

Agenda Item No 4(g)

DERBYSHIRE COUNTY COUNCIL

AUDIT COMMITTEE

27 May 2020

Report of the Director of Finance and ICT

Annual Strategic Risk Register Review

1 Purpose of the Report

To advise Members of the outcome of the Strategic Risk Register review and the updated 2020-21 Risk Strategy together with the implementation plan.

2 Information and Analysis

Strategic Risk Register

The Council undertakes regular reviews of risks and the latest detailed assessment of the highest ranking risks forms the Council's Strategic Risk Register.

The Risk Register is a means by which the Council identifies, monitors and manages risks, and it is also used to inform the budget process. Risk mitigation measures do not always involve a financial requirement, but many do, and budgetary provision, financial reserves and provisions are made accordingly, taking account of Council priorities and available funding.

The Risk Register is designed to capture strategic risk which by its nature has a long time span.

The Risk and Insurance Manager undertook a wholesale review into the Strategic Risk Register with regards to appearance and content with the Strategic Risk Management Group on 30 January 2020.

It was agreed that some of the content needed to be reviewed to align with the current Council Plan and that the format could be improved to provide greater ease of understanding of the mitigations that the Council is undertaking. This work is currently ongoing.

The Coronavirus has widespread implications across Derbyshire and will affect the ability to provide services to our citizens. Detailed actions with

regards to the Covid-19 is encompassed within the section on Business Continuity risk mitigations.

A new format was suggested which is attached in Appendix B for the Audit Committee's consideration and agreement. The register has been updated and reflects current strategic risks. The risks noted require a further workshop to identify the mitigations and owner of each risk. This work will be carried out in the coming few months by the new Senior Risk Officer following appointment to that post.

The register highlights the Council's ongoing business continuity arrangements in responding to the Coronavirus outbreak.

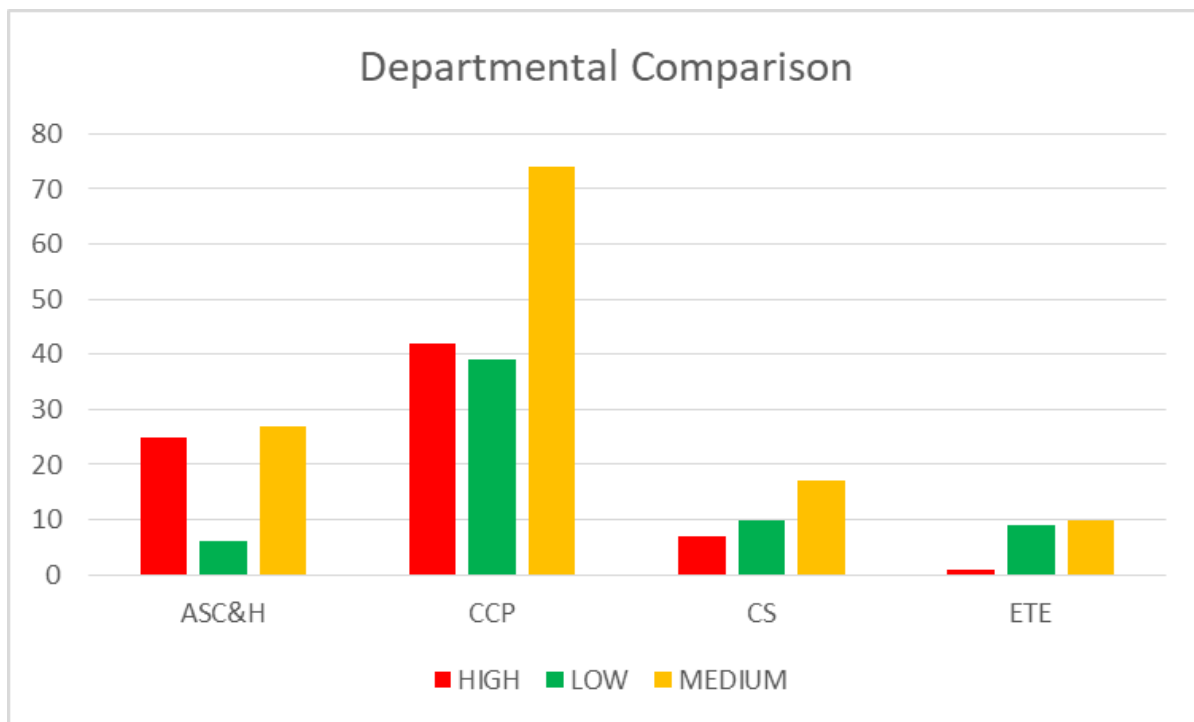
Appendix C shows the Strategic Risk Register in its previous format but is provided as a reference point to demonstrate the mitigations that are in place for the risks identified in Appendix B. A summary of changes is shown at Appendix A.

Subject to agreement of the revised format by Audit Committee, the updated format will be presented to the next meeting, together with completed mitigations for each of the identified Strategic Risks.

COVID-19 Risk Register

The Council has compiled a risk register specific to the COVID-19 pandemic in order to actively manage the risks that this has presented. The COVID specific risk register is contained in Appendix E, however, a summary is detailed in the tables below.

Rating	ASC&H	CCP	CS	ETE	DCC Wide Grand Total
HIGH	25	42	7	1	75
LOW	6	39	10	9	64
MEDIUM	27	74	17	10	128
Grand Total of Risks	58	155	34	20	267



Risk Management Strategy

The Risk and Insurance Manager has updated the Risk Strategy and implementation plan which was approved by Cabinet on 16 March 2020.

The Strategy has been comprehensively reviewed to ensure that the Risk Strategy supports the aims of the Council and provides a framework for departments to produce considered decisions that are based upon awareness of the risks involved rather than being risk adverse.

The Strategy will assist the Council in practising good corporate governance by reducing risk, stimulating performance throughout the Council, enhancing services, Value for Money and improving leadership, transparency and social accountability.

How successful the Council is in dealing with the risks it faces can have a major impact on the achievement of our key objectives and service delivery to the community. This Strategy will help support the corporate agenda and underpin the key Council Plan objectives.

The Risk Strategy has undergone a significant overhaul to enable the Derbyshire's transition to an enterprising model. As risk changes through the evolution of the Council Plan, it is vital to ensure that the risk model is fit for purpose and in line with these altering opportunities and hazards. This will enable the Council to be aware of the risks and opportunities that are presented within a clear framework of assessment and identification.

As the Council is committed to adopting best practice in its management of risk, the Strategy is designed to ensure risk is of an acceptable and tolerable level in order to maximise opportunities. The Strategy will also assist the Council to demonstrate it has full consideration of the implications of risk and

the mitigations required to ensure the delivery and achievement of the Council's outcomes, strategic aims and priorities.

The Council will adopt an open approach to risk and strive to be risk aware. Being prepared to accept risk at a tolerable level that can be managed and mitigated whilst ensuring that the most vulnerable are protected and there is increased collaboration with our partners, communities and residents.

The implementation plan sitting behind the strategy is ambitious and seeks to raise the Council's CIPFA benchmarking ranking from mainly at Level 1 "Engaging" to Level 4, "Embedded and Working" by 2022 which is detailed over pages 20 and 21 of the report.

The 2020-21 Risk Strategy is attached in Appendix D for information.

3 Considerations

In preparing this report the relevance of the following factors has been considered: financial, legal, prevention of crime and disorder, equality and diversity, human resources, environmental, health, property, transport and social value considerations.

4 Officer's Recommendation

That Audit Committee:

- a. notes the updated Strategic Risk Register and approves the revised format;
- b. notes the details of the revised Risk Management Strategy;
- c. notes the COVID-19 risk register.

PETER HANDFORD

Director of Finance & ICT

Strategic Risk Register – Summary of Changes

The risk register has been updated to account for the new Council Plan priorities and values.

There are a number of risks that have been re-evaluated and amalgamated or moved to an overarching risk description.

Risk Identifier	Previous Description	New Description	Comments	Link to Council Plan
2011/10	Looked after Children	Increase in demand in Council Services	The Strategic Risk Group believes that there should be an overarching risk to enable the Council as a whole to respond and manage an increase in demand for services.	<ul style="list-style-type: none"> • High performing Council Services
2011/12	Continuing Healthcare	Increase in demand in Council Services	The Strategic Risk Group believes that there should be an overarching risk to enable the Council as a whole to respond and manage an increase in demand for services.	<ul style="list-style-type: none"> • High performing Council Services
2011/22	Central Government Reform	Influence of external political influences	The risk category was widened to enable the Council to plan and mitigate for external political and policy decisions that may impact upon our services.	<ul style="list-style-type: none"> • High performing Council Services

2011/8	Implementation of Self Directed Support in line with the Personalised Care Agenda	Increase in demand in Council Services	The Strategic Risk Group believes that there should be an overarching risk to enable the Council as a whole to respond and manage an increase in demand for services.	<ul style="list-style-type: none"> • High performing Council Services
2012/1	Information Governance, Cyber and Social Media	Failure to comply with GDPR regulations and ICT resilience	The risk was changed to encompass the whole risks surrounding information governance and cyber protection.	<ul style="list-style-type: none"> • High performing Council Services
2011/14	Residential Care	Increase in demand in Council Services	The Strategic Risk Group believes that there should be an overarching risk to enable the Council as a whole to respond and manage an increase in demand for services.	<ul style="list-style-type: none"> • High performing Council Services
2011/6	ICT Infrastructure & Systems	Failure to comply with GDPR regulations and ICT resilience	Risk incorporated with 2012/1 2018/03.	<ul style="list-style-type: none"> • High performing Council Services
2013/2	Impact of Welfare Reform	Increase in demand in Council Services	The Strategic Risk Group believes that there should be an overarching risk to enable the Council as a whole to respond and manage an increase in demand for services.	<ul style="list-style-type: none"> • High performing Council Services

2018/03	GDPR	Failure to comply with GDPR regulations and ICT resilience	Risk incorporated with 2012/1 and 2011/6.	<ul style="list-style-type: none"> • High performing Council Services
2019/01	Brexit Planning	Influence of external political influences	The risk category was widened to enable the Council to plan and mitigate for external political and policy decisions that may impact upon our services.	<ul style="list-style-type: none"> • High performing Council Services

Summary of Risks Which Will No Longer Appear on the Register

Risk Identifier	Description	Impact
2011/18	Provision of services to schools	This risk was reclassified as a Departmental risk
2011/21	Collective Challenge under Judicial	This risk was reclassified as a Departmental risk
2015/03	D2N2	This risk was reclassified as a Departmental risk

Departmental Risk Registers

New Risks on Departmental Registers scoring over 12

Dept	Dept Risk Identifier	Description	Impact	Score	Link to Strategic Risk	Impact on Council Plan
ASC&H	20	Shortfall in community transport to maintain services	Potential of increased injury to stakeholders through insufficiently trained staff/stakeholders unable to access services	15	2011/9 Protection of Children and Vulnerable Adults	<ul style="list-style-type: none"> High quality personalised services
ASC&H	21	Increased financial liability for LA as a result of review of S117 of the MH Act		12		<ul style="list-style-type: none"> Good use of public money
ASC&H	22	Expansion of non-regulated PA workforce increases exposure of service users to risk		12		<ul style="list-style-type: none"> High quality personalised services
ASC&H	23	Failure to deliver the programme of work leading to increased cost, risk and insufficient capacity		15		<ul style="list-style-type: none"> Good use of public money
ASC&H	24	Failure to learn from events where something went wrong resulting in loss of public trust on processes and political		15		<ul style="list-style-type: none"> High quality personalised services

		trust in ASC				
ASC&H	25	Failure to manage money effectively in Derbyshire Deputyship service		15		<ul style="list-style-type: none"> • Good use of public money
ASC&H	26	Failure to pursue making people safe where people appear to have capacity to choose not to engage		15		<ul style="list-style-type: none"> • High quality personalised services
ASC&H	27	Failure to respond to need in a timely way		15		<ul style="list-style-type: none"> • High quality personalised services
ASC&H	28	Failure to comply with all regulatory requirements		20		<ul style="list-style-type: none"> • High quality personalised services
ASC&H	29	Failure to enact good safe practice in P&P and safeguarding (audits and supervision)		15		<ul style="list-style-type: none"> • High quality personalised services
ASC&H	30	Failure to respond to carers needs		12		<ul style="list-style-type: none"> • High quality personalised services

Risks on Departmental Registers Increasing scoring above 12

Dept	Dep't Risk Identifier	Description	Impact	Old Score	New Score	Link to Strategic Risk	Impact on Council Plan
Public Health	PH8/18	Lack of signed contract with Northamptonshire County Council to provide Ocitgo IT solution. System will no longer be available after 31.03.19	DCC will not be indemnified in respect of a breach of data; system cannot be used for reporting.	15	25	2012/1 Information Governance, Cyber and Social Media	<ul style="list-style-type: none"> High performing Council Services
Public Health	PH05/15	Difficulties in accessing NHS and public health information due to new organisational arrangements and information governance barriers	Potentially resulting in inappropriate resource allocation or commissioning decisions based on incomplete data.	9	12	2012/1 Information Governance, Cyber and Social Media	<ul style="list-style-type: none"> High performing Council Services
ETE	2017/7	Failure to meet waste management targets following delays in completion of the Household Waste Recycling Centers in Derbyshire	Financial and potentially reputational should the centre fail to be commissioned	12	25	2011/2 Failure to meet waste management targets	<ul style="list-style-type: none"> High performing Council Services.
CCP	01	Maintaining (including servicing) and providing property in safe, adequate and suitable	Risk of breach of Duty of Care under the Health & Safety at Work Act 1974 leading to prosecution of	16	20	2012/2 Maintenance of Assets	<ul style="list-style-type: none"> High performing Council

		condition.	Officers under the Corporate Manslaughter and Homicide Act 2007 to employees and others working for us, occupiers of premises owned by us and the wider public. High risk that damage to property or injury death to service users/public/staff will be uninsured.				Services.
CCP	28	Traded Services non-Schools: All services fully or partly trading are under pressure to continue to achieve reductions in costs as well maintain or increase income	The reduction in resource will lead to impaired service delivery and a potential reduction in traded income.	9	12	2011/18 Provision of services to schools	<ul style="list-style-type: none"> High performing Council Services
CCP	29	Traded Services Schools: All services fully or partly trading are under pressure to continue to achieve reductions in costs as well maintain or increase income	The reduction in resource will lead to impaired service delivery and a potential reduction in traded income.	12	16	2011/18 Provision of services to schools	<ul style="list-style-type: none"> High performing Council Services

Strategic Risk Movement Report:




Report Date: 27/02/2020


Date of Previous Risk Score: September 2019

Notes: References highlighted **Purple** have been added since the previous report.

Old Category is shown when there has been a change of category.

Previous Risk Score shows rating, probability and impact prior to the Current Risk Score


 No Change
  Downwards movement
  Upwards movement

Risk Ref: 2011/1 Category: Strategic	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score
Risk Description Impact of a prolonged recovery and a funding gap In the event that the Authority does not develop sufficient and timely proposals to deal with the ongoing or further reductions in funding/resources, there is a risk that the need to close the funding gap may result in identifying measures for unplanned reductions in service spend leading to deterioration or interruption of front line service delivery.	Paul Stone Assistant Director Finance	The Council has updated its Five Year Financial Plan alongside the setting of the Revenue Budget 2020/21 in February 2020. The update reflects the outcomes of the Spending Round 2020 and the Local Government Finance Settlement 2020/21. The continuation of mainstream funding for local authorities at 2019/20 levels is welcome, together with the additional funding for social care including the implementation of the Adult Social Care precept. This additional funding has allowed the Council to invest in critical services, such as adults and children's' social care. However, savings of £65m+ are still required over the medium in order to maintain a balanced annual budget.	<div style="background-color: red; color: white; padding: 5px; text-align: center;">EXTREME</div> <div style="text-align: center;">25</div> <p>Probability Almost Certain 5</p> <p>Impact Very High 5</p>		<div style="background-color: red; color: white; padding: 5px; text-align: center;">EXTREME</div> <div style="text-align: center;">25</div> <p>Probability Almost Certain 5</p> <p>Impact Very High 5</p>	<div style="background-color: yellow; padding: 5px; text-align: center;">High</div> <div style="text-align: center;">12</div> <p>Probability Probable 4</p> <p>Impact Medium 3</p>


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Controls:	<u>REF:</u>	<u>Control Description</u>	<u>Status</u>	<u>Owner</u>
	2011/1 FIN001	Five Year Financial Plan is updated at least and following key Government announcements e.g. Spending Rounds.	In Place/Embedded	E Scriven
	2011/1 FIN002	Departmental budget reductions programmed developed together with a plan of lead-in times for consultation, where appropriate and the identification of workforce reductions.	In Place/Embedded	P Handford
	2011/1 FIN003	Budget Management Strategy Group established to ensure a cohesive approach to the monitoring of departmental budget saving targets, associated consultation activity and budget setting procedures. Departmental representatives following agreed terms of reference are meeting at least monthly with an expectation that the frequency of meetings will be more regular during the budget setting period.	In Place/Embedded	P Handford
	2011/1 FIN004	Budget Monitoring Policy ensures that there is regular reporting to SMTs and Members. The Director of Finance meets with Executive Directors and Cabinet Members to discuss the latest monitoring position. The position is reported to Cabinet and Council on a quarterly basis (effective from 1/4/2020).	In Place/Embedded	E Scriven
	2011/1 FIN005	The Reserves Policy stipulates that the Council's level of reserves will be reviewed at least annually. This includes a projection of the General Reserve balance to ensure that is maintained at an adequate risk assessed level.	In Place/Embedded	E Scriven
	2011/1 FIN006	Positive use of Better Care Fund and alignment of health and social care priorities for integrated working.	In progress/Taking effect	H Jones
				In progress/Taking effect

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	<p>2011/1 FIN007</p> <p>2011/1 FIN008</p>	<p>Lobby Government in ensuring fair funding for Derbyshire. The Council responds to all key Government consultations in respect of the Funding Review which is currently ongoing.</p> <p>Monitor the impact of the National Funding Formula for schools and closely monitor the implications of the High Needs Block level of funding ensuring compliance with the revised Government regulations.</p>		In progress/Taking effect		C Allcock
Risk Ref: 2011/05 Category: Strategic	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score
<p>Risk Description</p> <p><i>Failure to have adequate business continuity plans in place</i></p> <p>The Council's ability to respond to a major incident, such as severe weather (eg. climate change based flooding), fire damage, loss of power or pandemics, and to maintain its critical services to the public. The emerging risk environment, the number and type of emergency and the interdependencies of services is increasingly making continuity or "resilience" a significant focus for the Council. Budget cuts and rationalisation (including resourcing reductions) also challenge the Council in its ability to fulfil its Category 1 Responder statutory duty.</p>	<p>Mike Ashworth</p> <p>Executive Director Environment, Transport and Economy</p>	<p>Following the outbreak of the Corona Virus, the Council has engaged in significant scenario planning across all departments to ensure that the Council is equipped to respond to ensure continuity of services on a priority basis</p>	<p>High</p> <p>10</p> <p>Probability Unlikely 2</p> <p>Impact Very High 5</p>	<p></p>	<p>EXTREME</p> <p>25</p> <p>Probability Almost Certain 5</p> <p>Impact Very High 5</p>	<p>High</p> <p>10</p> <p>Probability Unlikely 2</p> <p>Impact Very High 5</p>


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Controls:	<u>REF</u>	<u>Control Description</u>		<u>Status</u>		<u>Owner</u>	
	2011/05 ETE001	Corporate Business Continuity Plans updated and tested on an annual basis. Plan is held on an external system to which key staff have access to in the event of an emergency.		In Place/Embedded		E Partington	
	2011/05 ETE002	In the event of an emergency, key corporate staff will meet at appropriate intervals, escalating in frequency as required in order to co-ordinate the response.		In Place/Embedded		E Crapper	
	2011/05 ETE001	Departments hold in-depth reviews of their continuity arrangements to ensure key services can continue.		In progress/Taking effect		M Ashworth	
	2011/05 ETE001	ICT and procurement to work with departments to ensure systems procured provide resilience.		In progress/Taking effect		T Gerrard	
	2011/05 ETE001	Cross departmental working in place to support key areas. Skills and training identified.		In progress/Taking effect		E Crapper	
Risk Ref: 2020/01 Category: Strategic	Risk Owner	Progress Update		Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score
Risk Description <i>Increase in Demand on Council Services</i> As demand for services changes, the Council may need to adapt the services it currently offers in order to provide the new or additional services. Failing to manage the	TBC	A new risk owner needs to be identified to ensure that the Council has robust plans to manage increased demands across all departments. The mitigations need to be aligned across all departments.		<div style="background-color: red; color: white; padding: 5px; text-align: center;">EXTREME</div> <div style="background-color: red; color: white; padding: 5px; text-align: center;">20</div> Probability Probable		<div style="background-color: red; color: white; padding: 5px; text-align: center;">EXTREME</div> <div style="background-color: red; color: white; padding: 5px; text-align: center;">20</div> Probability Probable	<div style="background-color: yellow; padding: 5px; text-align: center;">High</div> <div style="background-color: yellow; padding: 5px; text-align: center;">12</div> Probability Probable


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<p>changes could lead to core services being reduced leading to significant impact upon stakeholders and partnerships; potential litigation; fines; risk of injury or death.</p>		<p>Refer to Appendix C</p>	<p>4 Impact Very High 5</p>		<p>4 Impact Very High 5</p>	<p>4 Impact Medium 3</p>
	<p>Ref: Refer to Appendix B</p>	<p>Control Description</p>		<p>Status</p>	<p>Owner</p>	
<p>Risk Ref: 2011/19 Category: Strategic</p>	<p>Risk Owner</p>	<p>Progress Update</p>	<p>Previous Risk Score</p>	<p>Movement Direction</p>	<p>Current Risk Score</p>	<p>Target Risk Score</p>
<p>Risk Description Effective Change Management The Council is undergoing significant organisational change which will create significant workforce issues around having the right skills, productivity and capacity, each of which may adversely impact upon service delivery if not managed. The effect of reducing the Council workforce and pressure for increased productivity without effective change management and</p>	<p>TBC</p>	<p>A new risk owner needs to be identified to ensure that the Council has robust plans to manage effective change management across all departments. The mitigations need to be aligned across all departments. Refer to Appendix C</p>	<p>EXTREME 20 Probability Probable 4 Impact Very High 5</p>	<p>↔</p>	<p>EXTREME 20 Probability Probable 4 Impact Very High 5</p>	<p>High 12 Probability Probable 4 Impact Medium 3</p>


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<p>employee engagement also carries health and attendance risks. The lack of effective change management can lead to significant impact upon stakeholders and partnerships; potential litigation; fines; risk of injury or death and unplanned spending increases.</p>						
	<p>Ref: Refer to Appendix B</p>	<p><u>Control Description</u></p>		<p><u>Status</u></p>		<p><u>Owner</u></p>
<p>Risk Ref: 2011/20 Category: Strategic</p>	<p>Risk Owner</p>	<p>Progress Update</p>	<p>Previous Risk Score</p>	<p>Movement Direction</p>	<p>Current Risk Score</p>	<p>Target Risk Score</p>
<p>Risk Description <i>Supply Chain Failure</i> Failure to manage outsourced contracts could lead to unforeseen increased costs; risk of contracts collapsing; increased carbon footprint.</p>	<p>TBC</p>	<p>A new risk owner needs to be identified to ensure that the Council has robust plans to manage effective change management across all departments. The mitigations need to be aligned across all departments. Refer to Appendix C</p>	<p>EXTREME 25 Probability Almost Certain 5 Impact Very High 5</p>	<p> EXTREME 25 Probability Almost Certain 5 Impact Very High 5</p>	<p>MODERATE 6 Probability Unlikely 2 Impact Medium 3</p>	
	<p><u>Ref:</u></p>	<p><u>Control Description</u></p>		<p><u>Status</u></p>		<p><u>Owner</u></p>



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	Refer to Appendix B					
Risk Ref: 2011/2 Category: Strategic	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score
Risk Description <i>Failure to meet waste management targets</i> The Council is faced with challenges of presenting alternatives to landfill whilst considering environmental impact, increasing financial costs and reputational impacts arising from decisions over types of waste management employed.	Claire Brailsford Assistant Director of Environment	Refer to Appendix C	<div style="background-color: red; color: white; text-align: center; padding: 5px;">EXTREME</div> <div style="background-color: red; color: white; text-align: center; padding: 5px;">20</div>		<div style="background-color: red; color: white; text-align: center; padding: 5px;">EXTREME</div> <div style="background-color: red; color: white; text-align: center; padding: 5px;">25</div>	<div style="background-color: yellow; text-align: center; padding: 5px;">MODERATE</div> <div style="background-color: yellow; text-align: center; padding: 5px;">6</div>
			Probability Probable 4	Impact Very High 5	Probability Almost Certain 5	Impact Very High 5
	Ref:	<u>Control Description</u>			<u>Status</u>	<u>Owner</u>
	Refer to Appendix B					
Risk Ref: 2020/02 Category: Strategic	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score


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<p>Risk Description</p> <p><i>Failure to comply with GDPR and Cyber resilience</i></p> <p>The Council manages a significant amount of personal data and information in relation to service users and employees in the delivery of services using a range of systems and mediums. With data held in a vast array of places and in varying formats, it becomes susceptible to loss, protection, availability, misuse and privacy risks particularly with increased use of electronic transfer, and management (including use of the Government Public Sharing Network). The Council is exposed to financial penalties and reputational impact.</p>	<p>Peter Handford</p> <p>Director of Finance and ICT</p>	<p>TBC</p> <p>Refer to Appendix C</p>	<p>EXTREME</p> <p>15</p> <p>Probability Possible 3</p> <p>Impact Very High 5</p>	<p></p>	<p>EXTREME</p> <p>15</p> <p>Probability Possible 3</p> <p>Impact Very High 5</p>	<p>High</p> <p>12</p> <p>Probability Possible 3</p> <p>Impact Medium 4</p>
	<p>Ref:</p> <p>Refer to Appendix B</p>	<p><u>Control Description</u></p>			<p><u>Status</u></p>	<p><u>Owner</u></p>
<p>Risk Ref: Category: Strategic</p>	<p>Risk Owner</p>	<p>Progress Update</p>	<p>Previous Risk Score</p>	<p>Movement Direction</p>	<p>Current Risk Score</p>	<p>Target Risk Score</p>

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<p>Risk Description</p> <p>Adapting to Climate Change</p> <p>The Council faces a challenge in relation to an increase in inclement weather patterns (flood, heat waves, drought, windstorm, increased snow fall) building the right infrastructure and new statutory flood and water risk management duties. Having sufficient financial resources and flexibility to address these challenges may become increasingly difficult.</p>	<p>Geoff Pickford</p> <p>Service Director, Highways</p>	<p>TBC</p> <p>Refer Appendix B</p>	<p>MODERATE</p> <p>8</p> <p>Probability Unlikely 2</p> <p>Impact High 4</p>	<p></p>	<p>High</p> <p>12</p> <p>Probability Possible 3</p> <p>Impact High 4</p>	<p>MODERATE</p> <p>6</p> <p>Probability Possible 2</p> <p>Impact Medium 3</p>
	<p><u>Ref:</u></p> <p>Refer to Appendix B</p>	<p><u>Control Description</u></p>			<p><u>Status</u></p>	<p><u>Owner</u></p>
<p>Risk Ref: 2011/9</p> <p>Category: Strategic</p>	<p>Risk Owner</p>	<p>Progress Update</p>	<p>Previous Risk Score</p>	<p>Movement Direction</p>	<p>Current Risk Score</p>	<p>Target Risk Score</p>
<p>Risk Description</p> <p>Protection of Children and Vulnerable Adults</p> <p>Failure to protect the most vulnerable in our society could lead to significant fines; special measures; litigation; decreased staff morale; reputational damage</p>	<p>Helen Jones Strategic Director Adult Social Care and Health</p> <p>Jane Parfremment Director or Children's Services</p>	<p>TBC</p> <p>Refer to Appendix B</p>	<p>EXTREME</p> <p>15</p> <p>Probability Possible 3</p> <p>Impact</p>	<p></p>	<p>EXTREME</p> <p>15</p> <p>Probability Possible 3</p> <p>Impact</p>	<p>HIGH</p> <p>10</p> <p>Probability Unlikely 2</p> <p>Impact</p>

