data. Info				through GEM CSU.						
GEM (SUS Impatient Data)		supplied and awaiting outcome on mortality				Can now make HES						
- Access to SUS planned		data. (Risk left at 16 due to this item).				data required through						
for Jan 2017. HES data		- The Public Health Team has recently been				PHE						
not yet released -		made aware that no data can be received from				N3 issues followed up						
unresolved issues in data		the CCG, as the current agreement between the				with IT. Partially						
processing by ArdenGEM.		CCG and Leicester City GPs has lapsed, as of				resolved for access to						
4. Data from GP		31.03.17. As such, no monthly data is being				ArdenGEM CSU (SUS						
(SystmOne)		received for any of the Community Based				data)						
		Services (CBS) that the Public health team				Access to HIS data						
		commission.				warehouse from City						
						Council PC not yet						
						resolved						
						Awaiting national decisions.						
						Information agreements						
						being drawn up for specific projects (for						
						primary care data).						
					1	primary care data).						

<b>-</b>	<ul> <li>Insufficient performance and contract management of contract to assure the DPH that the services provided are clinically safe</li> <li>Inpatient specialist detox services are due to be recommissioned and currently there is not a commissioner identified to lead this</li> <li>loss of specialist expertise in substance misuse poses a risk to future commissioning, quality assurance and clinical governance</li> </ul>	- Clarify with ASC Head of commissioning arrangements, immediate mitigation and long term plans to manage commissioning, contract management and performance management of substance misuse contracts	4	4	16	Service level- agreement developed- to clarify arrangements- and requirements of- ASC in terms of- commissioning contract management and- performance monitoring of contracts - Situation is ongoing with some new staff due to start in post in the summer. Risk remains pending their appointment JO'B 26/04/17		3	9	Ruth Tennant	30.06.2017
loss of organisational memory as staff previously DELETIONS											
					1	1	1	1		 	
STRATEGIC AREA - A			<b>_</b>	0	45		_		10	Duth	24 02 0047
BUILDING CLOSED 1ST APRIL 2017 Adult Social Care & Safeguarding - Meet Health & Safety (H&S) expectations in regulated provision. Fail to maintain safe water systems in all units; Failure to maintain essential health and safety in intermediate care	- III health or death to residents and/or staff or visitors from water borne infections or poor H&S practices.	- Water hygiene monitoring practice in place	5	3	15	- Ensure all registered managers go on required training and fully understand the requirements for temperature checking, flushing regimes, tap cleaning etc. and can closely monitor those carrying out these tasks.	5		10		31.03.2017 Ongoing

RISK No. 09 COVERS THIS Care Services & Commissioning (ASC - Operational Capacity. Risk of legal challenge / fines from being unable to meet the additional demands arising from Cheshire West judgement on Deprivation of Liberty Safeguards (DOLS). Risk re capacity to effectively scope the new DOLS cases; challenge from practice in care homes in applying DOLS via urgent applications in inappropriate circumstances		<ul> <li>Manager briefings to ensure legal requirements understood</li> <li>Scoping of high risk cases to understand new DOLS cases</li> <li>Prioritisation of action on cases</li> <li>Monitoring of incoming pressures for DOLS team and use of independent Best Interest Assessor capacity</li> <li>Engagement with legal services re Court Of Protection applications and pressures</li> <li>Additional resources agreed for recruitment via budget setting</li> </ul>	4	4		<ul> <li>Tracking of anticipated legal guidance on application of case law in practice; consideration of additional resources to support scoping exercise as this has not been completed due to lack of resources / competing priorities</li> <li>Meeting with legal services to assess position / agree actions to mitigate risk 24 March. Issue to be escalated to Leadership Team.</li> <li>Further work via NHS England Mental Capacity Act project and HOS to address care home practice which is exacerbating the volume and timescales risks</li> </ul>		3	12			31.03.2017 Ongoing
STRATEGIC AREA - (	City Development and Neighbo	ourboods										
SCORE BELOW	- Reduction on Capital & Revenue	- Help manage and support the schools through	4	4	16	- Look to provide traded	4	Δ	. 16	Staff time	Matt	31.07.2017
THRESHOLD IN DRR FOR ORR NOW SCORED 3(I) AND 3(L) = 9 Estates & Building Services - Maintaining	funding as schools receive monies directly from central government.	this process.	+	+		services for schools to opt into as a long term strategy.	4	4			Wallace	
STRATEGIC AREA - C	Corporate Resources and Sup	<u>pport</u>										
NONE												
STRATEGIC AREA - E	Education and Children's Serv	<u>vices</u>										

COVERED UNDER ESTATES Learning Services - Leicester City Council reputation / relationships with schools are hindered by the delay in resolving snags and defects items with schools.	and / or celebrating impact of	- BSF School's in phase 3 to 6 identified as high risks are indicated on internal CPMO report with mitigating actions.	5	5	25	Resource management between property and education to be agreed. Children's Capital Governance has been reviewed and a new programme manager is working to ensure that this and other aspects of our programme are better planned and delivered. Clarity to schools provided on escalation route for snags and defects concerns.	4	5	20	staff time	lan Bailey	31.03.2017
HISTORICAL Learning Services - Leicester could be subject to a targeted Ofsted inspection with multiple inspections across schools followed by Local Authority (LA) inspection.	<ul> <li>LA can provide evidence to support positive outcome but resource demands would be significant</li> <li>Major issue about credibility of service which could increase the number of schools changing to academy status</li> </ul>	- School improvement reserve budget	4	4	16	<ul> <li>Positive response to recommendations identified in peer review completion of a detailed Self Evaluation Form (SEF) leading to a revised school improvement Framework</li> <li>Close work between LA Officers, Department of Education &amp; Ofsted representation to manage RI/SM schools</li> <li>Action plans in place for new teams in the raising achievement service linked to SEF</li> </ul>		4	12		Bailey	31.03.2017
COVERED UNDER ESTATES Learning Services - Children's Capital Investment Delayed capital projects disrupts educational improvements in schools	improvements is reduced and/or compromised by building issues and	- LQP services to be targeted where necessary to provide additional educational support and guidance in build delay works. Resolution to relationship and reputational management with BSF schools yet to be finalised.	4	4	16	- Children's Capital Governance has been reviewed and a new programme manager is working to ensure that this and other aspects of our programme are better planned and delivered.	3	2	6	Staff time	lan Bailey	31.03.2017

School closure required due to significant health	People not met	- Building Review Groups (BRG) have now ended with BSF schools - further clarity on contract management to be discussed with property.	4	4	16	- Children's Capital Governance has been reviewed and a new programme manager is working to ensure that	4	16	Staff time	lan Bailey	31.03.2017
and safety snags and defects works incomplete in capital projects. i.e. heating, ventilation, water and fire system failures						this and other aspects of our programme are better planned and delivered.					
of contractual BSF knowledge and Intelligence	of change, agreement or clarity for schools - BSF staff now in redundancy process and to be brought to an end	<ul> <li>School have been asked to request BRG reports from BSF project team so that they can take ownership in prioritising issues / actions against education needs.</li> <li>Awaiting final list of issues and snags from property.</li> </ul>	4	4	16	- Children's Capital Governance has been reviewed and a new programme manager is working to ensure that this and other aspects of our programme are better planned and delivered.	5	20	staff time	lan Bailey	31.03.2017
STRATEGIC AREA - F	ublic Health										
NONE											