

Supplement to the agenda for

Audit and Governance Committee

Tuesday 26 March 2024

2.00 pm

Conference Room 1, Herefordshire Council Offices, Plough Lane, Hereford, HR4 0LE

Pages

8. MANAGING RISK ACROSS THE COUNCIL

3 - 26



Title of report: Managing risk across the council

Meeting: Audit and Governance Committee

Meeting date: 26 March 2024

Report by: Director of Public Health

Classification

Decision type

This is not an executive decision

Wards affected

ΑII

Purpose:

To consider the report outlining how the council currently manages risk and note any opportunities for improvement

Recommendation(s)

1. The committee determine any recommendations it wishes to ensure effective risk management.

Alternative options

2. The committee could choose not to consider the report, however this is not recommended as managing risk is an important function of council operations

Key considerations

- 3. In accordance with the council's Performance Management Framework (PMF) and associated Risk Management Plan, it is the committee's role to ensure that risk management is effectively managed and in line with the processes set out in the PMF.
- 4. Herefordshire Council, like all organisations, faces a wide range of risks. Managing strategic risks is crucial for ensuring the delivery of essential services and achieving long-term goals. The Council recognises that there are risks in everything it does and has a duty to manage these risks in a balanced, structured and cost effective way.
- 5. Risk Management identifies, evaluates, controls and monitors at regular intervals the council's risk. It is about managing resources wisely, evaluating courses of action to support decision-making and protect the council from harm.
- 6. The Council currently have a <u>risk management policy</u> which was adopted in 2020 and sets out the governance framework at the Council detailing roles and responsibilities from the executive level, through to specific staff and individuals throughout the Council.
- 7. The council currently follows a number of steps around risk management including the identification of risk, addressing risk and monitoring and reviewing risk.
- 8. Appendix 1 provides an overview of the councils current approach to risk management and opportunities for improvement.
- 9. Appendix 2 outlines the corporate risk register at the end of quarter 3

Community Impact

10. Effective risk management is essential to the delivery of the priorities set out in the County Plan.

Environmental Impact

11. Risk management is essential to the delivery of the council's environmental policy commitments.

Equality duty

- 12. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:
- 13. A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) Facilitate good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 14. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

Resource implications

15. There are no resource implications arising from this report, however effective risk management should increase the likelihood of the council delivering its budget.

Legal implications

16. There are no legal implications arising directly from this report.

Risk management

17. N/A

Consultees

Lee Washbrook (Interim Head of Performance), Lisa Evans (Director Transformation, PMO and Corporate Support)

Appendices

Appendix 1 – Summary of councils approach to risk management

Appendix 2 – Corporate risk register (Quarter 3)

Herefordshire Council's approach to Risk Management

1.0 Purpose of the paper

Herefordshire Council, like all organisations, faces a wide range of risks. Managing strategic risks is crucial for ensuring the delivery of essential services and achieving long-term goals. The Council recognises that there are risks in everything it does and has a duty to manage these risks in a balanced, structured and cost effective way.

A report to the Audit and Governance Committee in <u>March 2023</u> provided a review of the council's approach to risk management and detailed a number of areas for improvement. The purpose of this report is twofold:

- 1) To provide a high level overview of how the council currently manages risk across the council
- 2) An update of progress against the recommendations detailed in the March 2023 report.

2.0 Background / Context

The Council currently have a <u>risk management policy</u> which was adopted in 2020 and sets out the governance framework at the Council detailing roles and responsibilities from the executive level, through to specific staff and individuals throughout the Council. The overall aim of the policy is to embed the culture of risk management throughout the Council both at a corporate level and within operational/service delivery arrangements.

Embedding risk management throughout the Council is not just about legal requirements. Effective risk management will lead to:

- experiencing fewer shocks and unwelcome surprises allowing greater focus on planned activity;
- more efficient use of our resources;
- improved business planning due to awareness of uncertain events and integrated planning of risk mitigation
- better, more informed decision-making

3.0 What is risk management?

Risk is the uncertainty that surrounds future events and outcomes. This uncertainty can be a positive opportunity or a negative threat. Risk is therefore defined as "the chance of something happening that will have an impact (positive or negative) on the achievement of the Council's outcomes". It is measured in terms of the likelihood of an incident/event occurring and the impact if it does.

Risk management is about the identification, analysis and control of the threats or opportunities that affect the achievement or execution of the Council's strategic and operational objectives. It is also the successful management of the control environment in which the decision making

process is undertaken, such that positive risks are taken in order to innovate and improve service provision.