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			Very High 5		Very High 5	Very High 5
	Ref:	Control Description			Status	Owner
	Refer to Appendix B					
Risk Ref: Category:	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score
Risk Description <i>Maintenance of Assets</i> Failure to maintain our assets could lead to significant fines; significant litigation; decreased staff morale; reputational damage; HSE investigation	Dave Massingham Director of Property Geoff Pickford Service Director - Highways	TBC Refer to Appendix B	EXTREME 15 Probability Almost Certain 5 Impact Medium 3		EXTREME 15 Probability Almost Certain 5 Impact Medium 3	MODERATE 6 Probability Unlikely 2 Impact Medium 3
	Ref:	Control Description			Status	Owner
	Refer to Appendix B					
Risk Ref: 2018/5 Category	Risk Owner	Progress Update	Previous Risk Score	Movement Direction	Current Risk Score	Target Risk Score

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<p>Risk Description</p> <p><i>Failing to comply with Statutory Duties</i></p> <p>Lack of knowledge and understanding of Departmental Legislative duties meaning the Council is at increased risk of special measures, HSE investigation, Corporate manslaughter charges, personal prosecution and Insurers refusing to provide indemnity on property or liability claims.</p>	<p>TBC</p>	<p>TBC</p>	<p>EXTREME 25</p> <p>Probability Almost Certain 5</p> <p>Impact Very High 5</p>	<p>↔</p>	<p>EXTREME 25</p> <p>Probability Almost Certain 5</p> <p>Impact Very High 5</p>	<p>MODERATE 10</p> <p>Probability Unlikely 2</p> <p>Impact Very High 5</p>
	<p><u>Ref:</u></p>	<p><u>Control Description</u></p>			<p><u>Status</u></p>	<p><u>Owner</u></p>
<p>Risk Ref: 2018/4 Category: Strategic</p>	<p>Risk Owner</p>	<p>Progress Update</p>	<p>Previous Risk Score</p>	<p>Movement Direction</p>	<p>Current Risk Score</p>	<p>Target Risk Score</p>
<p>Risk Description</p> <p><i>Ineffective workforce planning</i></p> <p>A failure to recruit and retain experienced staff; a lack of succession planning in order to ensure effective continuity of key skills and knowledge at all levels including leadership skills. Resulting in unfilled posts, accepting a lower calibre of staff, increasing training requirement to upskill new staff, vital knowledge</p>	<p>Emma Crapper</p>	<p>TBC</p>	<p>EXTREME 25</p> <p>Probability Almost Certain 5</p> <p>Impact High 5</p>	<p>↔</p>	<p>EXTREME 25</p> <p>Probability Almost Certain 5</p> <p>Impact High 5</p>	<p>EXTREME 20</p> <p>Probability Almost Certain 5</p> <p>Impact High</p>

Appendix B

lost leading to service delivery issues						4
	<u>Ref:</u>	<u>Control Description</u>			<u>Status</u>	<u>Owner</u>
	TBC					

Category	Risk Identifier No	Risk Description	Dept	New Score			Previous Score			Change	Mitigation - Current Comments	Link to Council Plan	Risk Owner
				Impact	Likelihood	Previous Score	Impact	Likelihood2	Current Score				
Financial	2011/1	<p>UPDATED Impact of a prolonged recovery and a funding gap</p> <p>A prolonged, slow recovery to the economy is likely. The Authority is faced with rising demand for its services countered by a dramatic fall in funding and income - creating a potentially significant "funding gap". This mismatch between service demand and budget availability could lead to an increase in financial instability. Pressure is also present between "demand-led services" (eg social care) and other priorities.</p>	ALL	5	5	25	5	3	15	DOWN	<ul style="list-style-type: none"> • Five year plan (2016/7 to 2020/21) in place and reflects planned use of General Reserves to support demographic needs (Adult Care) in the medium term. • Departmental budget reductions programme developed together with a plan of lead-in times for consultation, where appropriate, and the identification of workforce reductions. • General/Earmarked Reserve positions risk assessed, regularly monitored, and reported to Cabinet. • Priority based budgeting model in place. with development of departmental financial modelling systems. • Budget monitoring processes and procedure embedded (including planned "budget holder monitoring" roll-out. • Regular reporting to Members and briefing about potential implications of non-achievement of cuts. • 'Lean thinking' review of Council wide processes including service redesigns. • Improved models of work across organisations to reduce duplication. • Engagement and communication with key stakeholders and Local Area Committees. • Property rationalisation – including work with district and health colleagues • Positive use of Better Care Fund and alignment of health and social care priorities for integrated working. • Established "Fairer Deal for Derbyshire" campaign. • Active in all public consultations and continued Government lobbying. • Maximising alternative funding streams (ie. Combined Authority). • Utilise asset based approaches to develop social capital, helping to build natural communities of interest away from services. • Four year funding offer from Government to be considered to help support the development of a robust medium term financial plan • Additional budget of approximately £5m per annum for Adult Care from the Adult Social Care Precept • Prioritisation process plus underspends on Public Health contracted activity in 2015-16 have resulted in non-recurrent reserves of approximately £2.6m for investment in prevention interventions. • Allocation of prevention funding to be agreed via panel process May 2016. • Spending review 2019 has given indication of significant additional funding alongside a clear indication of revised saving plans as part of the latest Five Year aplan indicators. 	Value for money	ALL
Financial	2011/18	<p>DELETED Provision of services to schools</p> <p>All services fully trading or partly trading with schools are under pressure to continue to achieve reductions in costs as well maintain or increase income. The reduction in resource could lead to impaired service delivery.</p> <p>Customer expectations of price/quality/responsiveness are raised and this will place services under more pressure.</p> <p>There is increasing competition from the private sector which could result in a loss of income.</p> <p>As more schools convert to academies there will be a loss of grant and a potential loss of income.</p> <p>If schools budgets are flat or decrease this will have an impact on their ability to buy council services</p>	ALL	4	3	12	4	4	16	UP	<ul style="list-style-type: none"> • Schools funding consultations have awareness of implications for trading. • Assistant Director, Traded Services & co-ordinating team in post to provide capacity & oversight. • Schools Trading Governance including Cabinet /CMT /Departmental leads in place. • Schools Trading Governance including Cabinet /CMT /Departmental leads in place. • of council systems to support schools trading including infrastructure. • better promotion of council services. • Customer relationship management in place through networks and communication although needs improving. • Customer relationship management in place through networks and communication although needs improving. • Development of links with other councils to seek regional responses to MAT's. • performance of school services is being developed 	High performing council services	Angela Beighton
Financial	2011/10	<p>TO BE AMALGAMATED Looked after Children</p> <p>An increase in Looked After Children (LAC) numbers and therefore costs - due to increasing demand pressures mirroring national trends, UASC, reductions in Early Help Services and rising placement costs.</p> <p>A reduced capacity to identify and address emerging needs early on runs the risk that vulnerable children's issues will escalate with potentially an increased number being admitted into our care.</p> <p>Currently Derbyshire has 40 50 LAC per 10,000 children which is very low compared with 55.5 for our statistical neighbours</p>	CS	5	4	20	5	4	20	—	<ul style="list-style-type: none"> • Continue to highlight pressures and risks to central Government via ADCS. • identified to increase social work capacity to strengthen ongoing work with families to avoid situations escalating for some children who might otherwise come into care. • Delivery of LAC sufficiency project to increase placement availability and reduce costs. • recruitment and support to foster carers. • Social Research to increase the number of children who can be safely reunified with family. • services especially where services have reduced. • young people in care to return home to family • Mitigate impact from Early Help review via 3 year transition team to support partners in developing their Early Help practice • Growth funding • Ongoing • Project with Dartington • Closely monitor impact of Early Help • To strengthen practice on reunification i.e. encouraging 	A focus on prevention and early intervention	Allison Noble

Category	Risk Identifier No	Risk Description	Dept	New Score			Previous Score			Change	Mitigation - Current Comments	Link to Council Plan	Risk Owner
				Impact	Likelihood	Previous Score	Impact	Likelihood2	Current Score				
Financial	2011/12	TO BE AMALGAMATED Continuing Healthcare Tighter interpretation of eligibility to NHS funded Continuing Care (and changes in NHS at national/local level) resulting in some people with complex additional care needs, including challenging behaviour, becoming Council's funding responsibility.	AC	5	4	20	5	4	20	—	<ul style="list-style-type: none"> DCC Senior Management representation established on Board of 4 out of 5 Clinical Commissioning Groups covering Derbyshire. Escalate Continuing Healthcare discussions Establish joint funding and lead commissioning priorities Agree with CCGs how to review clients affected. On-going work to establish joint solutions approach across agencies. Contributing to ADASS/LGA/NHS review of process to establish shared tools Social Work teams enhanced to establish 7 day working capability via Care Act Grant monies Increased frequency of escalation discussions Improve flow across all services Explore development of joint commissioning strategy and pooled budget for Learning Disability Services to minimise focus on co-ordination to ensure better value for money 	Value for money	Roger Miller
Government Modernisation Agenda	2011/19	Effective Change Management The Council is undergoing significant organisational change which will create significant workforce issues around having the right skills, productivity and capacity, each of which may adversely impact upon service delivery if not managed. The effect of reducing the Council workforce and pressure for increased productivity without effective change management and employee engagement also carries health and attendance risks.	ALL	4	5	20	4	5	20	—	<ul style="list-style-type: none"> As part of service planning, build a definitive workforce reduction plan to achieve the budget reductions Ensure that any Employee Communication Strategy is able to support the workforce reduction programme, maintaining and improving levels of engagement Ensure HR resources are effectively deployed to support the change programme Put in place a workforce development plan which includes plans to : <ol style="list-style-type: none"> Develop management capacity and capability through a Leadership Development programme (Derbyshire Manager) Ensure that My Plan is effective so that employees' objectives support changing service needs and that skills development plans are in place to support new ways of working Improve provision of L&D processes (L&D Review) and ensure an effective programme of reskilling is in place to support workforce realignment Put in place an HR/OD Strategy which includes plans to <ol style="list-style-type: none"> Mitigate compulsory redundancies, improve redeployment and talent management through the timely development of an Internal Jobs Market Enable increased flexibility and support remodelling of the workforce by implementing remaining job families and contracting employees with the Council rather than departments Use the Organisational Design principles effectively in developing new structures Review employment policies and market positioning Ensure that appropriate Counselling Service capacity is in place to support possible increased demand. Review cross council processes to ensure they are lean and effective IIP accreditation and action plan implementation. <p style="color: red;">Council priorities are at the heart of change management activity management is applied across the Council</p> <p style="color: red;">• Ensure Enterprising • Looking at how consistent change</p>	High performing council services	ALL
Government Modernisation Agenda	2011/22	TO BE AMALGAMATED Central Government Reforms Demand on the integration and alignment agenda and increased expectation of partnership working combined with continued organisational change. Potential funding dependent upon performance targets being met. Examples include NHS reform and the establishment of Better Care Fund to advance integrated reform of health and social care. Opportunities are presented by working in Combined Authority and LEP structures.	ALL	5	5	25	5	5	25	—	<ul style="list-style-type: none"> Corporate Partnership Protocols. Continued dialogue with all partners to ensure a collaborative approach to improving outcomes for all young or looked after individuals. Agreed (Adult Care) each organisation will monitor the schemes they are leading on. Alignment of Adult Care and Health & Wellbeing Boards. Governance structure being established to report to Health and Wellbeing Board. Continuing engagement with developing Clinical Commissioning Groups Commissioning of Children and Adolescents Mental Health Service is being rolled out. Engagement of all stakeholders in the process. Stakeholder and Provider Engagement Forums established. Joint agreement on plans to deliver BCF outcomes. Joint Health and Wellbeing Strategy refreshed in 2014. Escalated joint working with acute hospitals and CCGs. Incorporate service added targets. Joint commissioning priorities refreshed for 2014/15. Whole system dialogue and contribution to Better Care Fund development. Incorporate of service targets into CCG performance targets. Escalate CHC discussions to Assistant Director level when necessary. Combined Authority working represents opportunities for freedoms and flexibilities in relation to securing the prosperity of the area and to be involved in devolution discussions. Working with the Local Enterprise Partnership, for which DCC is the Accountable Body, will ensure we are in a position to take advantage of funding streams that are distributed via the LEP, particularly in relation to transport, infrastructure and economic growth. 	Value for money	Roger Miller, Linda Dale

Category	Risk Identifier No	Risk Description	Dept	New Score		Previous Score		Current Score	Change	Mitigation - Current Comments	Link to Council Plan	Risk Owner
				Impact	Likelihood	Impact	Likelihood2					
Regulatory & Legislative Failures	2011/21	<p>Collective Challenge under Judicial Review</p> <p>The Council is exposed to possible challenges over decisions on continuation of some services in the face of budgetary restrictions if it fails to incorporate key considerations.</p>	ALL	4	3	12	4	3	12	<ul style="list-style-type: none"> • Projections in Joint Strategic Needs Assessment helps providers plan for the future. • Equality Impact Assessments supporting decision making process. • Appropriate relevant consultation. • Stakeholder consultations • Compliance with good project management guidance 	Value for money	ALL
Emergency Response & Service Continuity	2011/20	<p>UPDATED Supply Chain Failure</p> <p>In a prolonged recession and slow recovery, supplier instability in particular, is certain to increase and the new Care Act increases responsibility to monitor supplier resilience. The Council may also be faced with the failure of suppliers to meet expectations. Private sector arrangements may be challenged by a tension between the profit motive and the public service ethos. The potential implications of a disorderly Brexit could also affect the supply chain.</p>	ALL	5	5	25	5	5	25	<ul style="list-style-type: none"> • Development of joint commissioning arrangements. • Enhance contractual negotiations with expectation of business continuity plans in place. • Further development of risk based contractual negotiations. • Strengthening of commissioning processes. Maintain Associate Commissioner status with Clinical Commissioning Groups for 2015/2016 contracts. • Regular monitoring meetings with Derbyshire Community Health Services. • Use of regulatory data and market analysis information. • Transparency about placement information helps providers plan for the future. • Plans to develop sector wide approaches and innovative approaches to delivering health support in care homes - locally and at county level. • Identifying ownership of all providers in Derbyshire to better understand financial positions. • Joint strategic work with councils • Include governance standards into contract specifications. • Communicate with market about gaps by developig a full range of market position statements. • Promoting use of direct payments and direct care to support areas of deficiency. • Broaden provider range. • Develop responses with health commissioners to maintain capacity • Consolidate specialist social worker input to compliance team to supplement and improve effectiveness of social worker contributions to reducing safeguarding concerning the adult social care sector. • Brexit mitigation is being co-ordinated within the Council 	High performing council services	ALL

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				Impact	Likelihood	Previous Score	Impact	Likelihood2	Current Score				
Government Modernisation Agenda	2011/8	<p>TO BE AMALGAMATED Implementation of Self Directed Support in line with the Personalised Care Agenda</p> <p>The Council is required to ensure people have real control over the resources used to secure their care and support. The Council faces challenges including in (a) meeting Direct Payment targets, (b) people not choosing our "in-house" services and (c) new responsibilities for prisoners.</p>	AC	4	4	16	4	4	16	—	<ul style="list-style-type: none"> Continue Self Directed Support as the main delivery approach within Adult Care. Continue Self Directed Support training programmes. Trusted Befriending Scheme is established Adopt a personalised care approach within all Council departments. Develop self-directed care strategy and robust preparation Trusted PA Register in place. Implications of increased complexity of casework being handled and the specific requirements of the Mental Capacity Act 2005 , Deprivation of Liberty Safeguard regulations and recent legal judgements has resulted in increase in probability score. Established Direct payments performance and standards group. Assessment and decision making tools reviewed and updated continuously. Projections of potential demand fr self-funded carers, assessments in prison and advocacy. Review Assessment Pathway under continuous review Investment in social work training. Specific investment to create specialist response to prisoners. 	Empowered and self-sufficient	Roger Miller
Regulatory & Legislative Failures	2011/2	<p>UPDATED Failure to Meet Waste Management Targets</p> <p>The Council is faced with challenges of presenting alternatives to landfill whilst considering environmental impact, increasing financial costs and reputational impacts arising from decisions over types of waste management employed.</p>	ETE	4	3	20	4	3	25	U P	<p>Derbyshire County Council and Derby City Council jointly let a long term waste contract with Resource Recovery Solutions (Derbyshire) Ltd (RRS), to manage residual waste and Household Waste Recycling Centres in Derbyshire and Derby. The contract commenced in 2010. As a part of this contract a waste treatment facility was proposed in Sinfyn, Derby City. After a protracted planning process, financial close was finally achieved in August 2014. Construction commenced in September 2014 and is now complete. Following delays in construction the long stop date of the contract elapsed on 30 September 2018. The Councils served a Funders' Direct Agreement (FDA) Notice on the Contractor on 10 April 2019 requiring the Funders to step in to the project. This was the first in a series of steps which could potentially lead to termination of the Project Agreement.</p> <p>The funders subsequently issued a legal notice – called a "No Liquid Market" notice – the councils did not dispute the notice and consequently the contract was terminated 14 days after being served on 2 August 2019.</p> <p>Contingency measures have been put in place to make sure waste continues to be dealt with, and that recycling centres and waste transfer stations continue to operate. These services are being provided by waste management company Renew under a new two-year contract. This contract includes work on the waste treatment facility. Work is underway to determine the facility's condition and capability, this will ascertain what measures need to be in place for the facility to become fully operational. Officers are closely monitoring the Service Continuity Contract to ensure that day-to-day waste and recycling services continue and the waste treatment facility is being safely and securely managed and maintained. Work is progressing with the implementation of governance arrangements, systems and procedures for the new contract.</p> <p>The councils have now entered negotiations with the banks to agree an "estimated fair value" for the facility that will be worked up by an independent expert, taking into account all of the costs of rectifying ongoing issues at the facility, and the costs of providing the services to meet the agreed contract standards.</p> <p>Project planning is underway on services post 2021 when the Service Continuity Contract comes to an end. A Work Plan of key actions is being prepared, resources allocated and will be subject to regular review.</p> <p>Work towards the Council Climate and Carbon Reduction Manifesto pledges.</p>	Value for money	Claire Brailsford
Regulatory & Legislative Failures	2012/1	<p>TO BE AMALGAMATED Information Governance, Cyber and Social Media</p> <p>The Council manages a significant amount of personal data and information in relation to service users and employees in the delivery of services using a range of systems and mediums. With data held in a vast array of places and in varying formats, it becomes susceptible to loss, protection, availability, misuse and privacy risks particularly with increased use of electronic transfer, and management (including use of the Government Public Sharing Network). The Council is exposed to financial penalties and reputational impact.</p>	ALL	5	3	15	5	3	15	—	<ul style="list-style-type: none"> The Council has achieved its ISO 27001 status and work continues to maintain this accreditation. Independent health checks and penetration tests. The on-going programme of activities, such as training for employees who process personal data, regular communication and continual review and updating of security policies continues. A security breach reporting system is also in place. Local and regional public health information governance groups established. Public Health contracts to be negotiated with information access rights. Consider co-locating of community teams to ensure access. Protocols established with schools prescribing requirements for accessing Frameworki records. Dialogue with partners about requirements. Secure email account establish for each area in CAYA. Ongoing work to secure effective information transfer. Secure methods of communicating controlled and restricted data utilised as required (post, encrypted email, GCSx). DCC has achieved PSN Code of Connection - the practices of using GCSx (via PSN) are enforced through protocols and policies. PSN certification is reassessed annually in September. Memorandums of Understanding in operation to enforce/augment communication channels with external partners. 	High performing council services	Jo White

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Organisational Change	2011/14	To be amalgamated Residential Care The Authority faces a challenge in maximising use/potential of planned Residential Community Care Centres and extra care developments as well as ensuring all residential care accommodation is maintained to a level in excess of legal expectations.	AC	4	3	12	4	5	20	—	<ul style="list-style-type: none"> Tight budget management at corporate and responsibility care level and within programme board. Monitoring of high level risk of individual projects at SMT level. Positive use of Better Care Fund and alignment of health and social care priorities for integrated approaches to working. Market management. Strategic Direction for DCC Direct Care Residential Services 2015/20 Plan developed and approved by Cabinet will; <ul style="list-style-type: none"> seek to consult on the closure of 5 residential care homes which are unsustainable in the long term ensure maximum use of Extra Care minimise use of Residential placements seek to drive down in house unit costs maximise funding from NHS partners surveys regularly completed and maintenance programmes developed and subject to robust business cases. Linked to risk 2012/2 Maintenance of Assets <ul style="list-style-type: none"> Asset 	High performing council services	Roger Miller
Emergency Response & Service Continuity	2011/6	ICT Infrastructure & Systems The procurement of new and replacement computer systems that meet organisation and departmental requirements. In particular; (a) The availability of systems capable of meeting complex business requirements (b) The costs associated with replacing, procuring and running systems (c) Resource capability for implementing new large scale ICT projects (d) The ability to provide technical support on what are now becoming increasingly complex systems. (e) Continuity of service during transfer to new systems. (f) The ability to satisfy internal/external security requirements (e.g. PSN / ISO 27001, CoCo etc). (g) Capacity of systems to cope with the level of demand.	ALL	4	4	16	4	4	16	—	<ul style="list-style-type: none"> A new governance checklist has been developed to ensure that all the necessary approvals and funding is in place prior to project initiation. A communications strategy is agreed at the start of each project to ensure that all stakeholders are appropriately engaged. Procurements are supported by clear departmental requirements documentation. Close liaison with suppliers and rigorous market testing including 'Supplier Discovery Days' are used where appropriate. A formal project management approach with agreed roles, agreed documentation and rigorous controls. Rigorous testing schedules and temporary parallel running of systems. Project delivery process includes assessing training needs. Senior departmental representation on project teams. Replacement of strategic ICT systems incorporated in departmental planning processes. Continued training for ICT staff on current technologies Using lessons learned from past procurements to improve procurement process for other departments. Close liaison with client department in system design. Issues arising during implementation are resolved jointly with senior supplier representatives. Toolkit is being revised to ensure that service requirements are fully taken into account. Senior level discussions with suppliers to maintain dialogue and set expectations. improved performance management of contract compliance in conjunction with stakeholders. Personal email use-is not allowed. devices; antivirus and other security tools are kept under review <ul style="list-style-type: none"> Looking at how to improve defences against phishing. Encryption on 	High performing council services	Peter Handford
Emergency Response & Service Continuity	2011/11	Adapting to Climate Change The Council faces a challenge in relation to an increase in inclement weather patterns (flood, heat waves, drought, windstorm, increased snow fall) building the right infrastructure and new statutory flood and water risk management duties. Having sufficient financial resources and flexibility to address these challenges may become increasingly difficult.	ALL	4	2	8	4	2	8	—	<ul style="list-style-type: none"> Local climate impact profile completed and Level 1 of indicator on target. Completion of asset management inventory - in particular Road Gullies. Flood data analysed to determine priority for further investigation. Database extended as a result of recent flood incidents. Implemented recommendations of the Pitt Review. Implemented new Flooding & Water Act 2010 responsibilities. Link to partnership (DPF) priorities (Climate Change Performance measures). Contribute to comprehensive risk assessment of the effect of projected future climatic changes. Some exchange of data with engaged planning Authorities regarding flood risk posed by future development. Technical Flood Risk Group comprising all Risk Management Authorities meet quarterly to resolve problems affecting residential properties, businesses or infrastructure. Implementation of flood response protocol for Derbyshire including all Risk Management Authorities. Consulting on a Local Flood Risk Strategy for Derbyshire, due to be published June 2015. Review DEFRA proposals for SW drainage to be the responsibility of the Planning Authorities and Derbyshire's proposed role as Statutory Consultee. Flood Warden schemes being developed in high flood risk areas. Anticipated establishment of £2 million contingency fund. DVMWHS Environmental research projects planned. My City, My River - Derby Provision and maintenance of silt traps and fuel interceptors proposed. Pursue likely contraventions of the Highways Act resulting in pollutants discharging onto the Highway. Derbyshire Flood Risk management Strategy, published December 2014, sets out the action plan to mitigate flood risk across the county. Implementation of the climate change manifesto 	High performing council services	Geoff Pickford

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				Impact	Likelihood	Impact	Likelihood2					
Emergency Response & Service Continuity	2011/5	<p>UPDATED Adequacy of Business Continuity Planning The Council's ability to respond to a major incident, such as severe weather (eg. climate change based flooding), loss of power or pandemics, and to maintain its critical services to the public. The emerging risk environment, the number and type of emergency and the interdependencies of services is increasingly making continuity or "resilience" a significant focus for the Council. Budget cuts and rationalisation (including resourcing reductions) also challenge the Council in its ability to fulfil its Category 1 Responder statutory duty.</p>	ALL	5	2	10	5	2	10	<p>On-going Mitigations;</p> <ul style="list-style-type: none"> Business Continuity Plan part of the "Council Capacity" section in the Council Plan. Business Continuity Plan updated and tested regularly (plan reviewed annually, training and exercises held annually) Business Impact Analysis updated regularly <p>Planned Mitigations;</p> <ul style="list-style-type: none"> A major upgrade to the Council's core data network is complete which has increased resilience. Installation of virtual switching system has been completed with separate generator. ICT resilience is designed into key services. Increased ICT resilience is provided through the 2nd data centre which has been enhanced. Critical Salvage Strategy, Document Management Strategy and Procurement Strategy incorporated into Corporate Business Continuity Plan 2014. Corporate Business Continuity Plan reissued August 2015 <p>Report to CMT September 2015.</p> <ul style="list-style-type: none"> New converged infrastructure to be installed in Data Centre leading to improved performance and resilience. Auditing of Business Continuity Arrangements completed July 2015. Adult Care undertaking joint procurement for case recording system with Children's Services <p>undertake a full review of Business Continuity Plans in January 2019 with them considering the effectiveness and consistency of these plans prior to this date</p> <p>Training is to be delivered in the next quarter to all managers who will need to have input into writing a business continuity plan.</p> <p>NB. This risk will remain on the Strategic Risk Register for monitoring purposes</p>	High performing council services	Liz Partington

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Regulatory & Legislative Failures	2011/9	Protection of Children and Vulnerable Adults The Council has a statutory responsibility to protect children and vulnerable adults from harm.	AC/ CS	5	3	15	5	3	15	-	<ul style="list-style-type: none"> Robust safeguarding procedures, including within Starting Point to embed multi-agency thresholds and pathways. chairing of Derbyshire Children's Safeguarding Board ensures robust challenge to all agencies informed by audit activity to reduce social worker caseloads to reduce levels of risk. Help/Social Care. Independent Chair Adults and Childrens Safeguarding Boards appointed Deprivation of liberty safeguards (DOLs) training and sustained additional capacity. Guidance to providers and fieldwork staff about thresholds for DOLs in light of Supreme Court Judgements. Safeguarding teams to be area based for improved service and efficiencies. Action plan developed to support response to the lower threshold for deprivation. Development of prevention strategy to provide extended options to meet needs. Introduced direct care trading. Policy and procedure review to ensure Care Act compliance. 	A focus on prevention and early intervention	Roger Miller / Jane Parfremment
Emergency Response & Service Continuity	2012/2	Maintenance of Assets The property rationalisation programme is currently under review which may delay further the provision of suitable accommodation and may not generate anticipated capital receipts. Combined with further cuts to maintenance and repair budgets services face maintenance challenges and a shortage of suitable accommodation until the programme is completed. Highway and Countryside Assets - risk of failure of assets, e.g. landslips, reservoirs, blocked gullies causing flooding, safety fencing, street lighting columns etc	CCP/ET E	3	5	15	3	5	15	-	<ul style="list-style-type: none"> Asset Management Plan in place Capital Programme in place Joint working with other district councils/partners. Location independent working initiated. Regular Health and Safety inspections undertaken. Annual premises reviews undertaken by Property Division to identify defects and remedial actions. Defect reporting procedure in place. Relevant testing schemes in place. Staff access to building information. Develop building facilitator course for staff with responsibility for buildings. Customer Profiling intended to provide optimal solution on where presence should be focused. Review property strategy. 	Value for money	Dave Massingham / Geoff Pickford
		Maintenance of Assets Cont.				15			15	-	<ul style="list-style-type: none"> Buy-in for IT infrastructure needed to support project. Continue to develop Asset Management Strategy and associated policies and work on high risk locations Accredited Highways and Structures Inspection Regime Intelligent Gully Cleansing procedures being rolled out across all Boroughs and Districts to improve maintenance, resolve defects, and enhance history of actions Continue to develop Asset Management of the structures stock, gather retaining walls data and assess associated risks Manage large raised reservoirs on DCC property to comply with Floods and Water Act 2010 Undertake routine inspection and maintenance on canal assets. Agree surveillance regime particularly following storm or high rainfall events. Highway safety and service inspections in accordance with the CoP Three year, £23.3m, investment into LED and dimming technology has been approved. This will include the replacement of 22,000 5 and 6m columns considered to have a higher risk of failure within the lifetime of the LED. Start date may be Q4 of 2016/17. Columns above the 6m height will continue to be assessed and monitored and will be subject to future capital LTP replacement programmes Annual inspection of "A" road network; "B" road network inspection every 2 years Working towards a risk based approach to asset management in line with the recently released Code of Practice - "Well Maintained Transport Infrastructure". Corporate Landlord Statutory Compliance Monitoring Corporate Property Asset Management Strategy New Adverse Weather Policy being developed during 2018 	Value for money	Dave Massingham / Geoff Pickford

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Government Modernisation Agenda	2013/2	Impact of welfare reform Welfare reforms and widening gaps between richest and poorest residents may increase the number of service users in need/poverty which could create increased family referrals and pressure on adult, children service and public health resources.	AC/ CS/ HAC	4	5	20	3	5	15	-	<ul style="list-style-type: none"> New arrangements for administration of self-funding. Anti-poverty strategy implementation plan being developed by DCC. Health and Wellbeing Strategy to be refreshed to increase economic wellbeing and poverty agenda. Protection and enhancement of current welfare rights support service. Media releases on Public Health issues. Regular briefings for Health and Wellbeing Portfolio holder and board. Services targeted at areas of greatest need. Credit Union, Food Bank and Children's Centre initiatives in place. Director of Health Annual Report recommends partner actions. Payment of minimum wage for DCC employees. Monitor commitment to implementation of DHAR recommendations. 	A focus on prevention and early intervention	Roger Miller/Linda Dale/Anne Hayes
Financial	2015/03	UPDATED D2N2 The Council is the Accountable Body to the Local Growth Fund from 1 April 2015 and will be responsible for the administration of the £170m+ funding. There is a possibility of grant clawback and the Council may be asked to take on that risk. There may be a possibility of grant funds being required to be underwritten if grants are paid in arrears i.e. impact on the cashflow position of the Council. Grantor's rules on disposal of assets and/or change use of assets to ensure that any receipt from the sale of the asset is reimbursed to the grant issuing body and that relevant negotiations take place to minimise the risk of clawback to the accountable body. The risk of grant clawback, particularly for capital expenditure, could be indefinite in some cases.	ETE/ CCP	4	3	12	4	2	8	D O W N	<ul style="list-style-type: none"> Service Level Agreement is explicit in terms of risk of grant clawbacks. Register of assets purchased with grant funds should be maintained and verified on a regular basis. Ensure that expenditure is eligible under the grant terms and conditions and ensures compliance with the funding bodies rules and guidance, and to be aware of any changes to those rules or guidance. CSR15 confirmed commitment of £12bn funding until 2020-21, confirming indicative allocations. 	Value for money	Peter Handford
Financial	2018/03	UPDATED GDPR The Council has a responsibility to comply with GDPR legislation incorporated into the Data Protection Act 2018 to avoid potentially large fines by the Information Commissioner and increased potential of Civil Action. This risk is linked to risk 2012/1 Information Governance, Cyber and Social Media	All	4	4	16	4	3	12	-	<ul style="list-style-type: none"> IGG has oversight. Working group established Summer 2017 and action plan in place. ICO audit in September 2017 found adequate arrangements in place. Information audit completed and lawful basis for processing identified. Privacy Impact Assessment process embedded in procurement and data sharing projects. Training of staff managing data undertaken. Extensive GDPR training programme rolled out across the Council and within schools. Significant progress has been made against the ICO Action plan Emerging risk: some third party providers have refused to agree to amended contract conditions. Legal and procurement teams working together to resolve and identify key risk contracts. Emerging Risk: systems compliance. To be addressed by ICT Strategy. Emerging risk - delayed Subject Access Request (SAR) responses are being actively monitored by the ICO. Additional staff being recruited to reduce backlog 	High performing council services	Simon Hobbs



Derbyshire County Council

Risk Management Strategy & Implementation Plan

2020-2021

Version Control

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1. Introduction

The Council Plan 2020-2021 is clear in its ambitions for Derbyshire County Council to be efficient and high performing, delivering value for money services as well as becoming an Enterprising Council transforming its traditional service delivery models.

Fundamental to the Strategy is the identification, evaluation and treatment of risk, which together with a framework for continuous improvement to enable the Council to transition to an Enterprising model.

New service models will necessitate closer working arrangements with new and existing partners including public and private sector organisations, the voluntary and community sector in providing cost effective public services.

As risk changes through the evolution of the Council Plan, it is vital to ensure that the risk model is fit for purpose and in line with these altering opportunities and hazards. Therefore, the Council will adopt the ISO 31000 2018 Enterprise Risk Management Principles which will allow the Council to develop as an Enterprising Council.

This Strategy will underpin the Council's objectives by assisting Departments and Councillors to identify existing and changing risks as well as opportunities presented to enable the Council to make sound business decisions based on a robust framework.

The right risk strategy will:



2. Purpose

As set out in the “Working for Derbyshire” Council Plan the Council has clear ambitions for an efficient high performing Enterprising Council delivering Value for Money (VfM) services. This will result in a challenging and ambitious programme of transformation and change over the medium term 2020-2021. Fundamental to delivering these ambitions is the way the Council implements sound management of risks and opportunities.

The Council is committed to adopting best practice in its management of risk to ensure risk is of an acceptable and tolerable level in order to maximise opportunities and demonstrate it has full consideration of the implications of risk to the delivery and achievement of the Council’s outcomes, strategic aims and priorities.

The Council is clear that the responsibility for managing risk belongs to everyone across the Council and that there needs to be a good understanding of the nature of risk by all stakeholders. This is fundamental in making informed decisions and is becoming increasingly important as the Council pursues innovative ways of working in carrying out its service delivery.

The Council will adopt an open approach to risk and strive to be risk aware - being prepared to accept risk at a tolerable level that can be managed and mitigated whilst ensuring that the most vulnerable are protected and there is increased collaboration with our partners, communities and residents.

This Strategy and its objectives are inherent to good governance practices and they have been endorsed by the Council’s Cabinet and Corporate Management Team (CMT). The content of this Strategy will be reviewed on an annual basis with any significant changes recommended to Cabinet for approval.

3. Risk Management Policy Statement

The Council is committed to a proactive approach to risk management which is integrated into the policy framework, planning and budgeting cycles.

The Council recognises the value of maintaining an effective risk management culture which will seek to identify, analyse, manage and control the risks it faces.

The Council acknowledges that risk cannot be totally eliminated and may sometimes need to be embraced as part of an innovative approach to problem solving.

The Council is, within the above context, committed to the management of risk in order to:

- Deliver the ambition of an Enterprising Council.
- Ensure that statutory obligations and policy objectives are met;
- Prioritise areas for improvement in service provision and encourage meeting or exceeding customer and stakeholder expectations;
- Safeguard its employees, clients or service users, members, pupils, tenants and all other stakeholders to whom the Council has a duty of care;
- Protect its property including buildings, equipment, vehicles, information and all other assets and resources;
- Identify and manage potential liabilities;
- Maintain effective control of public funds and efficient deployment and use of resources achieving VfM;
- Preserve and promote the reputation of the Council;
- Support the quality of the environment;
- Learn from previous threats, opportunities, successes and failures to inform future management of risks.

4. Risk Appetite Statement

This statement details the level of risk related to our corporate objectives and pledges that we are willing to accept within our capacity.

We are a risk aware Council which understands the importance of risk taking and accepts that there is an element of risk in most of the activities we undertake. The level of risk we are willing to take is intrinsically linked to each of our Council pledges and, for this reason, it has been accepted that our risk appetite should not be highly prescriptive.

Our risk appetite should depend on which of our corporate objectives would be affected by the risk and the impact the risk would have on that objective should it materialise. This flexible approach is seen as the best way to allow us to make informed decisions in respect of each risk situation.

To assist in the decision making process, and to help with prioritisation, we have agreed to apply a general level of risk retention (see below). However, this does not mean that in every case, risks falling below the line of retention require no action and vice versa.



5. Definition of Risk

Risk is the “effect of uncertainty on objectives” and an effect is a positive or negative deviation from what is expected.

Therefore, the Council defines risk as:

Any potential development or occurrence which, if it came to fruition, would jeopardise the Council’s ability to:

- achieve its corporate improvement priorities
- provide services as planned
- fulfil its statutory duties, including the duty to make arrangements to secure continuous improvement and ensure financial stability.

6. ISO 31000 2018 Enterprise Risk Management Principles

The purpose of risk management is the creation and protection of value. It improves performance, encourages innovation and supports the achievement of objectives.

The factors underpinning ISO31000 2018 is that Risk Management should be:

- Integrated
- Structured and comprehensive
- Customised
- Inclusive
- Dynamic
- Based on the best available information
- Human and cultural factors
- Continual improvement



7. Strategy Objectives and Outcomes

Risk Management and Corporate Governance

Risk Management is an integral part of the Corporate Governance Framework at the Council.

The Risk Management Strategy will assist the Council in practising good corporate governance by reducing risk, stimulating performance throughout the Council, enhancing services, VfM and improving leadership, transparency and social accountability.

How successful the Council is in dealing with the risks it faces can have a major impact on the achievement of our key objectives and service delivery to the community. This Strategy will help support the corporate agenda and underpin the key Council Plan objectives.

Further information on the Council Plan can be found [here](#).

Risk Management Objectives

The objectives of the Council's Risk Management Strategy are to:

- Integrate of Risk Management into the culture of the Council through regular reporting mechanisms to Audit Committee; CMT and Cabinet
- Adoption of the Principles of Enterprise Risk Management ISO31000:2018
- Introduce a robust framework and procedures for the identification, analysis, assessment and management of risk and the reporting and recording of events, based on best practice
- Incorporate a standard approach to the evaluation of risk into strategic and local partnership working; as well as corporate, service and business planning processes business plans; procurements; service re-design
- Provide key risk management performance information for management teams
- Provide a comprehensive Risk Management training and awareness programme
- Minimisation of injury, damage, loss and inconvenience to residents, staff, service users, assets etc. arising from or connected with the delivery of Council services
- Minimisation of the total cost of risk
- Ability to respond to emergency situations and manage business interruptions so as to minimise disruption of services aligning to the Council's Business Continuity Plan
- Ensure critical services are identified and prepared for all eventualities

Risk Management Aims

The aims of the Risk Management Strategy are to:

- Improve the quality and reliability of services, leading to more satisfied residents, fewer complaints and maintaining the reputation of the Council
- Support risk-informed decision making at all levels and encouraging innovation, whilst taking proper account of threats and opportunities
- Ensure management of risk is embedded as part of the Council's culture and the commitment communicated throughout the organisation
- Enable the Council to anticipate and respond to changing social, environmental, legislative, political, economic, technological, competitive and residents requirements, and manage change effectively
- Raise awareness of the need for the management of risks by all those connected with the delivery of services (including partners, delivery agents etc.)
- Provide and use a robust and systematic framework for identifying, managing, responding to and monitoring risk
- Provide assurance, through risk reporting, of a robust management system for responding to risk
- Manage risk in accordance with best practice and ensure compliance with statutory requirements

8. Risk Management Methodology

Risk Scoring

It is important that the Council as a whole uses the same methodology to calculate risk to ensure that Derbyshire County Council has an accurate and consistent overview of the risks that are posed.

The risks are scored using two criteria scales that are then multiplied together to produce a total score by which the risk is assessed as to the impact to the Department and then to the Council.

The two criteria used are the Likelihood of an event occurring and the Impact that event could have.

Likelihood Scale

The scale the Council will adopt for assessing likelihood is as follows:

Likelihood Assessment Criteria	
Scale	Description
5	ALMOST CERTAIN: The event is expected to occur or occurs regularly (monthly, quarterly or biannual)
4	PROBABLE: The event will probably occur (annually)
3	POSSIBLE: The event may occur (1 incident in 2 years)
2	UNLIKELY: The event could occur (1 incident in 5 years)
1	RARE: The event may occur in certain extreme circumstances (1 Incident in 10 years or above)

Impact Risk Scale

The Corporate scale for assessing risk is shown in the following page with an example description for each score for each area of risk from 1-5 with 1 being the least impact and 5 being the greatest to the Council.

When assessing each risk, the category that scores the highest impact should be used if a number of categories could be used.

Corporate Impact Assessment Criteria of Risk Category

Scale	Scale Description	Risk Categories								
		Financial	Reputational	Physical Injury/Health and Safety	Environmental Damage	Service/Operational Disruption/Key Targets/Objectives	Statutory Duties/ legal Implications	Partnership Implications	Information Governance	Stakeholder Implications
5	Very High	>£25,000,000	Lasting or permanent brand damage resulting from adverse comments in national press and media. Members/Officers forced to resign	Death or severe life-changing injuries	Major national or international	Severe disruption/loss of service more than 7 days	Multiple Litigation	Complete failure / breakdown of partnership	Significant breach, extensive national press, ICO fines, loss of ISO 27001 certification	Stakeholders would be unable to pursue their rights and entitlement and may face life threatening consequences
4	High	£10,000,000 to <£25,000,000	Temporary brand damage from coverage in national press/media	Extensive or multiple injuries/ Incidents reportable to HSE	Major local impact	Disruption/Loss of service less than 7 days	Litigation	Significant impact on partnership or most of expected benefits fail	Larger breach, no sensitive data loss local press coverage Or Minor breach, sensitive data loss local press coverage	Stakeholders would experience considerable difficulty in pursuing rights and entitlements
3	Medium	£5,000,000 to <£10,000,000	Extensive coverage in regional press/radio/TV/social media	Serious injuries/ incidents reportable to HSE	Moderate locally	Disruption/Loss of service less than 48 hours	Ombudsman	Adverse effect on partnering arrangements	Larger breach, no sensitive data loss and internally controlled Or Minor breach, sensitive data loss internally controlled	Some minor effects on the ability of stakeholders to pursue rights and entitlements, eg other sources or avenues would not be available to stakeholders
2	Low	£2,500,000 to <£5,000,000	Minor adverse comments in regional press/social media	Minor (i.e. first aid treatment)/ No time lost from work	Minor locally	Internal disruption only, no loss of service	Individual Claims	Minimal Impact on Partnership	Individual breach no loss of sensitive data	Minimal impact without needing to look at other sources or avenues
1	Negligible	<£2,500,000		None	None/ Insignificant	No loss of service	No impact	No Impact	No impact	No impact

		Minimal adverse comments with minimal press/social media							
--	--	--	--	--	--	--	--	--	--

Risk Retention Threshold

The following information details how we will apply our risk appetite in practice. Below is the risk scoring matrix DCC will use to determine the risk score from project, operational and strategic risks once the Likelihood and Impact have been scored.

Risk Score Matrix (Impact x Likelihood)						
Likelihood	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
	Impact					

Identifying and ranking risks is important but the key element thereafter is to determine the strategy for managing them. The following tables provides guidance on the level of management intervention that is likely to be necessary or appropriate.

Colour	Score	Action	Risk Control
Green	Low	Review Periodically	Tolerate/Accept or Treat and Control
Yellow	Moderate	Mitigate, Control and Review Frequently	Tolerate/Accept or Treat and Control
Amber	High	Seek cost effective management action, control, evaluation or improvements with continued proactive monitoring	Treat, Tolerate or Transfer
Red	Extreme		

		Significant management action, control, evaluation or improvements with continued proactive monitoring	All options can and should be considered
--	--	--	--

It does not follow that a high scoring operational risk should be automatically included in the Departmental or Strategic Risk Register. A view should be taken as to whether the operational risk has a significant impact upon the strategic aims and objectives of the Council.

Strategic Risk Register Decision Matrix		
1 to 4	Green	No referral
5 to 9	Yellow	No referral
10 to 12	Amber	Referral to DRR for possible inclusion
15 to 25	Red	Referral to DRR/SRR for possible inclusion

Risk Control Definitions	
Take the Opportunity	Accept the risk and turn it into a positive opportunity or benefit
Treat/Control	Actions required to mitigate the likelihood and/or impact
Tolerate/Accept	No action - risk within tolerance or accept - Understand and live with the risk.
Terminate	Cease or avoid the risk
Transfer	Transfer to potential third party or bond or insurance etc

9. Risk Management Culture

In order to ensure that risk management is adopted throughout the Council to facilitate the enterprising approach that the Council wishes to take, there needs to be a strong risk management culture from the top to the bottom to drive this change.

The Role of the Leader and Members

To endorse Council's Risk Management Policy and Risk Management Framework.

Through the Audit Committee, the Council Leader and Members also have a responsibility to:

- Oversee the effective management of risk by officers.
- Monitor the Council's risk management strategy and performance.
- Review regular reports from the Strategic Risk Management Group (SRMG) on key issues affecting the Council.
- Review and approve the Annual Risk Management Report submitted by the SRMG.

The Role of Audit Committee

The Audit Committee has Governance of the risk management process. Their role is to:

- Approve the Framework for Risk Management
- Review Strategic Risks and check on the progress of risks
- Monitor adequacy of the risk management arrangements and directly raise queries with Strategic and Departmental risk owners
- Gain assurance of objectives being met

The Role of Governance Committee

The Governance Committee has oversight of the continuous improvement aspect of Risk Management. Their role is to:

- Review significant adverse risks and issues to ensure lessons are learnt and implemented across Departments
- Post-implementation review significant initiatives and service changes to ensure that both positive and adverse risks and issues arising are learnt from and implemented as best practice across Departments.

The Role of the CMT Risk Champion

Is to:

- Lead CMT on risk management to ensure that risk management principles are being adopted and adhered to throughout all Departments
To have an overview of the Strategic Risk Register; ensuring Strategic risks are being appropriately managed and identified across all Departments

The Role of CMT

There will need to be a visible commitment from CMT by:

- Modelling their behaviors and working to deliver the attributes of level 5, “Driving” of the CIPFA benchmarking model
- Leading through actions. - embracing risk based decision making aligned with strategic objectives
- Having a clear understanding of the risks to the business and any implications on the success of the Council Plan
- Ensuring assurance on the status of key risks and controls sought and followed through on a strategic and directorate level
- Embedding of the policy and framework for managing risk

The Role of Strategic Risk Management Group (SRMG)

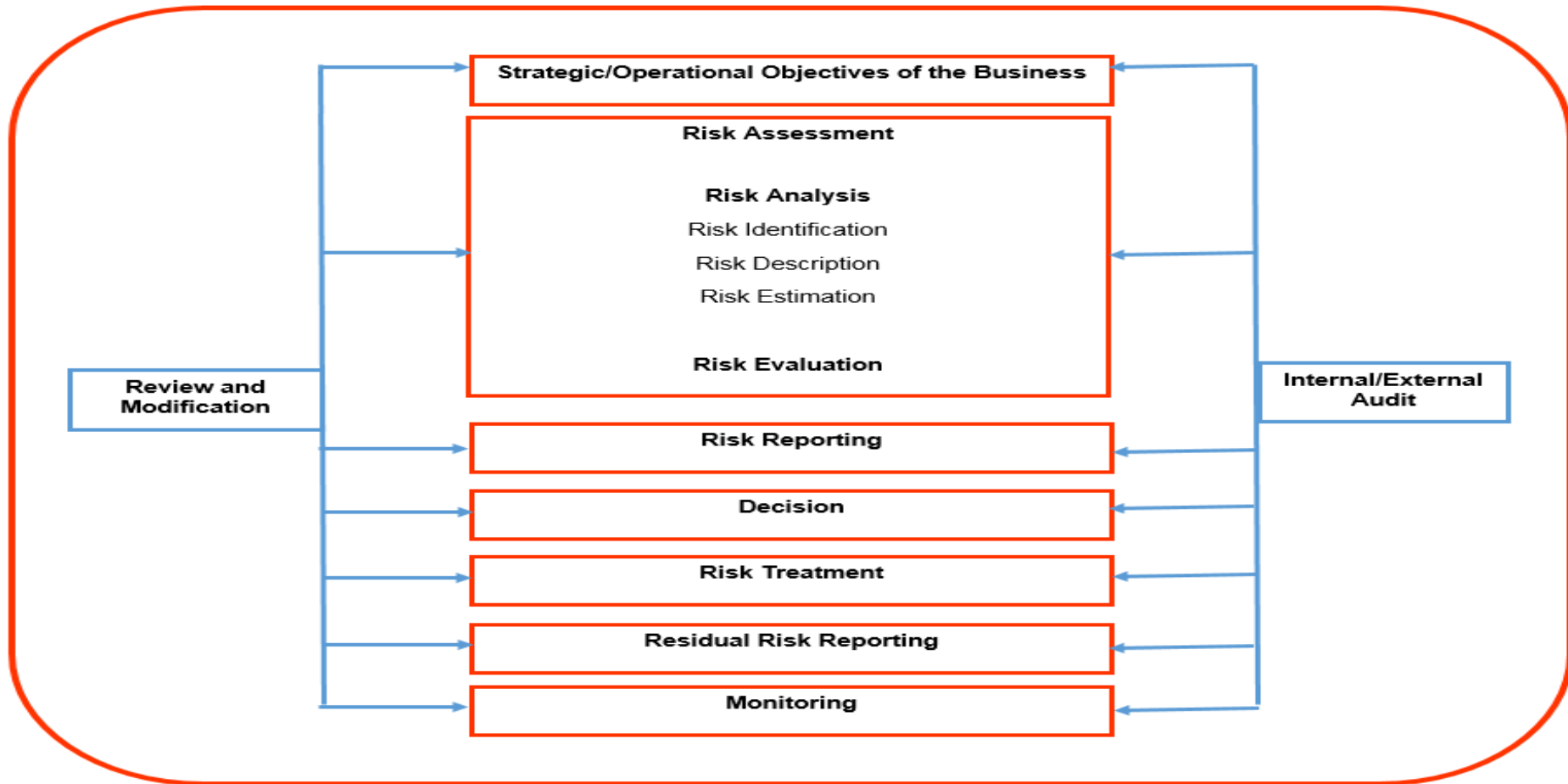
- Act as departmental risk ‘champions’, ensuring that risk management is given an appropriate profile and sufficient focus
- Be responsible for the completion, progressive action and monitoring of their Departmental Risk Register
- Meet regularly, and ensure that embedding risk management remains on the corporate agenda
- Play a lead role in the identification and monitoring of Strategic risk;
- Consider “very severe” and “serious” risks identified by projects, functional risk groups and department groups
- Escalate new and emerging risks that may have a strategic impact to the Risk Manager and participate in ad hoc meetings of the Group to discuss such risks as necessary
- Carry out duties as required by the Group’s terms of reference

All Employees

- To manage risk effectively in their job and report hazards, risks or opportunities to their Manager.

10. The Risk Management Framework

The Council has closely followed the ISO31000 Standard to tackle Risk management Procedures, framework, guiding controls and processes with Plan, Do, Check, Act, Review at the core.



11. Roles and Responsibilities

The key roles and responsibilities for risk management are set out below:

Who	Key Roles & Responsibilities	Report Type	By Whom	Frequency
Council	Receive and act upon: <ul style="list-style-type: none"> Reports from Cabinet, Audit Committee and Head of Paid Service. Reports, recommendations and advice from Audit Committee. 	<ul style="list-style-type: none"> E.g. Annual Governance Statement, Policy, Strategy and Framework and other reports. 	Cabinet & Audit Committee	Annually
Cabinet	<ul style="list-style-type: none"> Agree the Risk Management Strategy (RMS) and receive reports on risk management. Hold the political responsibility for the RMS with each individual portfolio. Assign responsibility for risk to the Cabinet Member for Corporate Services 	<ul style="list-style-type: none"> Policy & Strategy and other relevant reports. 	Audit Committee and Corporate Leadership Team	Annually or as required.
Audit Committee	<ul style="list-style-type: none"> Oversee and challenge assurance and the RMS arrangements. 	<ul style="list-style-type: none"> Review of Policy, Strategy & Framework. Receive updates on the Strategic/Corporate R&O's and action plans. Receive assurance on effectiveness of ROM. 	Director of Finance and ICT	<ul style="list-style-type: none"> Annually Bi Annual Annually
Executive Management Team	<ul style="list-style-type: none"> Strategic leadership Group for RMS. Oversee the RMS Policy and Strategy. Responsible for effectiveness of Risk & Opportunity (R&O) and assurance arrangements and any management or mitigation. Quarterly monitoring of Strategic/Corporate R&Os and associated action plans. Identify a lead on RMS who chairs the Strategic Risk Management Group 	<ul style="list-style-type: none"> Review of Policy & Strategy. Reviews of Strategic/Corporate R&Os and action plans. Review/Benchmarking of RMS. 	Director of Finance and ICT	<ul style="list-style-type: none"> Annually Quarterly Annually
Corporate Risk Management	<ul style="list-style-type: none"> Establish the Risk and OM Policy, Strategy and Framework. Stewardship of the Strategic/Corporate R&O Registers. Review/Benchmarking of RMS. Establish Service Level RMS. Provide consultancy, advice and training on RMS. 	<ul style="list-style-type: none"> Review of RMS Policy, Strategy & Framework. Reviews of Strategic/Corporate R&Os and action plans. Review/Benchmarking of RMS. Quarterly RM update to CMT Quarterly RM update to Audit Committee Report to Cabinet Members / Portfolio Holders on high level R&Os facing the Directorate or Council. 	Risk and Insurance Manager	<ul style="list-style-type: none"> Annually Quarterly Annually
Strategic Risk Management Group	<ul style="list-style-type: none"> Identification and monitoring of Strategic/Corporate R&Os for the Directorate or Council. Escalation as appropriate of Strategic/Corporate R&O's facing the directorate or Council (e.g. programme, partnership, project and service R&Os) 	<ul style="list-style-type: none"> Reviews of Strategic/Corporate R&Os and action plans to CMT. 	Strategic Directors	Quarterly or as required.