4.0 Herefordshire's Risk Management Approach

The Council's risk management approach is designed to ensure that new and emerging risks are identified promptly and assessed realistically and effective mitigating action is taken to manage identified risks. The risk management process forms part of the council's Performance Management Framework and co-ordinated through the Council's Performance Team.

Risk management is not just about eliminating risk but about dealing with and reducing the circumstances in terms of its impact and probability (likelihood). A critical success factor in embedding a risk management culture is the commitment of Members, Directors and Heads of Service.

Risks are managed every day as part of normal business activity and the following section details the council's current approach to risk management. This paper has been informed by the councils risk management policy and officers from across the council.

3.1 Identifying the risk

As part of business planning processes, services across the council are required to self-assess their services. This involves considering the risks of delivery and the circumstances which have either, or might impact delivery and performance.

The mechanism used to undertake this may vary within each service, but might include a SWOT (Strengths, Weakness, Opportunities and Threats) analysis, or PESTLE (Political, Economic, Sociological, Technological, Legal and Environmental) analysis. Through this method, services identify risks that may impact the council objectives, either at delivery and or county plan level. Risks are also often identified as a result of audit activity, decision reports, or through our Programme Management Office (PMO) who have oversight of key projects across the council.

3.2 Assessment of Risk

Once services have identified risks, risks are assessed to help determine how much attention is given to it. The council uses a 5 x 5 point scale to multiply the likelihood of the risk occurring and impact of the risk to the council which produces an inherent risk score. This is the risk score should no controls be applied - effectively the worst case scenario. Tables 1 and 2 summarise how the impact and likelihood risks are assessed by the council.

Score	Likelihood	Description
1	Rare	It is unlikely that the event will occur
2	Possible	It is likely that this event will occur
3	Likely	There is a fair chance (50:50) that this event will occur
4	Almost certain	The event will almost surely occur
5	Certain	The event has occurred or will definitely occur

Table 1. Table showing different risk likelihood score around how likely a risk may occur

Score	Impact	Description
1	Negligible	Day to day operational problems that can be dealt with
2	Minor	Budgetary issues that can be resolved within Service in accordance with the finance procedure rules {link} Manageable disruption to services Noticeable internal impact, but the Service would remain on course to achieve priorities for the year Localised reputational damage
3	Significant	Significant loss, delay or interruption to services Disruption to one critical Council Service for more than 48hrs Non-delivery of corporate and service plan objectives during a quarter Significant stakeholder concern Attracting short term media attention and potential for litigation/ prosecution from legislative or regulatory bodies Long term regional damage to reputation Budgetary issues that can be resolved at Directorate level in accordance with financial procedure rules [link] Serious Injury to employees or those in the Council's care Significant complaints
4	Major	Widespread medium to long term impact on operational efficiency, performance and reputation. Major disruption to Council's critical services for more than 48hrs (e.g. major ICT failure) Breach of legal or contractual obligation attracting medium-term attention of legislative or regulatory bodies. Adverse coverage in National Press/Front page news locally Budgetary issues that can only be resolved by Section 151 Officer / Chief Executive / Members in accordance with the finance procedure rules {link} Serious Injury to employees or those in the Council's care
5	Critical	Potential to threaten the existence of a service/s Budgetary issues that cannot be resolved Death of employees or those in the Council's care Inability to function effectively, Council-wide Service delivery has to be taken over by Central Government

Table 2. Table showing risk for score for overall impact and implications arising from these scores

Risks tend to fall in to one of the following categories, which are used to guide officers in assessing the implications of risks that might impact on their service;

- Delivery and operational
- Compliance

- Financial
- Environment
- Reputation
- Health & Safety
- Risk to vulnerable people

Detailed in appendix 1 is a list of risk categories and scoring criteria against them.

The likelihood and impact scores are multiplied to give a risk score as shown in the grid below.



Figure 1. Example of PMO Portfolio Dashboard

For projects overseen by the PMO, the project, project manager & project team review the risks and quantify how big the risks are and how they can be controlled. Sometimes this might involve a risk workshop to identify more details about the risks, likelihood of risk occurring and mitigations. As part of this the project team:

- Review list of risks already identified & recorded on the risk log
- Are there any new risks?
- Can any be removed?
- Assign an owner for each risk
- Assign type/category of the risk
- Identify controls/mitigation
- Agree how likely risk will happen & impact of risk if it was to occur
- Using council risk matrix assign risk score

All project risks are managed throughout the project on the 'Risk Log' within council's project management system (Verto).