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Directors, Assistant Directors &/or Risk Champions	<ul style="list-style-type: none"> • Identification and monitoring of Strategic/Corporate and any other key R&Os facing the department. • Escalation as appropriate of Strategic/Corporate R&O's to SMT. 	<ul style="list-style-type: none"> • Review of R&Os and R&O Registers as a standing agenda at SMT/DMT meetings. • SMT/DMT to receive and approve updates to Strategic/Corporate R&O's and action plans. 	Directors, Assistant Directors &/or Risk Champions	Quarterly or as required by Director(s) or SMT
Managers & Risk Champions	<ul style="list-style-type: none"> • Identification, management and review of R&Os and R&O registers within their Service or area of responsibility. • Monitoring and escalation as appropriate of R&O's to either Director/Assistant Director or relevant SMT/DMT. 	<ul style="list-style-type: none"> • Review & maintenance of R&Os and R&O registers as standing agenda item at Service meetings. • Review of Service R&O's and action plans to DMT and SMT as required. • Report to DMT on identified R&O's that require consideration for escalation to the Strategic/Corporate R&O Register. 	Directors, Assistant Directors &/or Risk Champions	Quarterly or as required by Director(s) or DMT/SMT
Programme & Partnership Boards or Project Managers	<ul style="list-style-type: none"> • Responsible for the identification, management and monitoring of R&O within their given areas. 	<ul style="list-style-type: none"> • Report on the management of R&Os and escalation of high level R&O's as required or necessary. 	Programme Boards, Partnership Boards and Project Managers	Quarterly or as requested by Strategic Directors or Programme Boards/Leads
Employees	<ul style="list-style-type: none"> • To manage risk effectively in their job and report hazards, risks or opportunities to their Manager. 	<ul style="list-style-type: none"> • Report incidents, risks and opportunities following the procedures laid down in corporate policies. 	All Employees	As necessary or required.

12. Performance Management

Alignment to a risk maturity model

The Council will align itself to the recognised benchmarking model issued by CIPFA and ALARM (Association of Local Authority Risk Managers). The Benchmarking Club will be used to formally benchmark on a biennial basis against other Local Authorities. In the interim years the tool will be used on a self-assessment basis when no benchmarking membership will be sought.

Success Criteria

An acceptable level of success under the ALARM Benchmarking model would be the “Happening” Category and attainment of this level in each category will be seen as an absolute minimum. However, the Council will strive to achieve the ‘Embedded and Working’ rating for all areas in the ALARM/CIPFA Benchmarking Club which would place it in the top tier of Local Authorities in terms of Risk Management success.

CIPFA BENCHMARKING							
	Leadership & Management	Strategy & Policy	People	Partnership, Shared Risk & Resources Processes	Processes	Risk Handling & Assurance	Outcomes & Delivery
Level 5: Driving	Senior management uses consideration of risk to drive excellence through the business, with strong support and reward for well-managed risk-taking.	Risk management capability in policy and strategy making helps to drive organisational excellence.	All staff are empowered to be responsible for risk management. The organisation has a good record of innovation and well-managed risk-taking. Absence of a blame culture.	Clear evidence of improved partnership delivery through risk management and that key risks to the community are being effectively managed.	Management of risk and uncertainty is well-integrated with all key business processes and shown to be a key driver in business success.	Clear evidence that risks are being effectively managed throughout the organisation. Considered risk-taking part of the organisational culture.	Risk management arrangements clearly acting as a driver for change and linked to plans and planning cycles.
Level 4: Embedded & working	Risk management is championed by the CEO. The Board and senior managers challenge the risks to the organisation and understand their risk appetite. Management leads risk management by example.	Risk handling is an inherent feature of policy and strategy making processes. Risk management system is benchmarked and best practices identified and shared across the organisation.	People are encouraged and supported to take managed risks through innovation. Regular training and clear communication of risk is in place.	Sound governance arrangements are established. Partners support one another's risk management capability and capacity.	A framework of risk management processes in place and used to support service delivery. Robust business continuity management system in place.	Evidence that risk management is being effective and useful for the organisation and producing clear benefits. Evidence of innovative risk-taking.	Very clear evidence of very significantly improved delivery of all relevant outcomes and showing positive and sustained improvement.
Level 3: Working	Senior managers take the lead to apply risk management thoroughly across the organisation. They own and manage a register of key strategic risks and set the risk appetite.	Risk management principles are reflected in the organisation's strategies and policies. Risk framework is reviewed, developed, refined and communicated.	A core group of people have the skills and knowledge to manage risk effectively and implement the risk management framework. Staff are aware of key risks and responsibilities.	Risk with partners and suppliers is well managed across organisational boundaries. Appropriate resources in place to manage risk.	Risk management processes used to support key business processes. Early warning indicators and lessons learned are reported. Critical services supported through continuity plans.	Clear evidence that risk management is being effective in all key areas. Capability assessed within a formal assurance framework and against best practice standards.	Clear evidence that risk management is supporting delivery of key outcomes in all relevant areas.

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<p>Level 2: Happening</p>	<p>Board/ Councillors and senior managers take the lead to ensure that approaches for addressing risk are being developed and implemented.</p>	<p>Risk management strategy and policies drawn up, communicated and being acted upon.</p> <p>Roles and responsibilities established, key stakeholders engaged.</p>	<p>Suitable guidance is available and a training programme has been implemented to develop risk capability.</p>	<p>Approaches for addressing risk with partners are being developed and implemented.</p> <p>Appropriate tools are developed and resources for risk identified.</p>	<p>Risk management processes are being implemented and reported upon in key areas.</p> <p>Service continuity arrangements are being developed in key service areas.</p>	<p>Some evidence that risk management is being effective.</p> <p>Performance monitoring and assurance reporting being developed.</p>	<p>Limited evidence that risk management is being effective in, at least, the most relevant areas.</p>
<p>Level 1: Engaging</p>	<p>Senior management are aware of the need to manage uncertainty and risk and have made resources available to improve.</p>	<p>The need for a risk strategy and risk-related policies has been identified and accepted.</p> <p>The risk management system may be undocumented with few formal processes present.</p>	<p>Key people are aware of the need to understand risk principles and increase capacity and competency in risk management techniques through appropriate training.</p>	<p>Key people are aware of areas of potential risk in partnerships and the need to allocate resources to manage risk.</p>	<p>Some stand-alone risk processes have been identified and are being developed.</p> <p>The need for service continuity arrangements has been identified.</p>	<p>No clear evidence that risk management is being effective.</p>	<p>No clear evidence of improved outcomes.</p>

Risk Management Performance Indicators

1. The Council demonstrates good practice by working towards and achieving its target level of RM maturity “embedded and working”.
2. Robust risk and opportunity considerations are included in all reports to Cabinet and CMT
3. CMT reviews the Strategic Risk Register on at least a quarterly basis or as required.
4. Executive Directors attend Audit Committee to review their Departmental Risk Register at least once a year or as required.
5. Cabinet reviews and challenges the Strategic Risk Register on at least an annual basis or as required.
6. All Service Plans and business plans (at all levels) include a Risk Register, developed in accordance with the RM toolkit
7. All Senior Management Teams review their risk registers on a quarterly basis in conjunction with a member of the Risk Management team.
8. A Risk Management Framework, consistent with the guidance set out in the Partnership RM Toolkit (and including a current risk register), is in place for all significant partnerships
9. A Risk Management Framework is in place for all significant procurements or commissioning
10. Risk Management reports show a stable, or ideally downward trend, in reportable incidents (e.g. insurance claims, RIDDOR/Health & Safety incidents, information security incidents) and major business disruptions; subject to internal or external influences.
11. All Operational (Departmental) and Strategic risk registers to be on a ‘live’ risk management system.
12. All new recruits to take an online role relevant Risk Management Module as part of an induction programme. Developed in conjunction with departments and Learning and Development.
13. All employees to take a biennial online relevant Risk Management Module Developed in conjunction with departments and Learning and Development
14. Risk Management training to be incorporated into Member’s training programme
15. A Corporate wide framework for lessons learnt and best practice adopted

13. Implementation Plan

Objectives	Plan	Timescale
All Senior Management Teams review their risk registers on a quarterly basis in conjunction with a member of the Risk Management team.	The Risk Officer or Risk Manager to meet with SMT's on a quarterly basis to review their departmental risk register in depth	January 2020
Robust risk and opportunity considerations are included in all reports to Cabinet and CMT.	To agree a methodology to ensure all significant risks and opportunities are adequately appraised and defined to allow risk aware decision making	January 2020
CMT reviews the Strategic Risk Register on at least a quarterly basis or as required.	The Risk Manager to attend CMT on a regular quarterly basis in order to report on and review the Strategic Risk Register	April 2020
Cabinet reviews and challenges the Strategic Risk Register on at least an annual basis or as required.	The Risk Manager to attend Cabinet on an annual basis in order to report on and review the Strategic Risk Register	April 2020
Executive Directors attend Audit Committee to review their Departmental Risk Register at least once a year or as required.	Each Executive Director to attend one Audit Committee meetings agreed in advance per annum	April 2020
Risk Management reports show a stable, or ideally downward trend, in reportable incidents (eg insurance claims, RIDDOR/Health & Safety incidents, information security incidents) and major business disruptions; subject to internal or external influences.	Statistics to be reported on an annual basis to CMT and Cabinet	April 2020
All Operational (Departmental) and Strategic risk registers to be on a 'live' risk management system.	The Risk and Insurance Manager to devise or procure a system that will enable Strategic and Departmental risks to be recorded on a system that will provide up to date M.I. on the status of all risks and how they link with the Council Plan 2019-21	April 2020

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All new recruits to take an online role relevant Risk Management Module as part of an induction programme. Developed in conjunction with departments and Learning and Development	The Risk and Insurance Manager to devise a relevant training module to be incorporated into the induction programme	May 2020
A Risk Management Framework, consistent with the guidance set out in the Partnership RM Toolkit (and including a current risk register), is in place for all significant partnerships.	The Risk and Insurance Manager to review the Partnership Risk Management Toolkit to ensure that it is fit for purpose and to roll it out for use with Partnerships.	June 2020
All employees to take a biennial online relevant Risk Management Module Developed in conjunction with departments and Learning and Development	The Risk and Insurance Manager to devise a relevant training module to be incorporated into the learning and development programme	From August 2020
A Risk Management Framework is in place for all significant procurements or commissioning	The Risk and Insurance Manager to work in conjunction with Procurement team to create a fit for purpose Risk Management Toolkit and to roll it out for use with all significant procurements or commissioning.	October 2020
Risk Management training to be incorporated into Member's training programme to ensure that all Members have the tools to evaluate risks that are presented in business cases and Service Plans	The Risk and Insurance Manager to devise a relevant training module to be incorporated into the Members suite of training	October 2020
Robust risk and opportunity considerations are included in all Service Plans.	To agree a methodology; template and training with Governance; Legal; Policy and Departments to ensure all significant risks and opportunities are adequately appraised and defined to allow risk aware decision making	April 2021
Framework for lessons learnt and good practice implemented	To agree a methodology with Governance to ensure the Council has a robust framework to identify and disseminate lessons learnt and opportunities.	September 2021

<p>The Council demonstrates good practice by working towards and achieving its target level of RM maturity “embedded and working”.</p>	<p>To take part in ALARM/CIPFA’s benchmarking exercise on a biennial basis and for the results to show an upward trend</p>	<p>Achieve “embedded and working status” by 2022</p>
<p>The Council demonstrates good practice by working towards and achieving its target level of RM maturity “driving”.</p>	<p>To take part in ALARM/CIPFA’s benchmarking exercise on a biennial basis and for the results to show an upward trend</p>	<p>Achieve “driving” by 2024</p>

14. Resources and funding

The Strategic Risk Register will inform the Annual Budget Setting Process and Long Term Financial Plan. Operational Risk Registers should also be considered as an integral part of the Operational financial and service planning process.

The Council will determine annually the budget to support risk management capital and revenue expenditure.

Requests from service departments and establishments, for financial support for risk management measures will be considered in accordance with Financial Regulations. Departments and establishments will be expected to evidence their commitment to the measures they are proposing through contributions from their individual capital and/or revenue budgets.

15. External Influences

A number of external influences may impact on this Strategy such as the Commissioning, ICT, Business Continuity, Health and Safety and Procurement Strategy. Once these have been corporately adopted, if any of these do impact on the Risk Management Strategy these will be taken into consideration as part of the annual strategy review process.

It is envisaged that The Risk Strategy will form the overarching corporate approach to risk and will reflect the input and engagement that the Risk Management and Insurance Team receives from departments.

16. Strategy Consultation

This strategy was developed through consultation with stakeholder groups across Council service areas together with market research and taking best practice from other Local Authorities.

17. Glossary

Term	Definition
Operational Risk	are major risks that affect an organization's ability to execute its strategic plan
CMT	Corporate Management Team
DRR	Departmental Risk Register
ISO 31000 2018	means a family of standards relating to risk management codified by the International Organization for Standardization.
Operational Risk	are major risks that affect an organization's ability to execute its strategic plan
RIDDOR	means the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013. These Regulations require employers, the self-employed and those in control of premises to report specified workplace incidents.
RM	Risk Management
RMS	Risk Management Strategy
R&O	Risks and Opportunities
SRR	Strategic Risk Register
SMT	Departmental Senior Management Team
Strategic Risk	are risks that affect or are created by an organization's business strategy and strategic objectives

Risk Number	Department	Identified Risk	Impacts of Risk	RAG Rating @	Actions In place	Planned Actions	Risk Owner
CCP1	CCP	Increased cost pressures	<p>The Council has identified that it will have significant unbudgeted costs in response to the pandemic. An early estimate of the financial impact for the period April - June 2020 has been made which includes cost pressures, loss of income and savings slippage.</p> <p>Whilst the Council has received funding of £23m from Government there is still an estimated deficit of £8m for the first quarter.</p>	HIGH	<p>Council has completed recent MHCLG survey to provide details of the estimated financial impact.</p> <p>Finance departments have set up separate cost centres to monitor C-19 related costs.</p> <p>Lobbying Government through interest groups such as Society of County Treasurers, County Council Network.</p> <p>S.151 Officer holding regular meetings with local MPs in support of lobbying for additional funding.</p> <p>Deputy S.151 in weekly conference with Derbyshire district/borough councils to determine county wide issues and synergies.</p>	<p>CCN to work with both county and billing authorities to undertake analysis of loss of income within the county.</p> <p>MHCLG likely to require detailed financial analysis. FOG alerted to the fact that this information may be required.</p> <p>Budget monitoring activity will take place at the end of April to provide a detailed analysis of the financial impact.</p> <p>Budget monitoring report to Cabinet early August.</p> <p>Revised Revenue Budget Report 2020-21 to Cabinet late Summer.</p>	Paul Stone
CCP2	CCP	Hardship Fund	Payments to local businesses in respect of the Council's Hardship Fund established at the end of March 2020.	MEDIUM	Internal audit have assessed the process of claims. Currently 20+ staff are involved in the process.		Paul Stone
CCP3	CCP	Staff Absence	BAU SAP maintenance, planned developments and SAP upgrade affected	MEDIUM	Separation of the team - homeworking	<ol style="list-style-type: none"> Continuation of homeworking arrangements Support from 3rd party suppliers 	Wayne Sutton
CCP4	CCP	Staff Absence	Support service to core business systems users affected	MEDIUM	Separation of the team - homeworking	<ol style="list-style-type: none"> Continuation of homeworking arrangements Support from 3rd party suppliers 	Wayne Sutton
CCP5	CCP	Suppliers inability to fulfil existing support and maintenance agreements of existing ICT systems.	End users inability to deliver key frontline services.	HIGH	Working with ICT Services and Procurement to monitor and maintain contact with suppliers and establish the contingencies they have in place as a result of COVID-19.		Wayne Sutton
CCP6	CCP	Failure to achieve the Audit Plan	<ul style="list-style-type: none"> Reduced levels of assurance reflected in Audit Opinion Non delivery of planned Audit work Increased pressure on limited staffing resources Risks are not mitigated 	HIGH	Monitoring, review and reassessment of Audit Plan and risk		Carl Hardman
CCP7	CCP	Changes are made to the governance and control framework which are not evaluated by Audit Services	<ul style="list-style-type: none"> Increase in theft, fraud, irregularities Reputational damage Increase in errors Audit resources required to investigate 	HIGH	Financial Regulations and Standing Orders relating to Contracts require that any new systems or proposed changes to systems are referred to ADoF (Audit) who will assess the impact on the Internal Control Framework and report to DoF&ICT	Remind all staff of the requirements	Carl Hardman
CCP8	CCP	Return to business as usual	<ul style="list-style-type: none"> Resistance to revert back to previous systems and controls Reluctance to give up freedoms and flexibility Reduced governance and control framework 	HIGH			Carl Hardman

CCP9	CCP	Relaxation of established governance and control framework	<ul style="list-style-type: none"> • Increase in theft, fraud, irregularities • Increase in errors • Audit resources required to investigate 	MEDIUM	Financial Regulations and Standing Orders relating to Contracts require that any new systems or proposed changes to systems are referred to ADoF (Audit) who will assess the impact on the Internal Control Framework and report to DoF&ICT		Carl Hardman
CCP10	CCP	Rise in fraudulent activity, scams	<ul style="list-style-type: none"> • Increase in theft, fraud, irregularities • Reputational damage • Audit resources required to investigate 	MEDIUM	Audit disseminates intelligence information received from NationalAnti Fraud Network, Police and other intelligence sources to raise awareness of potential frauds, scams		Carl Hardman
CCP11	CCP	Increased pressure on resources due to additional requests for assistance and advice	<ul style="list-style-type: none"> • Increased pressure on limited staffing resources 	MEDIUM	Monitoring and prioritisation of Audit work		Carl Hardman
CCP12	CCP	Reduced staffing resources due to sickness, self-isolation	<ul style="list-style-type: none"> • Failure to deliver planned work • Increased pressure on remaining staffing resource 	MEDIUM	Monitoring and prioritisation of Audit work		Carl Hardman
CCP13	CCP	The Council manages its working capital by investing and borrowing cash. Changes in treasury market liquidity, which were experienced in the early days of the crisis, could impact on the availability of cash required for this purpose.	In extremis, possible inability to pay key suppliers, repay loans in or out as they fall due, which could impact on provision of essential supplies or reputational damage.	HIGH	Forecasting and daily monitoring of cash position. Support from Council's Treasury Management Advisors. Twice weekly meetings to monitor cashflow, including Treasury Accountant, Finance Manager and Assistant Director of Finance.	<p>Cabinet approved proposal to pay three year's LGPS Employer Pension Contributions in advance in April 2020 amended to paying one year in advance, reducing need for cash, allowing more flexibility to manage cash. Urgent decision taken, pending formal Cabinet approval later in April.</p> <p>Monitoring of expected amount and timing of receipt of £40m Local Growth Fund funding, used to manage cashflow, initially delayed and now due early May.</p>	Eleanor Scriven
CCP14	CCP	The Council relies on £6m of investment income annually to support its revenue budget. Lower returns as a result of the crisis will reduce this income.	Less funding available to support key services.	MEDIUM	Continue to actively manage the Council's cash, following the Council's Treasury Management Strategy, to maximise returns under current market conditions.	Estimated reduction in income will be logged as a cost of COVID-19 against the additional funding received from Government.	Eleanor Scriven
CCP15	CCP	Statutory deadlines in respect of the Council's and Pension Fund's accounts have been put back because of the crisis, to 31 August 2020 for approval and 30 November for audit. However, there remain significant issues in respect of the reliability of indices required to revalue land and buildings and of assumptions about valuations of property investments and unquoted investments at the year-end of 31 March 2020.	<p>Increased complexity in respect of accounts production - decisions on estimates and disclosure of uncertainties. Increased chance of agreed preparation and audit timetable slipping.</p> <p>Increased occurrence of audit adjustments in the accounts as some unquoted valuations which will potentially materially impact on the accounts are likely to be received after accounts approval.</p> <p>If external audit can't place sufficient reliance on valuations in the Council's accounts then their audit opinion could be qualified.</p>	MEDIUM	Regular meetings between senior external audit staff and the Director of Finance, Assistant Director of Finance and Finance Manager have commenced and will continue during the accounts production and audit process, as long as they are required. Approach to valuations and disclosures agreed but will be refined if required as more guidance becomes available. Scheduling of audit agreed but will be reviewed and discussed if circumstances necessitate.	Ensure Audit Committee are aware of the issues. Delays to the planned timetable are possible. Any qualification arising from valuation issues will likely be country wide and not restricted to the Council. An increased level of audit adjustments will be experienced.	Eleanor Scriven

CCP16	CCP	Delay in supply chain of ICT components leading to existing infrastructure components becoming out of support and being unable to receive security updates or fixes in the event of failure leading to security vulnerabilities or loss of service.	ICT core infrastructure components will partially or fully fail leading to loss of access to systems for end users and their ability to deliver key frontline services.	HIGH	Regular update meetings with suppliers to explore options for maintaining stock of ICT components.	1. Liaise with suppliers and manufacturers to explore the options for extended support for components that are becoming end of life to ensure security updates can still be obtained for the period of COVID-19. 2. Work with the Council's Procurement function to identify other providers in the supply chain who may be able to supply kit.	Robert Pearson
CCP17	CCP	Supply chain delays and staff absences delay implementation of major ICT infrastructure projects.	ICT core infrastructure components will partially or fully fail leading to loss of access to systems for end users and their ability to deliver key frontline services.	HIGH	1. Regular update meetings with supplier, definition of project scope and low-level design continue. Supplier prioritising delivery of equipment (from China). 2. Review changes related to this infrastructure. Confirmation from supplier that they can provide support levels where failures occur. 3. Ensure DCC staff are working from home with limited physical contact with others in the team to ensure staff resources are kept available to support the work required	1. Work with the Council's Procurement function to review existing contract to see whether those coming to an end over coming months can be extended in the event that projects are not delivered on time.	Robert Pearson
CCP18	CCP	Loss of access to site due to closures at County Hall, Shands or Farmers Garage meaning staff will be unable to access the Council's ICT Data Centres to perform routine daily business continuity tasks and address other ICT issues or access to asset management unit for distribution of employee ICT kit.	Loss of data or key ICT infrastructure leading to end users inability to deliver key frontline services.	MEDIUM	Provided Gold Command Team with details of key staff that require access to buildings in the event of closure. Created emergency network kits for remote sites	Continue to monitor situation and list of staff that need to be listed key worker status.	Robert Pearson
CCP19	CCP	Suppliers inability to provide support and maintenance of existing ICT systems due to adverse effects of COVID-19, leading to security vulnerabilities and system failures.	End users inability to deliver key frontline services.	HIGH	Working with Procurement to monitor and maintain contact with suppliers and establish the contingencies they have in place as a result of COVID-19.		Robert Pearson
CCP20	CCP	Challenge in supporting different ways of working e.g. Accessing systems remotely	End users inability to deliver key frontline services.	MEDIUM	Daily COVID-19 meeting within ICT Service to review ICT issues that occur as a result of new ways of working and changes to ICT configuration and infrastructure to support this. e.g. Utilising different Technologies, such as, Direct Access, RDS and Remote Desktop	Keep under review.	Robert Pearson
CCP21	CCP	Staff absences due to Corona Virus affecting out ability to deliver BAU and projects.	Loss of data or ICT systems leading to end users inability to deliver key frontline services. Delay in delivering projects has impact on the delivery of front line services.	LOW	Daily COVID-19 meeting is assessing staff absences and priority of work is re-assessed accordingly.	Managers continue to plan and schedule resources based on priorities, through discussions with departments SRM's.	Robert Pearson
CCP22	CCP	Lack of availability of resources in departments leading to delay in implementing new ICT projects.	Departments working practices and change initiatives are affected, with potential impact on delivery of front line services.	LOW	Regular meetings with SRM and other departmental representatives to maintain progress where possible and minimise impact.		Robert Pearson

CCP23	CCP	Adverse affect on the deployment of daily BAU planned Infrastructure changes	Potential impact on end users resulting in their inability to deliver key frontline services. Some changes which are delayed due to potential risk/service impact will have a knock-on effect to departmental service plans (eg CM2000 linked to ADFS change which has been postponed)	LOW	Daily COVID-19 meeting within ICT Service to review ICT Changes identified in the ICT change process, and reprioritising / delaying these changes after assessing the risk and impact and potential disruption and loss of service.	Information passed to SRM's	Robert Pearson
CCP24	CCP	Failure to implement effective governance framework	Failure to provide effective leadership, direction, control and oversight of Derbyshire Pension Fund (DPF) leading to the risk of poor decision making/lack of decision making, investment underperformance, deterioration in service delivery and possible fines/sanctions/reputational damage .	MEDIUM	A detailed COVID 19 Business Continuity Plan has been developed together with a Critical Activities spreadsheet detailing the BAU and Continuity Arrangements for each of the Fund's critical activities. These have been shared with all members of the: Pension Fund Team; Corporate Finance Management Team; Pensions & Investments Committee (PIC) and Pension Board (PB). All actions related to the COVID 19 outbreak are being documented. The Pension Fund Plan including a summary of all ongoing and forecast Pension Fund activities is being updated regularly ensuring that all managers are aware of WIP and forecast workloads. Fund officers are holding regular remote meetings and managers are in daily contact with their teams. The Pension Administration Manager has delayed	Contingency arrangements are being developed by Legal & Democratic Services to facilitate virtual PIC/PB meetings.	Dawn Kinley
CCP25	CCP	Failure of other DCC Services/External Provides/External Fund Managers to provide services to the Pension Fund due to business disruption.	The Pension Fund is reliant on other DCC Sections for: the provision and support of core IT; treasury management of Fund cash; CHAPs & VIM & Standard SAP BACs payments; pensioner payroll; and legal advice and administration support to PIC & PB. The Fund is reliant on external providers for: the pension administration system; provision of custodial services; hedging services; performance measurement and actuarial services. External fund managers are responsible for the management of a large proportion of the Fund's assets on both a passive and an active basis. Business continuity failures experienced by any of these providers could have a material impact on the	MEDIUM	The business continuity arrangements of all of these providers have been sought by the Pension Fund and included in the Fund's COVID 19 Business Continuity Plan.	The Fund will keep up to date with the continuity arrangements of these providers and will continue to assess the risk of exposure to particular organisations/providers.	Dawn Kinley
CCP26	CCP	Late provision of information from employers/ late payment of employer contributions.	Late information and/or contributions from employers could lead to issues with completing the year end accounts, satisfying audit requirements, breaches of regulations, and, in extreme cases, could affect the Fund's cashflow.	MEDIUM	Employers have been clearly and promptly informed about their new contribution rates following completion of the 2019 actuarial valuation. Monitoring of the provision of employer information and the payment of contributions takes place within the Pensions Section and performance is disclosed in the Quarterly Pensions Administration Performance Report to PIC & PB. The Fund has a late payment charging policy. In response to the COVID 19 outbreak, the Fund has reminded employers of their responsibility to provide information and pay contributions by relevant deadlines. The Fund's cashflow is being closely monitored.	The Fund will continue to keep in close contact with employers and will deal with any employer requests on a case by case basis.	Dawn Kinley

CCP27	CCP	Risk of unpaid funding deficits.	If there is an unpaid funding deficit on the cessation of a scheme employer which cannot be met by the employer/ a guarantor/a bond, the deficit would fall on all the other employers in the Fund. The majority of employers in the Fund are long term in nature; those with a shorter time horizons will be exposed to short term volatility in asset prices and may not have local or national tax payer backing, a full guarantee or other pass-through arrangement (Tier 3 employers).	MEDIUM	The Fund has implemented an Employer Risk Management Framework and Health Check Questionnaires that were issued to all Tier 3 employers /possible Tier 3 employers in May 2019 provided detailed information to support covenant analysis.	Outstanding Health Check information will continue to be sought from relevant employers. Employers close to cessation will be monitored and discussions with the Fund's actuary will take place to determine if any further risk mitigation measures are necessary with respect to the relevant employers.	Dawn Kinley
CCP28	CCP	Failure to maintain liquidity in order to meet projected cash flows	Failure to maintain sufficient liquidity to meet projected cashflows which could lead to financial loss from the inappropriate sale of assets to generate cash flow. The risk is amplified during periods of market volatility/dislocation.	MEDIUM	The Fund carries out internal cashflow forecasting. The Senior Accountant Treasury Management has been asked to keep £100m of instant access liquidity.	Following completion of the 2019 actuarial valuation, the Fund's actuary is due to produce a cash flow forecasting report for the Fund.	Dawn Kinley
CCP29	CCP	The Inability to undertake scheduled procurement due to market instability at the moment means that a high volume of re procurement will be required when back to BAU will be significant	The impact will be to effectively compress the timeline for delivering the fwd. plans of procurement and could result further protocol 10 extension.	HIGH	Reviewing the delayed procurements and trying to stagger the necessary contract extension periods to spread the impact and resulting procurement.	Asses fwd. plans of procurements with the business areas and identify priority projects and then extend lower risk contracts if necessary	Teresa Gerrard
CCP30	CCP	Delivery of the procurement strategy (12 MThs delivery plan)	The delayed delivery of the projects identified in the strategy delivery plan for delivery this year	MEDIUM	non yet.	Review of the projects and escalate any potential delays - ensuring awareness of the delay.	Teresa Gerrard
CCP31	CCP	County Procurement is carrying 7 vacancies at the moment which have had to be put on hold due to the current situation – the delay to recruiting against these vacancies mean we will have to few staff to delivery the forward plans of procurement.	This mean that procurements/projects will not be delivered to meet delivery timescales either required to meet existing contract expiry or new business initiatives.	HIGH	Reviewing ways of progressing current vacancies to reduce delay when back to BAU.	Possibility of using agency staff as a short term solutions and also assesing fwd. plans of procurements with the business areas to identify priority high value/high risk projects and then extend contrats or project timescales for lower risk/spend contracts if necessary	Teresa Gerrard
CCP32	CCP	Accumulation of leave by staff – staff not currently taking leave due to lockdown. This mean we may be faced with everyone wanting to take leave in the latter part of the year.	This risk compounds the risks identify above.	MEDIUM	Encouraging staff to take leave already booked.	Possibility of using agency staff as a short term solution on specific projects.	Teresa Gerrard
CCP33	CCP	Necessity of making payment in advance for large orders of PPE to unknown providers	fraud - goods do not arrive.	MEDIUM	Undertaking high level due diligence checks on unknown providers.	As stock of PPE increase we will try to place orders with know providers.	Teresa Gerrard
CCP34	CCP	Staff absences due to COVID 19	This would be dependant on numbers and length of absence	MEDIUM	Staff able to cover other area's	Assuring access to all systems for all those that will require them. Update procedure notes.	Claire Howells
CCP35	CCP	Staff not being able to access systems remotely	Task would take longer to achieve if all required information is not available	LOW	All staff aware of how to try and reinstall all drives		Claire Howells
CCP36	CCP	Closing down is not completed	The accounts would not be a true reflection	MEDIUM	Regular update meetings on where all area's are up to	Check outturn against previous years balances and final monitoring	Claire Howells
CCP37	CCP	Staff maybe asked to cover other duties	Remaining Staff would have to cover additional areas	LOW	Staff able to cover other area's	Assuring access to all systems for all those that will require them. Update procedure notes.	Claire Howells
CCP38	CCP	Managers and Staff from other teams may reprioritise their duties	Information required would take longer to obtain	LOW	Work on estimates if applicable	Allow more time to collect information required	Claire Howells
CCP39	CCP	Not all team aware of issues while working remotely	Areas of work could be missed	LOW	Daily catch up meeting	Continue with daily catch up meetings. Implement weekly 1 to 1's with individual team members.	Claire Howells

CCP40	CCP	Monitoring reports do not capture the full costs of COVID 19	Full cost under estimated	LOW	Cost Centre's set up to capture costs	Regular dialogue with budget holders	Claire Howells
CCP41	CCP	Cabinet Reports not produced on time	Decision not made at the appropriate time	LOW	Ensure dead lines are met.	Plan reports required in advance advice of any difficulties	Claire Howells
CCP42	CCP	Loss of income to the department	Budgets will be overspent	MEDIUM	Regular timely reports produced	Monitor income on a frequent basis	Claire Howells
CCP43	CCP	Savings Initiatives not completed in timeframe	Full savings not achieved	MEDIUM	Regular timely reports produced	Monitor savings on a frequent basis	Claire Howells
CCP44	CCP	Projects may be put on hold	Full benefits will not be achieved	LOW	Regular updates of project position produced		Claire Howells
CCP45	CCP	Exchequer - Availability of experienced resources and systems to perform key financial controls surrounding the main income and expenditure streams.	Risk of failure in processing of BACS files in respect of employees, pensioners, creditors and collections of direct debits. Potential to incur financial loss and reputational damage. Reduced visibility of KPI's and reporting with potential to impact on effective decision making.	MEDIUM	System business continuity arrangements tested and in place. New processes developed. Increased number of roles and access. Increase in home working.	Close Monitoring and intervention where necessary. Explore building in more contingency which may impact upon internal controls	Michael Crawford
CCP46	CCP	Exchequer - Availability of experienced resources and systems to perform key financial controls surrounding the main income and expenditure streams.	Reduction in ordering and prompt payment of suppliers. Process relies on some manual paper processing and dependant on the continued use of electronic workflow by others across the organisation. Potential to incur financial loss and reputational damage. Reduced visibility of KPI's and reporting with potential to impact on effective decision making.	MEDIUM	Increased frequency of payment runs with immediate terms. A small dedicated team of staff in attendance at County Hall to execute essential manual duties and provide communication and support to external suppliers and internal stakeholders. Increased system tolerances and greater manual intervention to reduce blockages. Increase in home working but reduction in system performance resulting in fewer transactions.	Close Monitoring and intervention where necessary. Explore building in more contingency which may impact upon internal controls	Michael Crawford
CCP47	CCP	Exchequer - Availability of experienced resources and systems to perform key financial controls surrounding the main income and expenditure streams.	Reduction in prompt reconciliation of income and allocation to budgets. Increase in the councils debt. Potential to incur financial loss and reputational damage. Reduced visibility of KPI's and reporting with potential to impact on effective decision making.	MEDIUM	Prioritisation of tasks based upon materiality and necessity. A small dedicated team of staff in attendance at County Hall to execute essential manual duties and provide communication and support to external customers and internal stakeholders. Increase in home working but reduction in system performance resulting in fewer transactions.	Close Monitoring and intervention where necessary. Explore building in more contingency which may impact upon internal controls	Michael Crawford
CCP48	CCP	Communities staff, businesses and customers contract and spread Covid-19	Cross infection from any of those involved - leading to illness, serious illness, death. Significant reputational damage. Possible insurance claims. Insufficient staff to open buildings and inability to deliver services, potential impact on vulnerable groups who are frequent service users.	HIGH	Follow Government guidance. Existing risk assessment for inspection/enforcement activity amended to include Covid considerations. Some PPE available to officers - gloves, masks, v limited sanitiser gel, instruction. Officers to travel in separate vehicles. Social distancing	Follow Government guidance when services reopen. PPE, distancing. Service specific risk assessments promote personal safety. Look at a phased reopening.	Service managers
CCP49	CCP	Staff wellbeing	Staff sickness, loss of motivation and productivity	HIGH	Skype meetings, including weekly all-staff meetings to keep everyone in touch; staff WhatsApp group		Service managers
CCP50	CCP	Potential increase in Domestic Abuse and constraints in the delivery of specialist support services. Local services have identified a significant drop in calls to the supportline since the lockdown was implemented.	Increased number of, and risk of harm to, victims of Domestic Abuse	HIGH	Commissioned services have provided business continuity plans and are submitting updates on a weekly basis. Weekly teleconferences are being held with the Contract Management Group to discuss emerging issues.	An analysis of impact of Covid-19 has been commissioned. This will consider the number of clients accessing services and if they are new referrals or repeats.	Christine Flinton
CCP51	CCP	Lack of access to emergency out of hours accommodation for vulnerable people such as victims of Modern Slavery or Domestic Abuse.	Vulnerable Victims unable to access emergency accommodation. Potential for them to remain in situations which leave them at risk.	HIGH	Liaison with the Homelessness Sub Group of the LRF to understand the wider provision around emergency accommodation for those rough sleeping or homeless and identify opportunities and gaps in provision for vulnerable victims of crime.	Proposals to be developed to address gaps. Additional resource may be required.	Christine Flinton

CCP52	CCP	Loss of audience and volunteers due to temporary closure;	Loss of all physical visits during closure period; loss of profile resulting in downturn in usage once the pandemic is over; drop in volunteers and volunteer hours. Performance affected unable to reach/maintain targets.	HIGH	Increase in online activity through blogs and social media; participation in national profile-raising campaigns ; adding more information online to increase visibility of collections etc.	Continue to explore new ways of reaching people remotely, including remote volunteering, seeking further grant support from Arts Council and via partnerships to facilitate engagement. Promote and actively market services with communications team when re-opening.	Service managers
CCP53	CCP	Non/partial achievement of savings	Potential overspend on budgets, impact on corporate budgets	HIGH	Seeking to minimise all unnecessary expenditure. Some savings already achieved	Seek to implement savings proposals as soon as lockdown ends	Service managers
CCP54	CCP	Loss of income	Potential overspend on budgets	HIGH	Regular budget monitoring, potential losses can be estimated.		Service managers
CCP55	CCP	Procurement delays	Delay in procurement processes can impact on future savings e.g. library self-service.	HIGH	Some procurement processes progressing virtually		Service managers
CCP56	CCP	Resources management	Required to process large amounts of stock when re-open. All stock will still need isolating for 72 hours and will require managing. Publishers delaying publication of new stock resulting in no deliveries of new stock. Impact on existing and potential library users.	HIGH	Libraries currently closed	Ensure staff are available to process stock, maximise use of existing resources	Ruth Sharpe/Michelle Parker
CCP57	CCP	Staff are unable to work from home	Loss of productivity.	HIGH	Laptops deployed to appropriate staff. Regular catch-ups between staff and their managers to ensure people have work to do.	Source some additional laptops. ICT to enable remote access.	Service managers
CCP58	CCP	Too few staff available to carry out Trading Standards statutory inspections, other urgent enforcement, due to self isolation/illness	Possible reputational damage, risks to human health through failure to tackle unsafe practices/products, risks to animal health welfare	MEDIUM	To ensure officers work from home to avoid unnecessary contact etc. Limit as far as possible routine Trading Standards work away from the 'office'/using alternative means to undertake work (e.g. taking statements remotely)	Continue to highlight DCC guidance and limit unnecessary contact through enforcement	Steve Allen
CCP59	CCP	Additional relief costs once regular staff return to work, to cover sickness and holidays that could not be taken due to pandemic	Budget pressures and reduced capacity to deliver services if services reopen and staff have to use up annual leave before the end of the financial year	MEDIUM	Staff encouraged to take annual leave during lockdown.	Implement guidance from HR on managing leave etc.	Service managers
CCP60	CCP	Lack of decision re ongoing grants to community arts organisations	Community arts organisations fold	MEDIUM	Review of VCS grants ongoing		Ann Wright
CCP61	CCP	Cancellation of most activity may lead to artists, arts organisations, festivals and creative industries going out of business	Some of the Arts Service's programmes affected; fewer partners and freelancers to work with resulting in less diverse offer; potentially, increased delivery costs	MEDIUM	Programming of online activities, where feasible; planning for re-scheduling of activity; extension of contracts where necessary; advice to artists and arts organisations about where to get financial help from		Ann Wright
CCP62	CCP	Transfer of Tier 4 libraries to Community Management	Groups unable to continue with the process due to illness and lack of volunteers. Losing momentum with the groups. Unlikely to reach the Service Plan target	MEDIUM	Project Officer keeping in regular contact with groups. SLA's and lease agreements prepared in readiness.	The library service aims to transfer libraries as soon as possible.	Michelle Parker/Sue Jackson

CCP63	CCP	Unable to deliver projects effectively and within the planning timeframe. Partnership work will be affected e.g. Thriving Communities and work with job centres.	Unable to support partners in achievement of shared outcomes. Performance affected unable to reach/maintain targets.	MEDIUM	Regular monitoring of plans and activities.	Engaging and promoting services via a digital platform. Promotional campaigns	Service managers
CCP64	CCP	Belper Library new build	Delay in the opening of the new Belper Library	LOW	Ongoing communications and updates with the contractor. Skeleton staff on site.	Skype meeting planned with stakeholders 21st April. Updates and plans moving forward to be discussed.	Sue Jackson
CCP65	CCP	Damage to archive and museum collections due to lack of staff monitoring	Loss of information / objects; cost of disaster recovery; reputational damage; insurance deemed invalid.	LOW	Staff visit regularly to check building and environmental conditions. Fire brigade informed that buildings aren't occupied.		Service managers
CCP66	CCP	BCP prioritised in eventuality of 'building' failure/disaster.	Not operationally configured to react to unfolding events.	HIGH	Readdressed priorities in context of COVID-19.	Continued annual review.	All
CCP67	CCP	Is cleaning specification sufficient for COVID-19.	Inadequate cleaning.	HIGH	Head of Facilities Management liaising with H&S produced new cleaning specification.	Continually review in line with Government guidelines.	Head of Facilities Steve Walters
CCP68	CCP	Vulnerable staff.	Expose staff to unnecessary risk.	HIGH	Health survey populated by vulnerable workers. Results circulated to HoS to ensure.		All
CCP69	CCP	Lock down - facilitation of essential services: emergency building repairs, statutory examinations, kitchen maintenance, asbestos surveying, fire alarm servicing.	Inability to complete essential work.	HIGH	Created list of essential services. Operational Risk Assessment produced and communicated to employees who cannot work from home. Suspension of non-essential services. Reallocate operatives with skill set to construction.		Head of Maintenance Steve Brown
CCP70	CCP	Lock down - continuation of construction work.	Site specific safety requirements.	HIGH	Operational Risk Assessment produced and communicated to employees. Reallocated procurement & contract officers to buying work.		Head of Projects David Beard
CCP71	CCP	Childcare required for key workers.	Unable to attend work on essential services without childcare.	LOW	Key worker letter produced and distributed to relevant workers.		All
CCP72	CCP	Suppliers of materials required by Priority 1&2 services closing down.	Unable to complete emergency jobs in assets categorised as providing priority services.	HIGH	Suppliers categorised into priority. Phone contact made with each supplier to ascertain opening times. Centrally held spreadsheet updated daily with specific vendor requirements/limitations. Operatives made aware of ability to purchase from non-contract suppliers.		Head of Business Geraldine Massey
CCP73	CCP	Service areas identified as P1&2 service providers unable to work from home.	May result in insufficient capacity to receive calls from service users.	MEDIUM	Redistribution of lap-tops and mobile phones from P3&4 workers.	Tested ability to operate service from homes (redirection of phones). Agreement from audit to reconfigure internal controls for timesheet inputting remotely.	Head of Business Geraldine Massey
CCP74	CCP	Workforce supply & demand - lack of capacity on emergency call out rota.	Inability to answer 'out of hours' emergency calls if incumbents self-isolate or fall ill.	MEDIUM	Increased number of responders on emergency call out rota.		Head of Maintenance Steve Brown
CCP75	CCP	Shortage of cleaning materials (disinfectants, viricidal, germicidal) and PPE.	Inability to clean effectively. Inability to protect vulnerable workers.	HIGH	Document current stock levels and monitor closely. Place orders with suppliers for continued delivery. Submit requirements and RAG rating for PPE to central ordering service.		Head of Facilities Steve Walters Head of Maintenance Steve Brown
CCP76	CCP	Advised by HSE that all building statutory examinations are still required during COVID-19.	Refocussed activities of suppliers and operational staff to buildings categorised as high risk in context of COVID-19.	HIGH	Asset Manager made contact with key staff in each service department to establish what buildings are open. Building closure master spreadsheet established and updated daily.		Head of Maintenance Steve Brown
CCP77	CCP	Buildings refusing access to operatives/contractors.		HIGH			Director of Property Dave Massingham

CCP78	CCP	Contaminated vehicles following use by self-isolated operatives.	Potential to spread COVID-19.	MEDIUM	Transport cleaning protocol issued to Heads of Service.		Head of Maintenance Steve Brown Head of Facilities Steve Walters
CCP79	CCP	Impending new starters will not have access to laptops.	Lack of productivity.	LOW			All
CCP80	CCP	Self-isolation of 'productive staff'.	Financial loss.	HIGH	Self isolation non-productive PMO established to record time.		Head of Maintenance Steve Brown
CCP81	CCP	Unable to sustain fire warden service in CCHQ sites.	Inability to alert fire service and account for staff in event of a fire.	HIGH	Closure of some sites, sign in sheet requirement for users of sites still open. Cleaners reallocated to P1&2 areas.		Head of Facilities Steve Walters
CCP82	CCP	Post handling at Chatsworth Hall site.	Post not processed.	LOW	DBS scanning in and distributing post to email.		Head of Business Geraldine Massey
CCP83	CCP	Insufficient work to sustain 'productive staff'.	Financial loss.	HIGH	Unable to work non-productive PMO established to record time. Sent home form populated daily and submitted to BCP Group. Operatives available to assist elsewhere.		All
CCP84	CCP	Reports of wireless connectivity issues.	Inability to process essential documentation and work processes.	LOW	Issued instructions how to access 365 without using Direct Access. Ensured sharing of private email addresses and mobile numbers of key workers.		Head of Business Geraldine Massey
CCP85	CCP	Reports of increase in possible information security breaches and fraud.	Compromised information security and internal control.	MEDIUM	Information Security and Fraud Awareness COVID 19 briefing note circulated to All Property.		Head of Business Geraldine Massey
CCP86	CCP	Delay to Corporate Property 2020 Programme	JVs were due to go live on 01/04/20. JV new go-live date delayed until 01/09/20 at the earliest. The later date delays other strands of CP2020 programme.	LOW	Revised mobilisation action plan prepared to meet new go-live date. Main concern is whether Business Case still valid, see related risks.		Interim Property Programme Director Stuart Knight
CCP87	CCP	Financial viability of Concertus and/or Vertas as a JV Partner for DCC	Covid-19 is adversely impacting many businesses. Covid-19 impact on Vertas & Concertus unknown. If either or both companies could fail. JVs would not happen	HIGH	Maintain regular contact with Concertus & Vertas during period of delay.	Update financial viability assessment for both companies before new go-live date. Alternative plan required if companies fail	Interim Property Programme Director Stuart Knight
CCP88	CCP	Loss of customers, and reduction in turnover impacting on Business Case and viability of proposed JV companies	A loss of business, including customers seeking new SLAs impacts on business case, existing and planned resources for new JVs & DCC client property organisation	MEDIUM	Monitor change in customer requirements and update financial model in business case.		Interim Property Programme Director Stuart Knight
CCP89	CCP	Inefficiency resulting from lack of direct supervision. Home working more difficult to supervise.	Financial loss.	LOW	Requesting progress reports.		Head of Projects David Beard
CCP90	CCP	Suppliers of materials required by Priority 3 and 4 services closing down.	Delay and increased costs to projects on site.	MEDIUM	Closing some sites to minimise costs. Seeking alternative procurements as necessary.		Head of Business Geraldine Massey
CCP91	CCP	DFG site visits and construction projects on hold.	Delay and increased costs to projects on site.	HIGH	Re-prioritise and progress design work.		Head of Projects David Beard

CCP92	CCP	Increased pressure on resources due to additional requests for assistance and advice, particularly around business continuity / internal communications.	Coronavirus communications have been prioritised with only other areas of high strategic importance (HOPs consultation etc.) continuing as business as usual	MEDIUM	Work reprioritised and reordered	Work continues to be prioritised and a phased return to business as usual will be implemented	Julie Odams
CCP93	CCP	Increased requirement for internal communications support from ASCH	High need for communications activity impacts on other areas of communications business	LOW	Discussions underway with Exec Director to plan work and resource including the possibility of additional support	Agreement of approach and implementation of recommendations	Julie Odams
CCP94	CCP	Staff availability due to absence, flexible working hours to accommodate childcare, self-isolation etc.	Reduced ability to deliver communication requirements	LOW	Monitoring of staff and workloads, adjustments made to staff working hours to meet needs of the business and support individuals.		Julie Odams
CCP 95	CCP	Delay of restructure	Enhancements to areas of work and developments of comms delivery do not happen in the agreed timescales	MEDIUM	Plan in place to begin restructure as soon as situation allows		Julie Odams
CCP 96	CCP	Roll over of Vuelio media monitoring contract	Opportunity to retender is not taken due to time pressures and contract extended for a further year. Opportunity for cost sharing with Derby City and improvement of purchased service lost.	LOW	Service will continue as is.		Julie Odams
CCP 97	CCP	Increased pressure on resources due to additional requests for assistance and advice.	Increase in call volumes could lead to reduced service	MEDIUM	Opening hours adjusted and shifts changed to manage demand most effectively		Julie Odams
CCP 98	CCP	Staff availability due to absence, flexible working hours to accommodate childcare, self-isolation etc. staff are largely unable to work at home.	Reduced service to residents.	MEDIUM	Office layout adjusted to support social distancing, change of shift patterns, limited homeworking introduced for a small number of services.		Julie Odams
CCP 99	CCP	Delay of restructure	Enhancements to areas of work and developments of CD delivery do not happen in the agreed timescales, resulting in a reduced customer experience	MEDIUM	Plan in place to begin restructure as soon as situation allows		Julie Odams
CCP 100	CCP	Lifting of lockdown restrictions	Change to current advice and circumstances will bring extensive comms requirements (internally and externally) and an increased volume of resident enquiries similar to that experienced at the start of the lockdown.	MEDIUM	Business planning and prioritisation to manage requirements as they emerge.		Julie Odams

CCP 101	CCP	Project may be put on hold due to finance and procurement concerns	Concerns over finances and ability of suppliers to engage fairly with tender may lead to a corporate decision to suspend this and other change projects. Council plan priorities will not be met. Customer experience will not be improved. Project team (on fixed term contracts) will leave putting us at a major disadvantage when the project is resumed. Complaints solution not delivered. Savings for Call Derbyshire and forecast for other areas will not be achieved. Political expectations will have to be managed.	HIGH	CMT to lead prioritisation piece for council plan projects to establish whether project can continue. Mapping underway for impacts and implications of going ahead to original timescales, delaying implementation in the short to medium term, or a delay of 6 months+ / cancellation.	Julie Odams
CCP 102	CCP	Advertising income cannot be achieved because of lack of procurement / delays to project	In line with CCP 101 if the council decides not to progress procurement the £120K income for 20/21 will not be achieved. Any delays to the process (which has already been significantly delayed due to capacity issues) will affect the income achieved.	HIGH	CMT to decide on procurement position. Project to be progressed asap.	Julie Odams
CCP 103	CCP	Request for Policy and Research resources to deliver identified programmes of work arising from pandemic	Key skills within team stretched and unable to respond to demands for additional resource to support Council's response	MEDIUM		Sarah Eaton
CCP 104	CCP	Failure to deliver priorities set out in Council Plan and Service Plans 2020/21	Council Plan/Service Plan priorities for 2020/21 were agreed by Cabinet in March 2020. Current response has inevitably shifted focus away from delivery of agreed priorities to building and maintaining the Council's response. Potential reputational issues	HIGH	Review of Council Plan priorities and deliverables currently underway. CMT to review findings and consider a revised Council Plan setting out refreshed priorities for delivery	Sarah Eaton
CCP 105	CCP	Potential delay in taking forward work on Vision Derbyshire	Temporary pause of programme to enable Councils to respond to pandemic. Potential impact on delivery of contract from third part supplier	MEDIUM	Work undertaken behind scenes with PWC to carry on with identified pieces of work. Review of engagement activity and reengagement of Chief Executives and Leaders in programme of work currently taking place to get	Sarah Eaton
CCP 106	CCP	Mainstreaming of Thriving Communities approach delayed	Planned programme of work likely to be delayed due to focus on response to pandemic. Ability to engage with local communities severely impacted by social distancing measures. Impact on staff working in local communities	MEDIUM	Current plans to mainstream developed and ready for roll out. Opportunities to align work with leadership programme and Vision Derbyshire.	
CCP 107	CCP	Delay in progressing PMO/Enterprising Council proposals	Pause in programme leading to delay in engagement and progression of PMO proposals which will impact on delivery of Enterprising Council programme	MEDIUM	Engagement programme completed. Interim findings developed and plans to report to CMT in place.	
CCP 108	CCP	Delay in implementing VCS Review	Consultation on VCS infrastructure proposals currently underway. Pressure from sector to delay consultation given current situation will impact the Council financially and in the achievement of better outcomes	HIGH	Options paper drawn up and plans to take report to CMT and Cabinet CMT to clarify way forward agreed.	

CCP 109	CCP	Delay in taking forward work on Climate Change	Key political high profile priority with identified manifesto commitments. Delay in development and agreement of key work plan activity will result in delays in achievement of zero emissions targets by 2032. Refocussing of Vision Derbyshire work to address lack of partner capacity likely to result in delay in delivery of partnership climate change response.	MEDIUM	Current situation resulting in fewer emissions which should offset delays. Work taking place behind scenes to develop virtual action planning sessions which should prioritise activity and develop sound business planning approach. Session on approach to developing partnership response to be included as part of action planning workshop.		
CCP 110	CCP	Delay in agreeing and implementing new Performance Management Framework	Lack of engagement from across organisation likely to impact on development and delivery of Agreement of need to progress framework to ensure recommendations set out in Corporate Peer Challenge are delivered.	MEDIUM	Report to CMT setting out process and timetable for implementation agreed. Engagement session with key departmental representatives currently being planned		
CCP 111	CCP	Impact of delays on Policy and Research Work Programme	Inability of team to restart and deliver priority programmes of work at the same time due to scheduling of current activity.	MEDIUM	Team Work Plan currently being revised to reflect current and future programmes of work within available resources		
CCP 112	CCP	Potential staff wellbeing issues arising from prolonged period of working from home which could impact on delivery of work programme	Current situation likely to impact on key individuals within team over time.	MEDIUM	Regular 121 and additional informal catch up meetings put in place. Scheduled Management Team Catch Ups on a daily basis currently sharing of information and insight on a daily basis to identify issues in advance of these arising.		
CCP 113	CCP	Difficulty in recruiting to vacant roles within the team	Potential low response to advertised roles due to current situation.	LOW	Recruitment continuing and virtual interview processes planned		
CCP 114	CCP	Adverse impact on delivery of Phase 2 of HR Review	Identified savings not achieved to time Limited engagement approach	MEDIUM	Review of approach planned by end April 2020	Revised project plan to be developed to fully assess any impacts	Jen Skila
CCP 115	CCP	Adverse impact on Payroll Processing	Employee / Supplier may not get paid due to lack of resources, which in relation to some payees such as HMRC, could result in fines	LOW	Lee Gregory / Christine Vaughan authorises payment electronically now, therefore no paper signatories need to be obtained by HR Business Admin.	If HR Business admin were unable to complete this, the request can be sent directly to Treasury	Lee Gregory
CCP 116	CCP	Adverse impact on payment of invoices	Payments to suppliers may not be made on time due to lack of resources, which could lead to reduction in service and reputational damage	LOW	Other HR admin roles are able to pay invoices on OrderPoint, so can pick up payments temporarily if the HR Business Admin team wasn't able to do so.	None further required	James Hodges
CCP 117	CCP	Adverse impact on traded income	Reduction in Income from Traded Services	LOW	Packages live on S4S. Monitor buyback.	Schools - Work with S4S Team re sending "chase" emails and/or contacting Schools	Judith Sharkey Lee Gregory Jerry Sanderson
CCP 118	CCP	Failure to meet deadlines in ER processes	Reputational damage; loss of income; risk of ET	MEDIUM	Maintain regular contact/maintain good relationships with schools and TU's/review ways of working to incorporate Skype, conference calls etc. and maintain good customer service.	Constant review of how the work can be delivered in a timely way	Judith Sharkey
CCP 119	CCP	Reduction in customer service/service provision due to restricted resources / ways of working	Internal customers/directorates become dissatisfied HR Service may be restricted	LOW	Active involvement with all directorates	Ensure HRBP's maintain contact and prioritise work appropriately in tandem with directorates	Judith Sharkey, supported by all Heads of Functions

CCP 120	CCP	Job Evaluation Review - Stakeholder views (CMT & Focus groups) not fully captured in feedback stage of Job Evaluation review project.	Possible impact on delivery date of end of August and/or that the solution proposed is not fully reflective of range of DCC views.	MEDIUM	Carried meetings out by Skype where possible. Held one to one meetings where practicable across range of areas.	continual review & readjustment of timelines and activities. Review timelines and identify whether sufficient feedback has been identified to continue with project as planned and change focus of CMT/Focus groups if can be rescheduled for later in project timelines	Pete Buckley
CCP 121	CCP	Pay and Reward lead absence, for a sustained period of time, would impact Job Evaluation Capacity in the Council and the ability to implement pay negotiations, changes to pay terms and conditions, and comply with statutory reporting requirements	Councils capacity to proceed with any JE requirements including service reviews, structural changes and creating of new roles. Potential fines if statutory reporting deadlines are not met. Potential delays to pay award implementation.	MEDIUM	A 3rd person who has joined the team in the new pay structure has started on the job training, Formal training for HR staff is being explored relating to Job Evaluation is being explored. Option to utilise Job evaluation trained colleagues from other teams in the event of urgent service needs. All Pay and Reward team members are kept up to date with workload issues, pay negotiations and statutory reporting requirements.	Proceed with formal JE training as soon as practicable through external training providers for 12 HR staff. Appoint to current vacancies into the Pay and Reward Team. Future induction of new team members and on the job training and development.	Pete Buckley
CCP 122	CCP	Delays in recruitment to vacancies and potential staff absence may result in a delay in responding to SAR and FOIs	Potential fines, reputational damage	MEDIUM	Utilising a number of staff across the Reward and Resourcing function and possibility to include others across the HR function if required.	Start dates for one post agreed, a further appointment made anticipated to commence in June 2020 and recruitment to the remaining vacancy underway. Upon recruitment training will be arranged to ensure consistency in application and inline with the regulation.	Pete Buckley
CCP 123	CCP	Departmental review timescales may slip and may be difficult to undertake meaningful consultation	Budget savings not met, potential for ET claims where meaningful consultation not possible	LOW	Initial review of upcoming restructures does not present immediate concern.	Continue to review existing restructures planned and liaise with Senior HRBPs across HR.	Pete Buckley
CCP 124	CCP	Redeployment support during transition to new HR model coupled with off site working due to Covid 19	Potential for at risk employees who do not secure alternative employment to make a claim regarding policy not being followed/support not being offered.	MEDIUM	People change team have reviewed all staff on the redeployment register. Cases have been allocated amongst the team and contact made. Letters are being issued as well given that due to Covid 19 staff may not be accessing their work emails to ensure all have new contact details. This excludes IHR cases which sit within A&S. It also excludes 16 CS staff who are within the BS review. This is currently on hold and individuals have been advised of the temporary change in status by the CS lead officer.	Continue to support existing redeployees and contact any new additions to the register to ensure council's redeployment offer is in place.	Pete Buckley
CCP 125	CCP	Process Improvement Review – Delay in roll out of Lean Six Sigma training to HRLT and HR Services colleagues. Delay in capturing current state view and process mapping	Delay will be felt in realisation of benefits as colleagues are not upskilled in PI and making process changes. This will impact on savings achieved and HR budget reduction.	LOW	Tools and training courses continue to be created in readiness. Process changes made due to COVID 19 and remote working being captured. HR Business Admin team is capturing and suggesting improvements and we are continuing to implement these where possible to improve efficiency and increase team capacity.	Roll out of survey to establish current position to be considered shortly. Process changes made due to COVID 19 to be reviewed for implementation into BAU. Examples to be used as part of training and roll out. Proceed with training as soon as is practical.	James Hodges
CCP 126	CCP	Health and Safety Training Requirements not met	New starters/volunteers supporting services not receiving necessary training leading to unsafe working practices and potential accidents	MEDIUM	Workbooks have been produced for essential health and safety topics (moving and handling and Positive behaviour support) by specialist staff in conjunction with L&D colleagues and the online suite of E-Learning health and safety courses remain available via DLO.	Existing training content to be reviewed and any potential shortfalls in offer identified.	Jerry Sanderson
CCP 127	CCP	Liability and Third party Claims	Claims information required by legal not submitted in line with Jackson protocol requirements leading to larger claims pay-out to solicitor's	LOW	Jackson protocol's established within departments however access to key staff could be restricted during lockdown in certain establishments	JS to write to Legal Services with updated contacts within Health and Safety and to outline potential issues	Jerry Sanderson
CCP 128	CCP	Accident reporting and investigation	Late notification of accidents leading to non compliance with statutory reporting timescales under RIDDOR and accident investigations not being carried out effectively due to Social distancing	LOW	Accident reporting system and departmental guidance in place and health and safety staff monitoring this. Informal agreement in place to ensure on site accident investigations take place where a serious accident requires this	Guidance to be issued regarding requirement to report COVID-19 cases	Jerry Sanderson

CCP 129	CCP	Fire Safety	Buildings being used by staff who don't usually work in them or reduced staffing levels in buildings leading to reduction in fire safety standards	MEDIUM	Buildings should have operational fire risk assessments, fire evacuation procedures and fire fighting equipment in place. Localised signing in and out procedures developed in a number of offices	Health and safety to produce a circular for managers to remind them of the need to continue to observe health and safety requirements during this period which will include fire safety	Jerry Sanderson
CCP 130	CCP	Lack of on site inspection/auditing	Non compliance with statutory requirements in relation to testing or operations not identified	LOW	Departmental advice and guidance available to all managers and statutory testing programmes are continuing	Health and safety to produce a circular for managers to remind them of the need to continue to observe health and safety requirements during this period.	Jerry Sanderson
CCP 131	CCP	Health Surveillance	Inability to carry out face to face health surveillance due to Social distancing protocols	LOW	Advice sought from HSE and agreement to implement telephone consultations during lockdown	Face to face health surveillance to build on work carried out in telephone appointments to resume after lockdown	Jerry Sanderson
CCP 132	CCP	Statutory training not delivered	Compliance with statutory obligations impacting on practice of frontline roles; potential fines and reputational damage	MEDIUM	Minimum training workbooks/eLearning for all priority roles available on DLO, in place of face to face training. Remote L&D support in place for individuals and managers.	Minimum training can be accessed by the wider workforce if deemed necessary at the time of renewal; to comply with statutory obligations.	Sally Pearson
CCP 133	CCP	2020 apprenticeship scheme not delivered	Potential resourcing problems by not replacing current apprentices. Delay in learning and end point assessment for current cohorts.	LOW	Planning for September 2020 cohort.	Escalate decision to commence or pause.	Sally Pearson
CCP 134	CCP	Leadership, Management & Senior Leadership development paused, with pause in revised myplan deployment.	Delay in development and implementation.	LOW	Working with WIGS to support revised senior leadership approach. Leadership Apprenticeship programme for line managers being developed with Derby University. Myplan status being reviewed.	Escalate decision to commence or pause.	Sally Pearson
CCP 135	CCP	BAU recruitment and on boarding processes are delayed due to Skype arrangements with candidates unfamiliar with Skype	Potential delay to new starters in key areas	LOW	Recruitment and Pre-screening teams prioritising vacant roles by need. Candidates are pro-actively managed through the process. Emergency recruitment process in place for critical roles.	Continued to support candidates and monitor outputs from process.	Lee Gregory
CCP136	CCP	Delay in procurement and delivery of contracts	Failure to deliver budget savings and improvements in service delivery	MEDIUM	Existing contracts are being extended as necessary	Extensions of existing contracts	Lorraine Green
CCP137	CCP	IRIS system incompatible with home working	All casework will have to be done manually. Delay in dealing with faith deaths.	MEDIUM	A contingency system has been devised and all office staff have been familiarised with its use.	Contingency arrangements to continue	Lorraine Green
CCP138	CCP	Increase in backlog of cases not completed within 12 months due to inquests not being held	Failure to meet Chief Coroner requirements	MEDIUM	Pending and new inquests have been reviewed and are being held as documentary/'on the papers' inquests where possible. Where possible attended inquests are being held as video or telephone hearings and the recently installed new audio visual court equipment will enable greater use of these mediums for inquests. Now both coroner's offices have 2 functioning courts each it will be possible to deal with the backlog quicker than would otherwise have been the case	Existing arrangements will continue until restrictions are lifted	Lorraine Green
CCP139	CCP	Complaints referred from Ombudsman not dealt within timescales	Reputational damage to DCC	LOW	new complaints received by the Ombudsman is suspended at present	suspension of new complaints will continue until LGSCO notify otherwise	appropriate client officers
CCP140	CCP	Failure to meet income target from s106/38/278 agreements because of lockdown	Impact on budget.	MEDIUM	to keep under review	Dependent on lockdown restrictions on construction industry being eased	PGP
CCP141	CCP	Backlog of Rights of Way claims owing to restrictions on site visits	potential increase in complaints	LOW	to keep under review	Dependent on journey restrictions being eased	PGP
CCP142	CCP	Urgent Officer process of decision making including disapplication of normal democratic processes found to be not fully compliant with constitution and legislation/regulations	Reputational damage to DCC and breach of regulations and/or legal challenge to validity of decisions	MEDIUM	Procedures in place agreed by CMT - urgent officer decision form revised. Urgent Officer decisions with supporting reports provided to Cabinet.	Urgent decision process to be monitored and reviewed as democratic processes return to normality. EIA being carried out to identify equality implications in a methodical manner.	SH/RA

CCP143	CCP	failure of virtual meeting arrangements	Reputational damage to DCC and breach of regulations	MEDIUM	Arrangements reviewed and advice sought from virtual platform providers such as Microsoft	Arrangements to be regularly reviewed in light of experience	SH/RA
CCP144	CCP	Backlog of registrations of births, deaths and notices of marriage, particularly once isolation restrictions are lifted	Reputational damage and increase in complaints and significant loss of income	HIGH	Positions re registrations kept under review	Potential recruitment/redeployment of additional staff on a temporary basis	SH/RA
CCP145	CCP	New Regulations introduced for remote appeals. High volume of appeals with a limited number of Panel members available and staff working remotely. Potential issues with IT and the delivery of virtual appeals. Existing timescales, training and administration requires urgent review to ensure compliance with the new regulations. Additional resources may be required to support Dem Services as there will inevitably be an increase in administrative responsibilities as a result of the new regulations. There are other significant risk areas relating to the sending of confidential information electronically to parents. All these risks must be considered and managed to ensure appeals operate fairly and transparently.	Reputational damage to DCC and breach of regulations. Increased Legal challenge to the Authority for maladministration and unfair appeals if the process is not carefully planned and managed. The potential for parents to be denied their statutory right of appeal if admission appeals arrangements are not in place.	HIGH	New Regulations reviewed and action plan produced.	Potential urgent recruitment of new Panel members along with associated urgent training. Potential additional support for Democratic Services for clerking appeals from within the Department.	Jane Lakin
CCP 146	CCP	The Review is delayed	Reputational damage to DCC and potential delay in improvements.	LOW	Additional capacity in place agreed by EA and SH	The Centre for Public Scrutiny will implement their outline proposal (shared with Cabinet CMT) from 4th May - July 2020 .	SH/Jeanette McGarry
CCP147	CCP	Delayed implementation of the Governance and Democratic Services software system.	Delayed efficiencies and improvements in governance including the delay in increased transparency and recording of decisions delegated to officers and the process for committee reports.	MEDIUM	Additional capacity in place agreed by EA and SH	Jeanette McGarry to programme manage and prepare a project plan	SH/Jeanette McGarry
CCP148	CCP	Proper information governance procedures are not followed, resulting in unintentional inappropriate sharing of sensitive information	Reputational damage to DCC and breach of regulations	MEDIUM	Members are being reminded of the importance of confidentiality	Cascade key messages and promoting information security campaigns, training including e-learning modules.	Michelle Archer
CCP149	CCP	Core offer implementation. The core offer was to be implemented across Legal Services in relation to all areas of work as a mechanism to reduce demand on the service to that which existing staffing levels could support or to identify where costs would need to be made to departments to support the delivery of services.	It has not been possible to introduce the core offer as services are currently focussed on managing the impact of the pandemic and staff shortages rather than working in a different way with less reliance on legal advice.	HIGH	Discussions have taken place with Children's Services highlighting that the numbers of cases outsourced are unlikely to decline and may continue to increase if demand on services is not reduced. Children's Services are reiterating to Social Workers that they should ensure that case discussions are taking place fully with senior managers before Legal Services are consulted regarding cases. Other teams within Legal Services continue the dialogue with departments to prepare for the implementation of the core offer later in the year highlighting the need to reduce demand on the service.	The core offer to be introduced across all of Legal Services later in the year. The work being undertaken as part of the review of child care/ child protection litigation will also support the introduction of the core offer at this point. Other teams to continue discussions with departments and these discussions form part of the Service Level Agreement discussions between Departments and Legal Services. .	SLT Legal and Democratic Services.

CCP150	CCP	Increased external expenditure on temporary locum staff if there an increase in workloads and/or a decrease in available staff to undertake the work.	Increased expenditure over and above the current staff budget allocation.	MEDIUM	Staff are being enabled to work remotely as effectively as possible to undertake as full a case load as possible. The social care legal team (who currently have locum staff) continue to liaise with the Judiciary to support the conclusion of cases , rather than case determination being delayed.	IT solutions continue to be pursued to increase staff capacity to undertake cases. Spot purchasing of locum staff has been explored as a cost effective way of increasing capacity to undertake cases.	SLT Legal and Democratic Services.
CCP151	CCP	Delay in the recruitment of trainee solicitors.	It was anticipated that these posts would be commencing employment by late summer 2020. This is now unlikely to be the case.	MEDIUM	The process is planned to recommence in July 2020 although this may be subject to review dependent on whether the lockdown is ongoing.	All applicants have been notified of the delay to try and maintain their interest in the post and to ensure they are available when the recruitment process recommences.	SLT Legal and Democratic Services.
CCP152	CCP	Delay in the introduction of the IKEN case management system.	It was anticipated that IKEN would be operational in April 2020 and that training for all members of Legal Services would be undertaken in late March 2020 . Both training and implementation have been delayed .	MEDIUM	Work continues to ensure IKEN will be effective when implemented. Adaptations are also being made to the Solcase case management system to enable this to be more effective for working from home.	Introduction of IKEN in July and training immediately before.	SLT Legal and Democratic Services.
CCP153	CCP	Staff wellbeing negatively impacted by remote working .	Prolonged working from home may have a negative impact on people.	MEDIUM	Regular team meetings and supervision are taking place. Staff are being supported to undertake work flexibly whilst managing other commitments which have arisen as a result of the pandemic (e.g home schooling).	Wellbeing in teams will continue to be addressed in all meetings and supervision discussions.	SLT Legal and Democratic Services.
CCP154	CCP	Delays in the payment of invoices.	Payments to suppliers may not be made on time due to lack of resources, which could lead to a reduction in future service provision and reputational damage	LOW	Staff have been assigned to ensure the prompt payment of invoices and to address any backlog in payments.	The numbers of invoices being made are being carefully monitored and this role is being prioritised as necessary.	SLT Legal and Democratic Services.
CCP155	CCP	Litigation not conducted effectively with court/ tribunal deadlines not adhered to.	Working away from established systems with reduced access to solcase could lead to documents not being filed or served in a timely manner.	MEDIUM	Increased diarising of dates outside of the case management system to ensure that deadlines are adhered to. Increased supervision and case discussions to ensure the regular review of cases. Instructions from departments may also be delayed and this needs to be factored into court timetables.	Regular review of all ongoing litigation to ensure compliance with court directions.	SLT Legal and Democratic Services.
ASCH CV-19 2020/ 03 1	ASC&H	<u>Delivery of services to people with more complex needs needs to be prioritised</u> and where appropriate additional risk assessments take place		HIGH	If regular workers are unable to support clients, careful planning is in place to ensure appropriate skilled staff support the client. Being considered through workforce planning group, and RAG rating of P&P clients is identifying those who require higher levels of support. Proposal been agreed 20/04 by CMT to utilise two day centres to support people with challenging behaviour who are at risk	Exploration of respite provision for escalation scenarios, some of which needs to be done in conjunction with NHS colleagues and via health and social care capacity group. Need to link in commissioning function. Options need to be developed for people with a diagnosis of COVID-19 and those without a diagnosis. Co-ordinated clinical response also required. SK to monitor and feedback	JR/ SK
ASCH CV-19 2020/ 03 2	ASC&H	Risk of safeguarding issues/incidents as person no longer receiving regular support at day service or via voluntary sector setting_Need to undertake risk assessment to ensure appropriate client support in place to sustain safe support in		HIGH	Ongoing review and management by P&P teams of clients which is being captured via a form on Mosaic. Minimum of fortnightly review in place. Individuals who access Direct Payments have been contacted and the team are in contact with them regularly. Front line service guidance clearly outlines process. Initial client contingency plans in place to support needs even if in a different	• VW to get assurance that contingency planning in place is personalised and robust. Proposal that Group Managers sample and review a small number of cases for assurance and quality checking, which is then fed up for consolidation and reporting to Gold for assurance. Process is required to provide support to area teams regarding route of escalation if any issues with vulnerable clients develop that cannot be	DS/ VW/ SK/ EL/ LEP
ASCH CV-19 2020/ 03 3	ASC&H	<u>Support to homelessness client groups via effective partnership working</u> with district and borough councils to ensure appropriate and adequate support, especially if		LOW	Engagement via LRF and Safeguarding Board Confirmation of distribution of contingency audit tool and associated guidance documents via Silver Command 15.04.20.	DSAB Independent Chair is aware and is reviewing. Need to ensure ongoing connectivity between the organisations via sub group via Safeguarding Board and use of VARM framework and information shared in safeguarding team.	JR/ SK

ASCH CV-19 2020/ 03- 24	ASC&H	Heightened risk of fraud to vulnerable client groups due to services, community based provision and support having to be accessed in different ways. E.g. spam emails. Previous research by SCIE and the National Fraud Intelligence Bureau found that those most at risk to financial scams and fraud were older people who had mental capacity and did not yet need any care and support. This group was typically more isolated and social contact of any kind was often welcomed without sufficient caution.	LOW	Communications campaign and information on council website and DSAB is raising awareness of this issue. Also flagged in staff briefing on a regular basis. Signposting to DSAB website in comms for further advice and information.	JR to keep under review. Training of volunteers via the video training needs to be shared with the CRU so it becomes part of an induction process. Need to replicate with Care Bureau.	JR/ SK
ASCH CV-19 2020/ 03- 30	ASC&H	Mental capacity of people in shielded cohort needs to be considered in support model as some individuals in this group may not be able to request support proactively as advised in the letter from the NHS	HIGH	Full cohort data set has been shared with local authorities for checking and data matching. ASCH MIT team aware and will check info when it arrives. ASCH ACATT Team member is liaising with CRU alongside a commissioning manager to consider issues from ASCH perspective, including mental capacity. Appropriate assessment, triage and identification of need processes are in place with the CRU/Call Derbyshire structures		DS
ASCH CV-19 2020/ 03- 32	ASC&H	Release of people requiring Adult Social Care support who may currently reside in prison. Additional pressure on social care services may occur, and other provision may need to switch to community based rather than prison based support.	LOW	JR to act as point of liaison to provide assurance to Risk Group that sufficient care, support and safeguarding measures are in place between ASCH, HM Prison, Housing authorities, Poilice and Probation Service. JR to review concern about prisons external to Derbyshire and therefore limited visibility of them and report these back to Risk Group.		JR/ SK
ASCHCV- 192020/0 4-34	ASC&H	People with mental health problems, OCD, drug and alcohol dependence may be in a state of heightened anxiety.	HIGH	People who are street homeless may have lost income from begging and be facing reduced access to drugs and alcohol on which they depend. Commentators have already warned of increased incidence of depression and suicide risk as a result of fear and loss of freedoms, loved ones, income and hope. At this time, those who are particularly vulnerable may accept help from those who seek to exploit this group.	Mental health services have made available information about how to access services across Derbyshire including telephone no's for the voluntary sector e.g. Samaritans. The District Councils have accommodation in place North and South for homeless people and also for people fleeing Domestic Abuse.in two hotels. Suicides are being monitored by both Mental health services and our own Public health division within and outside of the Suicide Prevention Forum	JR/ SK
ASCH CV-19 2020/04- 35	ASC&H	Failure to discharge duty of care that local authorities have towards an individual's risk of serious neglect or harm	HIGH	Emergency legislation will make changes to the Care Act 2014 in England and the Social Services and Well-being (Wales) Act 2014 to enable local authorities to prioritise the services they offer to ensure the most urgent and serious care needs are met. Importantly the legislative amendments will not remove the duty of care that local authorities have towards an individual's risk of serious neglect or harm so this needs to be prioritised throughout COVID-19 response	Adult care continue to focus on prioritising the safety of individuals within P and P on all interventions. The Safeguarding responsibilities within the new legislation have not changed and the principles remain in place. Review within Silver and bronze.	JR/ SK

ASCH CV-19 2020/04- 36	ASC&H	Risk of people being subjected to increased domestic abuse due to social distancing requirements and a need to stay at home	HIGH	Community safety Officers are fully engaged with the police on DA issues including the facilitation of refuge and IDVA services. Adult care safeguarding Team work closely with the local authority Community Safety Service Officers	£524,000 domestic abuse grant has been issued by MHCLG to Derbyshire which will be used to provide specialist support services to those with complex needs. It will also provide outreach to people who may not automatically think of asking for help but may be at risk e.g BAME community members, people from the LGBT community and older people	JR/ SK
ASCH CV-19 2020/04- 37	ASC&H	Limitation to respond to DSAB statutory responsibilities	HIGH	Review Thursday 16/04 -DSAB has requested that DCC as a key partner organisation provides assurance that there continues to be a robust safeguarding framework in place. Changes in proactives are communicated across organisations	Assurances have been given to DSAB by the Head of Adult Safeguarding. The Adult care Risk register and log is being shared with the Independent Chair of the SAB. Partners are also sharing respective logs and registers.	JR/ SK
ASCH CV-19 2020/04- 42	ASC&H	Limitation to respond to 6 safeguarding adults principles	MEDIUM	DSAB has asked to receive assurance that there is a culture within partner organisations that safeguarding practices continue	Assurances have been given to DSAB by the Head of Adult Safeguarding. The Adult care Risk register and log is being shared with the Independent Chair of the SAB. Partners are also sharing respective logs and registers.	JR/ SK
ASCH CV-19 2020/04- 43	ASC&H	Failure to provide DSAB with assurances re Care Act easements and impact assessments of decisions taken	MEDIUM	Concern that care act easement implementation may have adverse impacts on people accessing social care support.	Information has been provided to and by Senior Management team, together with practice guidance.	JR/ SK
ASCH CV-19 2020/04- 38	ASC&H	Nationally and locally there has been a drop in safeguarding referrals which may result in increased risks for vulnerable people	HIGH	Until w/c 20/04/2020 Derbyshire were following the national trend in a reduction of Safeguarding Referrals. Our data for the w/c 27/04/2020 has shown an increase in referrals. The SAB to continue to receive and share data.	The Safeguarding Team will review and challenge the data where appropriate.	JR/ SK
ASCH CV-19 2020/ 03 29	ASC&H	Adult Care legal cases: Contingency approach to adult care legal cases needs to be developed to check no adverse risks or issues through legal decision making process being delayed..	LOW	List of all of the live court cases with contingency contacts within Legal and the contact details for counsel being developed. Development of an individual plan for each case, as it will work better if the contingency contact/s have some knowledge of the case. Assurance to PSW from Legal re COP cases and that no adverse delays or implications. Colleagues in legal are able to work on cases from home. Need to routinely review and flag new concerns. Central referral legal email address has been issued to Group Managers	.	VW
ASCH CV-19 2020/ 03 40	ASC&H	Change to legislation results in a change in service scope and provision. The Coronavirus bill proposes changes to Care Act and mental health legislation. Some concerns have been expressed nationally about potential negative impact on human rights and the personalisation agenda.	MEDIUM	VW as PSW review all decisions in place alongside legal for ODR's and Cabinet Reports. VW cited on legal emails re easements. DSAB have asked for oversight of stage 3 and 4 decisions.		VW

<p>CV-19 2021</p> <p>ASC&H</p> <p>CV-19 2021</p>	<p>Workforce size and capability contracts due to government guidance regarding self-isolation and social distancing resulting in individuals need time off work as they themselves have symptoms of COVID-19 or family member does.</p> <p>Risk that due to guidance re self isolation for people over 70 and for those with underlying health condition the workforce across the care sector is reduced. Further impacted by school closures. Risk that workforce supporting vulnerable people are forced to self-isolate as they show symptoms of the disease. Across the three categories highlighted above the workforce is reduced and unable to deliver business critical tasks to support effective operation of adult social care services. Need to ensure that there workforce is DBS/ police checked. Limitations of being able to move staff around</p>	<p>HIGH</p>	<p>Development of workforce fast tracked redeployment procedures and training to ensure that existing trained or semi-trained workforce is effectively utilised.</p> <p>Recruitment of new care staff to work in key front line roles prioritised and expedited via fast track training programme</p> <p>Sequencing is in place starting with day service staff being redeployed to support day service clients at home; followed by those who need 'top up training' due to previous experience of working in registered care environment; staff with relevant training (e.g. first aid) that need to develop specific care skills; DCC staff redeployed from other roles and finally 'new' recruits to care sector. Revised DBS checking procedures in place to support recruitment nationally</p>	<p>Publicity and recruitment drive to promote key roles to individuals who may currently be self-employed or temporarily out of work due to previous role in another sector of the economy which has been impacted by CoVID-19 is being taken forward by the Workforce Group and reporting to ASCH Gold daily. Through system calls looking across wider external partners for resourcing support. Looking across DCC as an organisation to support with staffing issues.</p> <p>Staff survey to be distributed seeking further information about DCC Staff who may want to be redeployed by corporate HR. ST feeding results to ASCH Gold as appropriate. Staff volunteer and skills survey distributed and results being prioritised looking at internal resources to redeploy to care roles.</p> <p>Vulnerability staff survey will be reviewed weekly and updated position shared with ASCH Gold. ST feeding into ASCH Gold meetings as appropriate. Data now being used on "One point of contact" spreadsheet to identify individuals and also staff groups. New staff to be allocate to one place of work for their training and beyond to avoid risk of spread and cross infection. Resourcing Hub in place to provide a</p>	<p>ST</p>
<p>CV-19 2021</p> <p>ASC&H</p> <p>CV_19 202</p>	<p>Protect staff with underlying health conditions in line with national guidance</p> <p>Failure to adequately support the mental health and wellbeing of workforce needs throughout COVID-19 response. Frontline workers will be dealing with some very challenging operational scenarios, staff may be dealing with family issues related to COVID-19 and others may become more isolated through remote or home working.</p>	<p>MEDIUM</p>	<p>Departmental and corporate planning seeking to advise and mitigate against this. Corporate guidance was issued 07/04 and importance of this cohort has been regularly communicated through communications cascade process.</p>	<p>Vulnerability staff survey data output will be reviewed and updated position shared with ASCH Gold to enable review of staff cohorts who are vulnerable/ shielded and living with vulnerable/ shielded</p>	<p>ST</p>
<p>CV_19 202</p> <p>ASC&H</p> <p>CV_19 202</p>	<p>Failure to appropriately and adequately identify risks within the working environment in relation to COVID-19 for those staff who are unable to work from home and are in essential frontline care roles, e.g hospital discharge, homecare, AMPHs, care assessment roles/</p>	<p>LOW</p>	<p>REVIEW 09/04 Staff information has been shared corporately and departmentally via Comms Cascade, Practice Bulletin and this has included specific reference to Occupational Health and Mental Health support that can be accessed.</p>	<p>Need to keep under review and undertake further targeted communications if required. Escalated via Operational Teams to Silver/ Gold as appropriate for action. Need to encourage managers to continue with 1:1 sessions or check in sessions to discuss emotional health and wellbeing - to action via Staff comms and cascade. Showcase where teams/ managers have gone the extra mile to consider this issue as good practice. Well-being guidance and support has been launched. Employee Assistance Programme also been launched and details promoted. Further work continues on a Workplace App to support well-being.</p>	<p>ST</p>
<p>CV_19 202</p> <p>ASC&H</p>	<p>Failure to appropriately and adequately identify risks within the working environment in relation to COVID-19 for those staff who are unable to work from home and are in essential frontline care roles, e.g hospital discharge, homecare, AMPHs, care assessment roles/</p>	<p>HIGH</p>	<p>Various risk assessments have been developed for key roles and functions. Individual risk assessments in place for staff groups.</p>	<p>Staff teams have been instructed to complete and a QA process in place pending first initial review</p>	<p>DS</p>

2V_19 202	Testing of staff in line with Government Guidance & Protocols. Various different ways of testing - through DCC as Employer, CQC Route and also through Government website.	HIGH	Testing being offered to all those staff indentified in front line critical roles and their immediate family members who are symptomatic with COVID 19.	Staff need to be able to transport themselves to the test site and be able to drive. Government bringing on line mobile units to capture these groups who can't drive. Variety of different processes in place concerns around capturing the information around testing and ensuring no-one is missed. Raising with Managers and Staff in comms. and also through Silver Group.	ST
ASC&H 2V-19 2021	PPE supplies are not available/limited supply for staff working in CQC registered setting/company or PVI homecare sector PPE supplies and equipment to staff who work in a CQC registered setting are not delivered in line with national government guidance. Feedback is being received locally from homecare sector re shortage of supplies and few have received free deliveries to date (25/3)	HIGH	Need to work with sector to raise the issue to LRF and support where possible to access supplies. CCG to act as co-ordinator for this provision from 08/04. DCC has processes in place to act as a provider of PPE equipment in a last resort scenario.	PPE Group co-ordinating response, ordering and supplies. Reporting daily via a highlight report into ASCH Gold to escalate issues. High priority for ASCH Gold at the moment.	CS
ASC&H 2V-19 2021	PPE supplies to PA's are not available/ limited supply putting clients in receipt of DP's and their PA's at increased risk of COVID-19	HIGH	Letter to DP has been sent to clients for information and provides practical tips and advice about how to source PPE		DS
ASC&H 2V-19 2021	Failure to have assurance of delivery of safe home care in the PVI sector exacerbated by capacity issues, lack of staff, inexperienced staff and lack of oversight. Concern of how to keep people safe when all contingencies have been explored.	HIGH	See training notes above and notes re review of flexible retirement requests. Potential use of hotels and other large venues being considered across health and social care sector.	Green RAG rating decision to be made by ASCH Gold to release capacity. Care Bureau approach will speed up the section and allocating work. Continued recruitment over the Easter break and initial recruitment has been successful - workforce group are the lead. Additional payment to care providers to assist with costs re COVID-19 being developed by CS and GW. National guidance proposes up to 10% extra payment per placement and a paper is being drafted to ASCH Gold for Thursday this week. Currently being monitored and no significant issues at the moment, however there may well be a capacity issue should significant issues arise.	CS
ASC&H 2V-19 2021	Failure to deliver safe care in independent sector homes exacerbated by capacity issues, inexperienced staff, lack of oversight from external visitors	HIGH	Assurance that Silver/Gold meetings reviewing daily and government guidance being reviewed in terms of care provision in residential care. New guidance to go to Gold 15/04 re DOLS, P&P link workers in place alongside contracts team. Weekly call and ability to flag concerns via Contracts Team - streamlined approach in development. Care Home Cell overseeing the Care Home market. CCG actively managing clinical side of Nursing Homes and established link GPs for homes. IPC support is readily available.	DOLs and COP DOLs data needs to be captured. Skyping into homes. Need to think about long term approach. Review use of link workers - 'walk around' with laptop and 1:1 conversations. Health staff to support? Advocacy support scoped. MCA guidance - VW/CS - LEP meeting to progress. Currently being monitored and no significant issues at the moment, however there may well be a capacity issue should significant issues arise.	CS/ VW/ LEP
ASC&H					

CV-19 2021	Residential homes refusing admissions/unable to admit due to COVID-19 concerns Limits capacity within system to support clients in appropriate setting but PHE guidance says should not do	MEDIUM	Limited capacity and system wide necessity means bed opportunities need to be maintained wherever possible via ongoing relationship management with contracts team. Appropriate public notices are in place and visiting restrictions in place for DCC homes - contracts checking with the PVI sector but same guidance has been issued. Barrier nursing is in place. Majority of homes offering places. Clear guidance in place from national government. Bed tracker tool in place.	Additional payment to care providers to assist with costs re COVID-19 being developed by CS and GW. National guidance proposes up to 10% extra payment per placement and a paper is being drafted to ASCH Gold for 16/04/2020. Agreed at Cabinet 23/04/2020	CS
ASC&H CV-19 2020	Local authorities are incumbent to find alternative accommodation where an individual cannot return to a care home that doesn't have appropriate accommodation	HIGH	Adult Social Care Action Plan published by the Government places a responsibility of local authorities to source alternative accommodation. This issue is being considered across the system in terms of a temporary bedded solution. Direct Care beds may need to be utilised for this purpose	Derbyshire Discharge Suite and may require a temporary bed in Direct Care establishment.	CS
ASC&H CV-19 2020	Supply chain issues or operational issues with ICES contract prevents delivery and installation of equipment to enable people to live at home independently. Lack of PPE for ICES staff to deliver or collect equipment from individuals who are self-isolating and service is impacted by staff absence. Equipment not available due to countrywide demand. Additional pressures created through DCHS request for 40 beds. Some people refusing access to property to install equipment and high demand for emergency and out of hours installation of equipment.	MEDIUM	Ongoing review via contracts team. Revision of authorisation thresholds being reviewed. Risks escalated to Silver Tactical re supply chain and linking in with NHS colleagues to understand about modelling and demand. Mitigations put in place regarding staffing and absence, Close technical equivalents are being sourced for equipment where there are supply chain gaps.	One of the queries back to NHS is how can they reduce the 'package' on discharge, so keeping equipment to an absolute clinical minimum. Triage system needs to be developed for the emergency and out of hours calls. PPE supply needs to be supplied to match demand. Roger Glithero Contracts Manager is playing a key role in terms of co-ordinating and Silver Tactical Group provides a route of escalation should issues arise.	CS
ASC&H CV-19 2021	Review of authorisation levels relaxation for Medequip ICES contract supports hospital discharge, but inadvertently results in higher cost equipment being utilised inappropriately across the system.	MEDIUM	Cabinet Report and CMT Decision pending following escalation to Silver Tactical and Gold meetings	CS and RG to actively monitor and escalate issues to Silver Tactical. Provision within Cabinet Report to remove relaxed authorisation levels as soon as is practically possible.	CS
ASC&H CV-19 2020	Support to PVI homecare sector: Many reports of clients cancelling all calls and wanting to go into self-isolation. System coping well in short term but there are risks regarding medium term sustainability - REMOVE AND MORPH INTO GREEN RAG RATING DECISION	MEDIUM	We have agreed to pay two weeks' notice and advised providers they need to fill these slots. Cancellations are supporting capacity elsewhere so resource is being redeployed. P&P have checked client capacity for making this decision and ensured still safe and explained new assessment when ready to receive care again. Improved invoicing arrangements to support cash flow.	Enhanced payments - see above reference - CS and GW. Care Bureau establishment - (release Green care packages. This has not been agreed by SMT) We will encourage providers to pick up new work to back fill capacity with those with identified need to maintain financial cashflow and workers within the system	CS
ASC&H					

V-19 2020	Support to clients with more complex needs via homecare provision: clients who require 1:1 or 2/1 to maintain community access are at present having their movements restricted which is likely to exacerbate anxiety levels. This will likely present as behaviours that challenge and potentially put some clients at risk of hospital admission. Concern that this was a risk as BAU.	MEDIUM	This is being monitored closely by the BRS support network (DCHS/CCG Commissioners/DCC Commissioning/Contracts and EST) and a daily teleconference is taking place which also includes Derby City commissioners.- SK	Daily updates across system in place, but Risk Group acknowledge that is a highly moveable issue day by day. Assurance is required and captured via daily calls to monitor position across sector by SK. JG/SK/SW are exploring alternative accommodation for non-symptomatic individuals.	CS/ SK
ASC&H V-19 2020	Handyman service For the foreseeable future the Derbyshire Fire and Rescue Service (DFRS) will not be carrying out safe and well checks within the home due to the need to keep their operational provision on the run. During this time the DFRS will be offering support to the voluntary sector to continue to support the vulnerable members in the community.	LOW	The DFRS will still accept referrals; however, they will be put on to a waiting list until they can resume		CS
ASC&H V-19 2020	Support to clients with more complex needs and behaviours that challenge in a residential care setting. Concerns regarding self-isolation of client that may cause anxiety and behavioural challenges. Staffing ratios may be reduced due to a large proportion of staff in self-isolation.	MEDIUM	This is being monitored closely by the BRS support network (DCHS/CCG Commissioners/DCC Commissioning/Contracts and EST) and a daily teleconference is taking place which also includes Derby City commissioners.- SK JV is escalating as part of BRS programme	Daily updates across system in place, but Risk Group acknowledge that is a highly moveable issue day by day. Assurance is required and captured via daily calls to monitor position across sector by SK. JG/SK/SW are exploring alternative accommodation for non-symptomatic individuals.	CS
ASC&H V-19 2020	Supported Living placements cannot be sustained due to reducing staff levels or need for individuals to self isolate	MEDIUM	Consideration is being given by providers to the possibility of moving clients to other services (within the local service) where 24 hr care for instance is being provided. Robust risk mitigation in place. EMH was an issue and mitigation has worked. Further consideration by SMT w/c 20/04	It should be logged however that there may come a time where a provider is simply unable to continue the staffing of a scheme(s) and may contact ASCH to assist. Currently being monitored and no significant issues at the moment, however there may well be a capacity issue should significant issues arise.	CS
ASC&H V-19 2020	Non contracted care - services that have been set up without involvement of the contracting team so the providers do not have the same level of oversight from DCC	HIGH	T10 provider - section 117 or DP placements. Seeking to move people out - particular risk	Oversight targeted. James Gough, Andy Green and Jane Bates supporting the provider. Links to safeguarding oversight established and agree to review after COVID-19 re procurement and financial regs review.	CS
ASC&H V-19 2020	Risk of Private and Direct Care care home failing due to lack of staffing and has an outbreak of COVID-19. There is unwillingness of staff to work in this environment due to risks associated with COVID-19 and therefore it cannot be sustained.	HIGH	Alternative accommodation? Consumer staffing arrangements. Health and DCC Direct Care staff to provide support? Provider failure workflow needs to be updated to reflect this scenario.		CS
ASC&H					

<p>2V-19 2021</p> <p>ASC&H</p>	<p>Need to focus on clear easy read information - guidance has been at points contradictory or confusing. Risk is that providers fail to interpret PPE guidance correctly resulting in risky practice. Clearer communication if care providers engaged as part of the decision making process</p>	<p>MEDIUM</p>	<p>Care Group will sign off comms via a group - CCG lead, homecare we take the lead and will prevent multiple messages going out to the market</p>		<p>CS</p>
<p>V-19 2020</p> <p>ASC&H</p>	<p>PPE supplies and equipment to social work staff who are not identified for equipment via national supply chain Particular concern re clients with more complex needs and also for AMPHs.</p>	<p>HIGH</p>	<p>PPE Hub is established and stock management system in place. Supplies are being regularly reviewed and ordering system in place. Reporting daily via a highlight report into ASCH Gold to escalate issues. High priority for ASCH Gold at the moment.</p>		<p>DS</p>
<p>V-19 2020</p> <p>ASC&H</p>	<p>Fast track hospital discharge procedures are in place which have potential long term negative implications to LA re clients and top-up fees. People end up on wrong pathway and limits ability of individual to enable independence. Potential overuse of P2 beds at expense of P1 provision due to national guidance to support discharge within 3 hours..</p>	<p>HIGH</p>	<p>Operationally challenging and need to consider specific implications regarding discharge. Need to consider opportunities to link up care capacity in relation to addressing needs of individual within a short operational time period. Non essential homecare</p>	<p>Newton Europe are working up capacity modelling to anticipate and manage demand. Green RAG rating decision to be made by ASCH Gold to release capacity. Care Bureau approach will speed up the section and allocating work. Continued recruitment over the Easter break and initial recruitment has been successful - workforce group are the lead.</p>	<p>TH</p>
<p>V-19 2020</p> <p>ASC&H</p>	<p>Hospital discharge for COVID+ clients who are symptomatic to P2 beds and risk of ineffective infection/ prevention control that increases risks to wider cohort within the care setting</p>	<p>HIGH</p>	<p>DCC are considering the Adult Social Care Action Plan and requirements to test. Individuals are also expected to self-isolate for 14 days. Number of P2 beds have been increased and we are currently assessing the proportion of these that can be used to appropriately support individuals dependent on particular symptoms and needs of an individual.</p>	<p>Developing plans with NHS in light of emerging guidance and local system planning.</p>	<p>DS</p>
<p>ASC&H</p>					

V-19 2020	National shielding model implementation for clients who are deemed vulnerable and at risk due to clinical condition - Realisation that Derbyshire shielding model data set contains high %age of individuals not known to social care. Data checking, cleansing and cross check to Mosaic is complex and may increase demand for services if not carefully managed. - Need to develop an effective and efficient process utilising online tools to enable these people to make contact with DCC as required and ensure they are appropriately supported through formal or informal service provision. Additional risks as the system goes live next Friday so short timescales to check data and establish system.	HIGH	Some mitigation provided by input from lead co-ordination role being led by LRF with military planning support. Mental Capacity impact is under review.		DS
ASC&H V-19 2020	Failure to deliver safe care in DCC residential homes exacerbated by capacity issues, inexperienced staff, lack of oversight from external visitors	HIGH	Assurance that Silver/Gold meetings reviewing daily and government guidance being reviewed in terms of care provision in residential care. New guidance to go to Gold 15/04 re DOLS, role of link worker being developed in conjunction with contracts team. Weekly call and ability to flag concerns via Contracts Team - streamlined approach in development.	DOLs and COP DOLs data needs to be captured. Skyping into homes. Need to think about long term approach. Review use of link workers - 'walk around' with laptop and 1:1 conversations. Health staff to support? Advocacy support scoped. MCA guidance	VW
ASC&H V-19 2020	Failure to deliver safe home care by DCC in house services exacerbated by capacity issues, inexperienced staff and lack of oversight.	HIGH	Assurance Silver/Gold meetings reviewing daily and government guidance being reviewed in terms of care provision in residential care.		DS
ASC&H V-19 2020	Need to minimise risk to clients in line with evolving national guidance, especially shielded group and those with long term conditions.	MEDIUM	Closure of OP and LD day services as people will be over 70 and potentially also have an underlying health condition. As of 20/03 this provision was closed for OP and 23/03 for LD. This is under fortnightly review at SMT and CMT to make sure guidance remains in place as appropriate		DS
ASC&H V-19 2020	Staff do not follow PPE guidance or self-isolation guidance further spreading COVID-19 to vulnerable client groups.	MEDIUM	Continued communications to staff, line management support in place. Weekly letters to front line care staff and information cascade to bronze groups. Risk assessment is in place.		DS
ASC&H V-19 2020	Clients in receipt of DP may not be able to put alternative support arrangements in place and we need to make sure we are in touch with these individuals especially from a safeguarding perspective.	MEDIUM	Contingency planning process is linking with DP clients. Systematic review in place.		DS
ASC&H					

<p>V-19 2020</p> <p>ASC&H</p> <p>V-19 2020</p>	<p>Limited clinical based support and other support means there is not sufficient support for people with a learning disability or autism that are in receipt of high level care packages from social care and health care. Particular concerns around those who need to self-isolate and those who need to access medical support, especially if the individual is known to have behaviours that challenge.</p>
<p>ASC&H</p> <p>V-19 2020</p>	<p>Building the Right Support programme on hold and temporary arrangements in place which prevent programme from progressing as planned. Associated costs, reputational and safeguarding risks to the authority associated with this.</p>
<p>ASC&H</p> <p>V-19 2020</p> <p>ASC&H</p>	<p>Financial payments and business continuity Importance of ensuring continuity of payments to providers throughout the period to ensure market stability and sustainability is maximised</p>

<p>MEDIUM</p>	<p>TCP COVID-19 Unplanned Care service that provides support where there is</p> <p>i) Break down in current care and support provision (no reported COVID-19 symptoms within the environment)</p> <p>ii) Break down in current care and support provision where a person in a family experiencing symptoms (the individual with LD/ASD or a key carer or family member)</p> <p>Support is provided by a short term placement but mapping needs to take place in relation to this.</p> <p>NHSE guidance, MCA guidance and guidance re LD and autism from SCIE has been reviewed</p>	<p>Further partnership working required to develop and sign off approach. However interdependency with workforce retraining and redeployment activity should capacity across the system become limited. Note concerns above re training staff to support complex clients - See mitigations above under BRS and note that a dynamic risk register is in development to consider all clients within this cohort from a system perspective on an ongoing basis. SK to liaise with colleagues from BRS.</p>	<p>DS</p>
<p>HIGH</p>	<p>System issue so escalate to Gold in light of specific issues. Concerns that a person was detainable but a bed could not be found. Gold aware</p> <p>Preparing for adult hood remains low risk for majority of clients but currently 4 are ones to watch and I would put in amber or red rating:- ? Covid-19 will likely delay providers responses/ ability to begin support/ identify a property form the tender. Building will be delayed for Eden.</p> <p>Clients escalating behaviours and difficulties with providers due to reduced staffing. A further client assessed as detainable, section 2. (LD), No ATU beds available. In addition CCG ceased additional nurse funding to a client and possibility provider may give notice. This is the lady previously detainable and no bed was found in 6 weeks. Last assessment outcome not detainable as behaviours and reduced (it is considered due to additional support to maintain her at the nursing home due to no bed, Lega were involved in this case)</p>	<p>Awaiting NHSE formal guidance but early indicator is:-</p> <ul style="list-style-type: none"> • Continue dynamic support process/community • Remote CTR process • 6-8 week remote oversight checks • Responsibilities/safeguarding • LeDer (not priority but to continue reviews of deaths) 	<p>DS</p>
<p>MEDIUM</p>	<p>Business continuity plans in place in finance team to maximise capacity and maintain processing of payments.</p>		<p>GW</p>

V-19 2020	Long-term financial impact of COVID-19 and business continuity arrangements put in place across the system have an adverse affect on ASCH budgets and long-term planning.	MEDIUM	Cost-code in place to accurately capture direct costs associated with COVID-19. Markers set within Mosaic to demonstrate costs of increased care package related to COVID-19. Hospital discharges are 100% recharged to health and this is captured in a Mosaic process. FABOs undertaking assessments in a timely manner and if can't take place an estimated model is in place. Approach is aligned with Derby City. to charge the additional costs for a new care cost. Agreed that just the difference will be charged. CCG colleagues to be engaged in process w/c 20/04 . Options for different hospital discharge approaches have been worked through.	Long-term implications for individuals who may be in homes with high top-up fees need to be mitigated. Financial assessments will take place with clients at the end of the COVID-19 period by FABO team - GW. Q and A for hospital discharge is being developed	GW
ASC&H V-19 2020	CHC arrangements - risk that LA is asked to pick up funding at the end of the COVID-19 period	MEDIUM		Need to be clear that as the client was CHC Nursing that will be there status at the end of the period. A CHC Review would need to take place and we may need to consider advocacy and support to the family through this process. Clear that CCG cannot unilaterally withdraw funding as it goes to a dispute process.	JH/ DS
ASC&H V-19 2020	Deputyship arrangements do not operate at full capacity	MEDIUM	Identified as a key worker and have been issued with a laptop to enable home working. Work around arrangements in place for South	Need to follow up in light of MCA guidance. Potentially issue easy read guidance on social distancing when a person collects money from an	GW
ASC&H V-19 2020	Information sharing and data protection needs to be maintained throughout process despite challenges on current structures, systems and need to share information about clients to prioritise next steps.	MEDIUM	Check appropriate data sharing arrangements in place and ensure that ICO guidance followed.	06/04 update: Currently being reviewed but other than Newton Europe requiring staffing info (current and historic) nothing else identified.	AB
ASC&H V-19 2020	IT equipment supply chain delays limited capacity for home working.	MEDIUM	Laptops available for staff in priority business critical roles and working through business continuity group to prioritise additional capacity. Encouraging staff to creatively use tower units and maintain social distancing.	06/04 update: 45 laptops outstanding and then as at current position all those ASCH staff requiring should have. Hopefully within next week (bank holiday excluding) hoping that all should be deployed. Audit of HOPs ICT/WiFi/Mobile network currently being undertaken – plans in place where identified lack. Over 200 Laptops now deployed to HOPs and business critical staff. All origionally identified staff now have appropriate kit to be able to work remotely. Connectivity audit of HOPs completed, however introduction of 4 "Derbyshire Discharge Suites" requiring additional checks and work around solutions to ensure connectivity for family contact.	GK
ASC&H V-19 2020	Heightened risk of information governance or data breach due to changes to working environment and business as usual activity.	MEDIUM	Reminders in staff newsletter and corporate review of information from Police re ransomware, spam etc.	Looking at with corporate and also ensure regular internal reminders issued. Will monitor those breaches received and may issue specific reminders if a theme appears.	AB
ASC&H					

1	ASC&H	Information on Newton Europe Sharepoint re capacity modelling. There is limited access to this business critical information via transformation team and access to Sharepoint. Also need to make sure that data collected is in line with current DSA and PIA	MEDIUM	DSA and PIA have been reviewed and no amendemnts requiried at this stage. Other members of the Transformation Team have access to SharePoint drive. Newton Europe team is fully staffed and any data held on their own SharePoint site can be accessed by other members of the Company if required.	Looking at with corporate and also ensure regular internal reminders issued. Will monitor those breaches received and may issue specific reminders if a theme appears.	GS
1	ASC&H	Adverse reputational impact due to concern from carers and family members/friends who are unable to visit individuals in DCC residential care settings.	MEDIUM	Skype and technology in place within DCC homes.		DS
1	ASC&H	Adverse reputational impact linked to ongoing HOPs consultation on department and/or organisation.	MEDIUM	Statement issued on DCC website to clarify current position. Will keep under review.		DS
1	ASC&H	Ineffective communications, information and advice provided to staff, clients, providers and carers in relation to COVID-19 response which leads to negative perception of department and/or organisation.	MEDIUM	Ongoing review and support from corporate communications team.		SO'H
1	ETE	Increase in number of staff self isolating resulting in reductions in workforce resource	LOW	<ul style="list-style-type: none"> • Suspension of Highways Business Covid 19 log enacted • DMT instruction to carry out only essential services and those that can be undertaken from home • Alternative working arrangements put into action for front line workers • Social distancing being applied to all workers not working from home • Generic risk assessment for ETE Operations during COVID 19 Pandemic produced 	<ul style="list-style-type: none"> • Key workers to be included on list for testing • Resource to be closely monitored and capacity increased if required. 	AG
2	ETE	Increased and sustained workload of staff during emergency situation	MEDIUM	<ul style="list-style-type: none"> • Social distancing being applied to all workers not working from home • Priority given to essential services agreed by DMT • Revised working practices enabled where necessary • Generic risk assessment for ETE Operations during COVID 19 Pandemic produced 	<ul style="list-style-type: none"> • Key workers to be included on list for testing 	EP
3	ETE	Management and redeployment of ETE staff	LOW	<ul style="list-style-type: none"> • Staff skills survey undertaken 	<ul style="list-style-type: none"> • Ask managers to encourage staff to complete survey taking into account their own circumstances. • Distribution and renewal process of PPE to redeployed staff where appropriate 	AG
4	ETE	Ability to renew contracts and reach a competitive market to maintain best value	LOW	<ul style="list-style-type: none"> • Procurement implemented extension of contracts due to be retendered • Agency agreements suspended for grass cutting and alternative provision provided for critical vision splays 	<ul style="list-style-type: none"> • Additional costs due to Covid 19 in relation to future contracts being reviewed 	AG

5		Disruption of supply chain and availability of products and services	<ul style="list-style-type: none"> • Front line service may be disrupted due to availability of required products • Increase costs due to demand and lack of competition 	LOW	<ul style="list-style-type: none"> • Discussion held with suppliers • Alternative suppliers contacted • Alternative methods of working undertaken to enable alternative products to be used. Corporate process agreed to identify best way of procuring supplies and services from external contractors 		DMT
	ETE						
6		Ability to maintain and manage ongoing projects	<ul style="list-style-type: none"> • Infrastructure may become dangerous to the public • Increase in cost due to issues with resources. 	MEDIUM	<ul style="list-style-type: none"> • Daily review meetings taking place and forward planning of limited external construction resources 		DMT
	ETE						
7		Keeping Elected Members informed of activities being undertaken in their electoral districts	<ul style="list-style-type: none"> • Loss of public confidence • Damage to Council reputation 	LOW	<ul style="list-style-type: none"> • All activities which require a site visit have been suspended unless essential 		DMT
	ETE						
8		Consultation with Trade Unions on changes in working practice and redeployment of workforce	<ul style="list-style-type: none"> • Trade Union relations disrupted • Assistance withdrawn from Trade Union members to undertake required duties 	LOW	<ul style="list-style-type: none"> • Regular meetings to be held with Trade Union representatives 	<ul style="list-style-type: none"> • Meeting programme to be formalised 	GP/AG
	ETE						
9		Costs due to disruption to normal working arrangements and emergency situation	<ul style="list-style-type: none"> • Ongoing costs of emergency and effect on budget situation 	MEDIUM	<ul style="list-style-type: none"> • Budget monitoring being undertaken - Covid 19 related costs being recorded separately 		DMT
	ETE						
10		Ability to source, purchase and distribute required PPE	<ul style="list-style-type: none"> • Unavailability and distribution of PPE for key workers in contact with the public 	MEDIUM	<ul style="list-style-type: none"> • PPE requirements have been fed into corporate process 	<ul style="list-style-type: none"> • Looking at whether different spec is acceptable for some ETE functions to prioritise certain PPE for health and care sectors 	EP
	ETE						
11		Ongoing affect of the continued closure of Household Waste Recycling Centres to the public	<ul style="list-style-type: none"> • Increase in fly tipping due to inability of householders to store waste • Cross contamination of waste streams • Public Health and Safety issues re contaminated waste products • Increased pressure from the public to reopen centres 	LOW	<ul style="list-style-type: none"> • Support for kerbside collections. Responded to Government guidance consultation. • Regular communication/liason with neighbouring councils 	<ul style="list-style-type: none"> • Possible use of skips to be discussed but not considered viable. Recovery Plan being developed ready for reopening. Exploring areas where Councils are able to offer consistent levels of service. 	CB
	ETE						
12		Failure of waste collection authorities to maintain normal kerbside waste collection services	<ul style="list-style-type: none"> • Cost of waste collections • Fly tipping • Excess levels of waste being stored. • Negative effect and public perception 	MEDIUM	<ul style="list-style-type: none"> • Support for kerbside collections 	<ul style="list-style-type: none"> • Use of ETE/DCC drivers to be investigated if required. • Offer to maintain vehicles if required. 	CB
	ETE						
13		Safe and sustained management of Countryside sites during lock down period	<ul style="list-style-type: none"> • Health and safety issue of work environment • Cross contamination from/to Public • Public perception and acceptance of closures 	MEDIUM	<ul style="list-style-type: none"> • Signage in place including electronic police signage • Concrete blocks and barriers installed at car parks to prevent access. • Staff closely monitoring activity on site • Staff using social distancing procedures 	<ul style="list-style-type: none"> • Continued monitoring of ongoing procedures and emerging guidance • W/C 20/04/2020 - Visitor centre staff administration staff have returned to regular front line operations in line with social distancing guidance. Project Officers and area staff and managers who can work from home continue to do so along with Tree Preservation Order Officer and Tree Inspectors who have been working on the highways network, customer enquiries and site visits throughout. Staff are still assisting food warehouse logistics as required (RT 27/4) 	RT
	ETE						
14		Provision of support to DHU for setting up and running Covid testing sites in Derbyshire	<ul style="list-style-type: none"> • Safe management of sites • safety of employees/volunteers at sites • Control of contamination 	MEDIUM		<ul style="list-style-type: none"> • Supporting DHU with setting up car park stewarding operation 	EP
	ETE						

15		Illegal closure of footpaths and PRow by landowners	<ul style="list-style-type: none"> • Need for staff to implement DEFRA guidance on posting alternative routes • Reduced availability for public to use footpaths for recreational purposes allowed during lock down period 	LOW	<ul style="list-style-type: none"> • PRow Assistants to investigate paths illegally closed by landowners and related to COVID19 • Signage being implemented at popular PRow's • No response to PRow reactive enquiries with exception of safety critical from 26/03/2020 		GP
16	ETE	Inability to safely conduct enforcement required due to Covid travel restrictions	<ul style="list-style-type: none"> • Loss of income • Long term effect on budget and service • Effect on Service providers and employees 	MEDIUM	<ul style="list-style-type: none"> • Government advice to be monitored 		GP
17	ETE	Loss of income and additional costs due to Covid 19 across all functions	<ul style="list-style-type: none"> • Impact on budgets 	HIGH	<ul style="list-style-type: none"> • Actual loss of income and costs being recorded and fed into corporate finance. Future likely loss of income and costs being predicted and fed into corporate finance. 		DMT
18	ETE	Ability to effectively respond both before, during and after a significant flooding event	<ul style="list-style-type: none"> • Restriction on site visits due to current lockdown measures • Reduced provision during an emergency response • Increase in Flood Risk to properties and infrastructure 	MEDIUM	<ul style="list-style-type: none"> • Prioritise and allocate resources based on need and risk • Continue to promote self-resilience for properties and business's 		CB
20	ETE	Viability of the public and commissioned transport sector in Derbyshire	<ul style="list-style-type: none"> • Viability of service due to lockdown and social distancing requirements • Requirement for PPE equipment • Significant reduction in income due to reduced numbers of patrons • Increased costs in service 	MEDIUM	<ul style="list-style-type: none"> • PPE requirements have been fed into corporate process • Government advice to be monitored • Regular communication/liaison with companies 		GP
21	ETE	Ability to meet increased demand and requirements of use of fleet vehicles	<ul style="list-style-type: none"> • Increase in fleet vehicles number required to meet social distancing arrangements • Increase hire costs • Increase in cleaning requirements and associated costs 	LOW	<ul style="list-style-type: none"> • Cleaning requirements have been shared with departments • COVID 19 budget cost centres established to monitor and capture associated costs • Regular communication/liaison with companies 		AG
1	CS	Behaviour Support An increased need for the service when children return to school. The current situation is likely to have a negative impact on SEMH needs of many children		LOW	Advice and support will continue by Skype, phone and email. Because lots of children not in school, service need is not the same at the moment.	In 3 months, we are anticipating a rise in need for the service due to children having had such an unsettled time - impacts SEMH needs and behaviour Collating a robust offer specifically in response to COVID-19 for schools	Helen Wallace
2	CS	Financial Assessments (SGO, CA & Adoption Orders) Reassessment completed annually based on start date, which will be delayed due to current manual process and could result in under/overpayment. - Risks of not maintaining payments to suppliers and to foster carers, SGOs, early years providers etc		LOW	EY providers paid for the whole of the summer term. Annual based assessments have now all been sent out either electronically or by mail and completed forms are now being received back.	Will continue to monitor the situation.	Sharon Elliott
3	CS	Financial hardship for families and young people For example care leavers if they lose their employment and there are difficulties/delays in claiming and receiving benefits, how would we make payments?		LOW	Emergency payment process has been agreed and is in place. Faster payments process has been established Reviewed and updated local offer	Reviewing financial entitlement guidance/documentation	Dave Bond

<p>4</p> <p>CS</p>	<p>Workforce - Redeployment Risk to being able to sustain delivery of critical services through lack of sufficient staff with appropriate skills, knowledge and training or ICT failure prevents staff from working effectively Particular risk is children's residential homes.</p> <p>Links to risk 40 on CS Main</p>	<p>MEDIUM</p>	<p>Close monitoring of workforce risks and mitigation plans particularly for priority services provides oversight by senior management, re-engagement and re-deployment strategies well advanced. Skills and Redeployment Survey set up for all members of staff to complete across the county, this information will feed into CS/Corporate resourcing hub. Workforce work stream set up & leads appointed to look at particular problem areas: social workers, residential, foster carers, agency placements for CIC, re-engagement of staff, recruitment etc. SMT have agreed a process to assist with the temporary redeployment of staff within CS to keep critical functions going and a new CS 'Resourcing Hub' has been created alongside a Corporate Hub which will carry out a similar role but between departments and across the multi-agency partnership.</p>	<p>Contingency pool for priority Service areas will be finalised by w/c 11th May.</p> <p>Workforce status monitoring form developed circulated weekly on a Monday to capture service oversight and risks. Chris Newton/Angela Beighton leads on CS resourcing Hub.</p> <p>The Workforce monitoring and Business Continuity plans present a relatively healthy picture for staff availability across the department, and the impact of Covid-19 on Key Services is well within manageable levels.</p>	<p>Chris Newton</p>
<p>5</p> <p>CS</p>	<p>Commissioning & Contracts Newly commissioned emotional health and wellbeing service for children in care and care leavers is unable to mobilise for 01/04/2020 start date due to covid19. This will reduce availability and access to therapeutic support for children in care and care leavers.</p>	<p>MEDIUM</p>	<ul style="list-style-type: none"> Contract extended with incumbent provider until 31 August 2020. Joint work with Derby and Derbyshire Clinical Commissioning Group (DDCCG) to increase mental health support through the future in mind offer. Supporting DDCCG in creating communications and website identifying all available mental health support services 	<ul style="list-style-type: none"> Ensure communications updated offer from future in mind providers is widely distributed amongst children's services staff to enable appropriate referrals for support. Continue to develop current commissioned services in supporting social carers with additional consultations for their children in care. Work with newly appointed provider to ensure they are mobilising for the new contract to commence on 01/09/2020 	<p>James Gracey</p>
<p>6</p> <p>CS</p>	<p>Children in Care Placements Insufficient number of placements within the independent sector. Both registered and unregulated accommodation providers may be unable to take new referrals for placements due to: <ul style="list-style-type: none"> Staffing shortages as staff are off sick due to covid19 Placements isolating due to current residents experiencing covid19 or displaying symptoms. Older children in care are unable to move on to independent accommodation due to restrictions causing blockages within the system. <p>The extra pressure for placements due to the above risks may result in an increase in temporary measures to meet demand, such as more utilisation of unregistered and unregulated provision and further reliance on in-house time out team to respond to emergencies.</p> </p>	<p>HIGH</p>	<ul style="list-style-type: none"> Regular liaison with providers on the D2N2 framework to ensure we have real time information on placements and risks within the system. All providers have completed and returned business continuity plans. Temporary increase in capacity through block contracting with an individual provider. Exploring opportunities with agencies that are able to provide appropriately qualified staffing in emergencies. Working collaboratively with regional commissioners across the east midlands local authorities to look at different opportunities to increase placement sufficiency and share good practice. 	<ul style="list-style-type: none"> Continue to work with the independent market to ensure they are getting the support they need from local authorities within the D2N2 region to meet capacity. Liaising with providers on a weekly basis within the unregulated accommodation market to ensure capacity is there to meet demand. Working closely with district councils to ensure positive move-ons for our older children in care that are able to transition to independent living, therefore creating space in Step Up accommodation, residential homes and foster carers. 	<p>James Gracey</p>

7	CS	<p>Payments to Providers Unnecessary payments to providers may still be being made despite no service being received</p>	LOW	<p>PPN 02/20 covers goods, services and works contracts being delivered in the UK. The PPN recommends that we ensure payments to suppliers continue until the end of June 2020 even if they are suffering from disruption to the goods, services and works they normally provide us. Despite these exceptional actions a supplier may still become insolvent. Risks to be managed on case by case basis with support from County Procurement and Legal Services.</p>	<p>Letters to suppliers</p>	<p>Chris Allcock / Karen Gurney</p>
8	CS	<p>Extremely Vulnerable Staff The welfare of extremely vulnerable staff needs to be assessed and appropriate arrangements need to be in place</p> <p>Also recorded on HR Risk Register</p>	MEDIUM	<p>Government guidance issued HR provided a list of vulnerable staff following the online survey, staff identified who fall into shielding/self isolating group and appropriate arrangements made to work from home where possible.</p>	<p>On an ongoing basis, CS managers need to maintain close contact with their vulnerable staff and signpost them to the available support mechanisms such as EAP as and when appropriate, as well as offering flexibility in the workplace to meet their individual medical needs as and when appropriate.</p>	<p>Catherine Parker</p>
9	CS	<p>FE Learners The department is not well sighted upon vulnerable students who cannot access their education - IMPACT TO BE DISCUSSED</p>	LOW	<p>Closer monitoring of the risk assessments coming in from colleges for our children and the department is chasing any colleges where there has been no contact. We now have keyworkers in place for all EHCP learners and are in weekly contact with college and parents.</p>		<p>Paula Williams</p>
10	CS	<p>PPE Risks to staff health and wellbeing which ultimately could result in death and litigation if we cannot source sufficient supply of PPE or guidance isn't followed.</p>	MEDIUM	<p>Ongoing collection of data on exact requirements of services/schools and monitoring of orders placed; reported to CS Silver and Gold Group and fed into corporate PPE group weekly. CS continue to closely liaise with PPE users and handle queries appropriately. 2 x per week representation at the corporate PPE task and finish group. Ordering processes are in place and available to all DCC staff via Our Derbyshire Website and through S4S and Schools Net for schools. Communications re updates to Our Derbyshire circulated to all employees. Modelling work completed to determine the PPE requirements across the department based on current guidance to support corporate procurement.</p>	<p>Continue to add PPE updates to the daily Head of Service communication. Continue to add to Gold and Silver agenda for discussion. Modelling work currently ongoing for schools to determine the PPE requirements. Special schools to risk assess individual PPE requirements. Testing of the communications and PPE knowledge to be undertaken and results fed back into management teams to be repeated w/c 18.5.2020. Continue to manage risks associated with fluctuations in PPE stocks and changes to official government guidance for example if lockdown procedures start to lift and guidance re PPE changes to all citizens.</p>	<p>Sharon Elliott</p>
11	CS	<p>Increased risk of data breach Due to the number of staff working from home, there is an increased risk of a data breach from staff's inability to lock down data; confidential telephone conversations being overheard; laptops being left open due to family distractions. Links to risk 13 on CS Main.</p>	MEDIUM	<p>Information Security Policy and Safe Haven guidance already in place.</p>	<p>25th March 2020 corporate guidance reissued 'Staying secure while working from home'.</p>	<p>Chris Newton</p>

12	<p>Psychological Impacts on children Increased risk of mental health problems? *School Closure, provision closure, increased pressures at home *Increased pressures on CAHMS *Increased number of emotional based school avoidance</p>
CS	
13	<p>Impact on the disruption to children in care education – unclear what the long term impact may be but likely that children will fall behind to some degree</p>
CS	
14	<p>Legal Challenge Risks of legal challenge if the council cannot deliver statutory responsibilities in a timely way, where these have not been specifically relaxed by government (e.g. SEND, statutory duty in relation to unsuitable Elected Home Education, pupils not engaging with Integrated Pathways Team.)</p>
CS	

MEDIUM	<ul style="list-style-type: none"> Documents which signpost to self-support (parents/ carers and school staff) http://services.derbyshire.gov.uk/Services/2667 Urgent Mental health Support Line for parents through Joined Up Care Derbyshire https://schoolsnet.derbyshire.gov.uk/site-elements/documents/administration/joined-up-care-derbyshire.pdf Mental Health First Aider support for school based staff From EPS subscriptions or purchases: <ul style="list-style-type: none"> o Consultations with EP o Training from EPS eg loss and bereavement, emotion coaching, resilience, attachment, understanding anxiety etc (from remaining subscription time or spot purchased) o Resilient classrooms model available through subscriptions o Behaviour Box available to purchase o HT reflective practice discussions and/ or solution circle other problem solving o Emotionally Based School Avoidance documents and training Cooth, Quell and building sound minds has been circulated to schools Health - additional phone and community support 	<p>From EPS</p> <ul style="list-style-type: none"> More tailored versions of the documents above re Covid-19 specific issues More tailored versions of the training above re Covid-19 specific issues Guidance for schools re-opening and need for emotional support before curriculum demands – use of research-based guidance from Northants and Wakefield, pending approval through Business Continuity Group Developing ACES project/ training work Trauma informed school attendance guidance Working party between EPS , EIS and VS to consider effect of toxic stress on CYP and actions to support transition back to school What else could be developed Video version of signposting to share information more easily 	Deborah Page
MEDIUM	<p>Increased funding made available for Pupil Premium Plus laptop scheme Continued liaison with education settings and social care to ensure help is being received where required Training offered to schools</p>	<p>Planned work with schools once reopened to target PPP to facilitate accelerated learning</p>	Helen Moxon
MEDIUM	<p>Timeliness is continuing to improve for assessment. New guidance allows covid-19 to be used as an exception in the process so challenge should reduce.</p>		Paula Williams

<p>15</p> <p>CS</p>	<p>Increased risk of harm to vulnerable children Through not being in school, difficulties of achieving face to face visits, reduction in contacts to Starting Point by professionals, increased challenges around multi-agency working, increased risk of domestic violence, reduced services from health etc.</p>	<p>HIGH</p>	<p>Tier 4 step down supported through current social worker and community arrangements</p> <p>Complex cases for childrens previously monthly meeting (reviewing to case by case) Audit of referrals at Starting Point to ensure appropriate decision making is in place and remains robust.</p> <p>DDSCB group and regional work to track demand and provide challenge on DCC trends and responses</p> <p>Work with SEND / schools re: risk assessments for children</p> <p>Social care risk assessment - covid 19 from in Mosaic to provide oversight of agreed visiting requirements for children</p> <p>New case not titles introduced to support tracking of visits to children during national lockdown.</p> <p>New MI reporting in place for visits and risk assessments which includes breakdown of face to face and virtual visits.</p>	<p>Potential new safeguarding cell group being set up to identify individuals</p> <p>Raise awareness of this risk group in CCG meeting and across areas</p> <p>Complex cases for childrens to be taken on a case by case basis, agreement being arranged 07/04</p> <p>Risk shared with all partners - DDSCB QA group leading on risk assessment and management plan across all partners</p> <p>Pregnant individuals - individuals identified to be shared with JM by (JG & GN)</p>	<p>Pete Lambert</p>
<p>16</p> <p>CS</p>	<p>Increase in demand for services Potential spikes in demand/need later in the year as issues are not being identified and referred now.</p>	<p>MEDIUM</p>	<p>Oversight in place by leadership team Contact and referral information is reviewed locally and regionally. There is a some increase volumes as lockdown continues</p>	<p>Small working group to be formed to look at this.</p> <p>Ali Noble is linked with task and finish group along with Derby city and Steve Atkinson to monitor and plan</p>	<p>Pete Lambert</p>
<p>17</p> <p>CS</p>	<p>EHCPs Risk of impact/delay on EHCPs and potential for Judicial Reviews. SEND timelines have not been changed - risk to EHCP process. *No current relaxation of SEND timescales, plans and EHCP. *Service will still maintain urgent referrals TBC *GRIP / EHCP risk *Legal action if timescales not maintained *Clarity required of messages that may go out to parents from Royal Derby etc directly rather than through central comms</p>	<p>HIGH</p>	<p>NS investigating update form service the impact of service reduction and mitigations from health Mitigating against the risk by creating a system to address the new requirements from the DFE and communicating out the legal changes to all stakeholders (schools, colleges, parents etc).</p>	<p>Neuro-developmental pathway reported to be closed to new referrals. Due to reacting to Covid 19. Has not been agreed by CCG. IF following up with CCG. Dialogue with DfE</p> <p>Jayne H and SEND leads for DCC and CITY in dialogue to ensure shared Communications</p> <p>NS CCG - assessing update of service position</p> <p>IF GN DG - Comms Mitigating against the risk by creating a system to address the new requirements from the DFE and communicating out the legal changes to all stakeholders (schools, colleges, parents etc). Out by the end of week commencing 4th May 2020.</p>	<p>Paula Williams</p>
<p>18</p> <p>CS</p>	<p>Independent Schools closing Onus on LAs to pick up shortfall in provision. Resulting in judicial reviews. Potential JRs from lack of change to SEND guidance and weak guidance to Ind Schools.</p>	<p>HIGH</p>	<p>To find out if they are open or closed and to get the details of the risk assessments they have done for our children with EHCPs. Also in weekly contact with parents of any children at home.</p>	<p>JP and IP to consider further what action can take, continue to lobby DfE. IP will email DfE re current JRs and our legal position, cc in LGA.</p>	<p>Paula Williams</p>

19	CS	Risk to inspection activity and negative impact of delays on our quality improvement/transformation programmes. Links to risk number 20 on CS Main.	MEDIUM	Agreed a shared Comms to ensure clarity across the area and support parents - All inspection activity is currently suspended, except where there are significant safeguarding issues - Quality assurance work is continuing, albeit with a different focus/format - All statutory requirements and government guidance being complied with	Review and recovery plan to be prepared to reinstate quality improvement, L&D and inspection readiness work Seek to influence Ofsted's plans and timing of future inspection activity via national and regional forums	David Cohen
20	CS	Risk to Budget Savings Other services may not be able to continue due to staff shortages or not being able to contact service users. E.g. Pause programme. Links to risk number 1 on CS Main	HIGH			Chris Allcock / Karen Gurney
21	CS	Disabled children - capacity in system *Potential crisis due to service, provision or school closure *Support required within different community location *Service capacity to deliver within community rather than centrally (School) *Risk of crisis *Risk of unidentified dropping into crisis	MEDIUM		Co-ordinating a list of contingencies from CCG, key link between GOLD, SILVER and CCG, utilise CCG meeting to communicate risks	Di McKenna
22	CS	Zoom DACEs Deployment of the Zoom online Video conference solution across the DACEs Service	LOW	DACES have implemented revised and adapted risk based protocols for staff using Zoom; aligned to DfE online safe learner guidance and informed by S4S documentation.	DPIA was completed by Tim baker on 21.04.2020. CS SMT approved report, passed to Martin Fox and gained IGG approval. IT services have commenced deployment to the agreed staff devices. Once DCC IT services can enable MS Teams to accommodate learner engagement; then Zoom will be disabled; anticipated by 1 September 2020	Mark homer
23	CS	WhatsApp Use of the WhatsApp Smartphone Application for Video and Audio calls.	LOW	Controls in place to ensure that the set-up preventing 'Sharing of Contacts' failed. Data breach raised accordingly and mitigations put in place. Guidance issued to all staff on appropriate use of the app. and safeguarding risks.	Further guidance and reminders planned for all users and investigations into controls to repress contact details is ongoing.	Chris Newton
24	CS	Loss of income for Traded Services All Traded Services will be finding that income is reducing due to falling sales. Some traded services have had to close temporarily so income will be nil during the lockdown period and many costs will still be occurring such as staffing costs. Total turnover annually is around £65 million so this is a medium to high risk but purely on the basis of cost.	MEDIUM	All Traded Services have been asked to estimate the loss of income for the period 1st April to 30th June as well as any additional costs being incurred and this is being monitored by CCP Finance colleagues. Some guidance has been given around keeping costs down as well as how to manage external contracts during the same period.	More guidance is needed around management of the loss of income. More guidance is needed about how to reduce costs in traded services. Both of these have been referred to Finance Colleagues to produce and share. For Services for Schools only - A phased return for schools will mitigate some of the losses if services can be delivered within the governments COVID-19 secure guidelines.	Angela Beighton
25	CS	Schools not paying for Services for Schools purchased Whilst most schools had purchased a number of Council Services prior to school closures, many of those services are not currently being delivered or are only partly being delivered and therefore these purchases might not go ahead. Whilst schools have had confirmation from central government that they should pay their suppliers in full, the guidance does not appear to apply to the public sector.	MEDIUM	All Traded Services have been asked to estimate the loss of income for the period 1st April to 30th June as well as any additional costs being incurred and this is being monitored by CCP Finance colleagues. Some guidance has been given around keeping costs down as well as how to manage external contracts during the same period.	More guidance is needed around management of the loss of income. More guidance is needed about how to reduce costs in traded services. The Council needs to determine its position with its schools and academies around payment of suppliers. A phased return for schools will mitigate some of the losses if services can be delivered within the governments COVID-19 secure guidelines.	Angela Beighton

26	CS	Spontaneous UASC arrivals Reduction in capacity of children in care placements. Whilst this would be a challenge, we are confident that the market would provide options. UASC young people tend to be popular placements and Derbyshire's ask team is highly regarded.	MEDIUM	Alert CPT if under 18 and approach semi-independent providers if over 16	Alert CPT, sharing internal knowledge of potential IFA providers availability. Ensure Named Safeguarding nurse gives Covid19 advice.	James Hollingworth
27	CS	Children in Care Placements & Workforce Capacity Insufficient number of in house placements coupled with increased placement breakdowns and reduction in workforce by 30%. Potential reputational damage associated with lack of registered/regulated placements and increased financial burden resulting from recruitment of extra staff and carers.	MEDIUM	Workforce work stream set up & leads appointed to look at particular problem areas: social workers, residential, foster carers, agency placements for CIC, re-engagement of staff, recruitment etc Recruitment progressing for 12 new relief RCWs and 3 relief FRWs. Recruitment of foster carers. Covid testing for RCWs commenced with positive effect. Support to foster placements by encouraging school attendance to regain some normality and routine for vulnerable children. Offer of covid testing of foster carers now commenced.	Recruitment for relief RCWs continues. Re-engagement of former employees underway – one so far + a secondment back of ex-employee. Redeployment of existing staff to be progressed now screening questionnaire and checks with line manager being undertaken by HQ based staff prior to sending details to home managers. Recruitment of foster carers continues including planned use of new flexibilities, some agreed via ODR by Jane P on 9.4.20 and others being considered compliant with new legislation. Reengagement for former foster carers. Covid testing of foster carers to commence 30.4.2020	Mary Wilton
28	CS	Forward plan of procurement. Due to covid19 some elements of the forward plan of procurement need to be rescheduled to allow sufficient time to engage the market and ensure providers are in a position to engage fully with the process and submit appropriate tenders. Covid19 has already resulted in one procurement exercise not having any tender submissions.	LOW	<ul style="list-style-type: none"> Seeking legal advice to extend existing contracts/frameworks as necessary. Working with existing providers to ensure they can continue to deliver a service while new timescales are produced. 	<ul style="list-style-type: none"> Extend current contracts in line with advice from legal services. Comms with providers ensuring they are fully aware of the new procurement timetables. Market engagement with providers to ensure they are in a position to tender for opportunities once they are back to business as usual. Forward plan of procurement to reflect new timescales for projects. 	James Gracey
29	CS	Workforce Capacity - Re-engagement (of former staff) Contingency planning for priority 1 services.	MEDIUM	Workforce work stream set up & leads appointed to look at priority areas: social workers, residential, leaving care workers. Areas for development and re-engagement of staff, redeployment and recruitment etc. Re-engagement: Former staff who left during 2019/20 have been assessed as to suitability to support critical roles. These have been passed to Work stream Managers to determine if can be appointed on a relief basis. Former relief staff and current self employed staff are still under review as part of CMT reports. The process for re-engaging staff has not been without issue but on the whole is now delivering what was expected.	Re-engagement: Further work needs to be done to ensure there is a continuing matching process and that we don't lose sight of willing workers if not currently needed but might be in the future. Following CMT's decision regarding relief and self employed staff a decision needs to be taken about seeking to re-engage these into relief roles supporting critical areas. The additional cost of bringing former staff back into relief contracts needs to be captured as these are additional to the current establishment for services. This additional cost presents a risk for the Council and without a cap on this should be rated as medium.	Angela Beighton
	CS					

30	Workforce - HR Processes and procedures, recruitment, redeployment etc impacted by Covid and the complications and implications of progressing in a timely and supportive manner with potential impact on budgets. Also recorded on HR Risk Register and Pete Buckley and Jayne Mason are risk owners.	LOW	Managers to maintain regular contact/maintain good relationships with employees in processes and review ways of working to incorporate Skype, conference calls etc. and maintain good working relationships. Constant review of how the work can be delivered in a timely way	Corporate steer required - HR processes eg disciplinary, grievance, attendance, capability – as a department do we know what the impact of Covid is on these processes and how many will experience a delay and do we have an understanding of what the impact of the delay will be on the employee and the department?	Catherine Parker
31	Leaving Care Accommodation challenge There are strains on accommodation options as there are fewer vacancies in Framework/Adullam and Housing departments focusing on emergency need rather than planned moves which reduce housing options for our 18 year plus olds. Thus, there will be a need to extend expensive previous commissioned children in care placements post 18. There are also very limited emergency post 18 options currently.	HIGH	Spreadsheet of young people under and over 18 in spot purchased unregulated accommodation so in line of sight. Aim to negotiate costs with providers. Consultations have been held with other Local Authority partners in the East midlands – this a cross region/national challenge.	Paper to be produced for SMT regarding potential to rent flats direct from Chesterfield Borough Council. Continue to have dialogue with Housing departments regarding facilitating some moves	James Hollingworth
32	Data Collection Survey re Vulnerable Children. Potential to be identified by DfE as a LA with concerns. Questions are not clear / open to wide interpretation and concern is that the LA Dashboard that this will populate may incorrectly identify concerns. Reputational impact, concerns from service users, unwarranted intervention.	HIGH		JP raising at REACT meetings, LD will follow up with Performance Leads regionally and LD/TK re what we can provide. IP will arrange follow up letter to schools to complete data return where missing. IP will discuss with PW re how track EHCP concerns. LD,PW,AN,TK meeting re escalation process if RED rated.	SMT
33	DfE Digital devices for disadvantaged groups, Children with Social workers 0-19, care leavers, Yr 10. Potentially 2322 Laptops and 347 4G devices owned by Derbyshire and loaned to target groups. Asset risk, risk of dependency on support for devices, costs of distribution and potential long term support.	MEDIUM	Programme plan working through risks with mitigations in place. Working groups across ICT, Legal, teaching & learning, Safeguarding, Audit, management information. Linkage made to current similar schemes supporting vulnerable groups CIC, fostering, care leavers. Regional group in place to enable consistency of mitigations.		Rob Hayward
34	Pregnant individuals - individuals identified to be shared with JM by (JG & GN) Separated from risk 15 - Adele to review	LOW	Separated from existing risk number 15 - to be reviewed by Adele		Adele Glover