3.3 Addressing risk

In most instances, the council has some controls in place to help reduce the likelihood or impact of a risk, which are documented in the controls section of the risk register. Given the existing controls in place, the risk is scored again to provide a residual risk score. This residual score is used to determine how the risk should be escalated and reviewed. The score will also give an indication of what needs to happen to address the risk.

The service/directorate take one of the following approaches to identified risks;

• **Reduce**: Steps that are required to reduce either the likelihood or the impact, or both, to contain the risk to acceptable levels, e.g. mitigating action, contingency planning and more.

This might also include transferring the risk; examples include additional insurance, or outsourcing services.

Accept: An informed decision to accept the likelihood and impact of a particular risk without
additional controls but subject to monitoring of the impact and likelihood to see if requires
different management. This will ordinarily be the option where there is little in the council's
control which will have an impact on the risk scores, or where the cost (financial or staff
resource) would be prohibitive.

Planned additional action to address the risk are also referenced within the mitigating activity column of the risk register, with key dates identified.

Risk Appetite

The council recognises that there will always be risks to delivering our services, however sometimes these reach a threshold and something must be done to mitigate the ongoing exposure to the risk. In determining whether the council needs to do something to manage the risk the residual score will give an indication as to what should happen.

3.4 Monitor and Review

Once risks and existing controls have been identified, with additional action plans put in place to manage and mitigate them as required, it is essential to routinely monitor their status on the risk register.

Directorates review their risk registers regularly to ensure that the content is accurate and risks are being managed appropriately. This is normally undertaken with support from the Performance Team. In reviewing the risk, services ensure that the residual risk score remains up to date, planned activities are refreshed to ensure completed actions are moved in to the controls column and any new future mitigating activities are included.

The Performance Team will also review and moderate Directorate Risk Registers, with a view to ensuring that scores have been applied consistently across the council and to verify or challenge directorates on escalation of risks to the Corporate Risk Register. Risk are considered each month by Directors and included in the monthly performance reports that go to the Corporate Leadership Team.

Projects managed by the PMO involve monthly project board meetings where the risks are reviewed and managed. The project manager ahead of the project board will review the risk log and identify any risks that may need to be highlighted to the project board or escalated to the next level for advice or assistance.

Within the PMO project portfolio dashboard reporting, there is a section that provides details of Risks and Issues. The dashboard is live reporting and covers the PMO portfolio of projects. It illustrates how projects are rag rated within the risk matrix and also provides details of the split of projects across each of the defined categories (see figure 1).

3.5 Reporting Risks

The council operates three tiers of risk registers in relation to its business as usual activities; a corporate risk register, directorate risk register and service risk register. In addition, the council also maintains project and programme risk registers to record risks in relation to projects.

Risks move between registers in order to allow effective management and visibility of risk. The council uses one set of scores to evaluate risks in service, directorate and corporate risk registers.

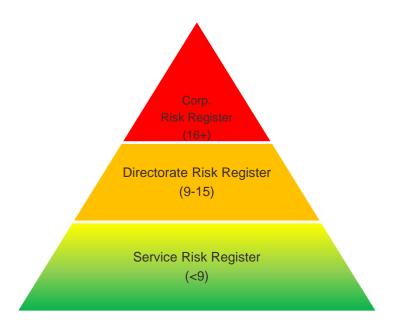


Figure 2. Diagram illustrating how different risks

Service Risk Registers - > Directorate Risk Registers - > Corporate Risk Registers

Heads of Service are required to ensure that risks from their service level registers which score over 9 are escalated to the directorate risk register because there is a fair chance significant impact will occur. Risks from at service levels which score over 16 are escalated to the corporate risk register because there is a fair chance major impact will occur.

Risks can be de-escalated from the corporate and directorate risk register but will remain in the service risk register until such time as the Head of Service accepts the risk and the risk is moved to the accepted risk list for the service. De-escalation is consistent with the triggers above, scores dropping below 16 will step down from the corporate risk register to directorate risk registers, and will drop to service risk registers as they drop below 9.

Risk Score	Colour	Register Level
> 16	Red	Corporate Risk Register
9 – 25	Amber	Directorate Risk Register
0 – 25	Yellow & Green	Service Risk Register

Table 3. Escalation and de-escalation thresholds across tiers

Whilst some risks will be ever-present, as work is done to mitigate risks some risks will reach a

point where they no longer need to be reported. Heads of Service accept these risks by moving them into the list of accepted risks in the risk register.

Corporate Risk Register	This register flows out from the directorates risk registers and is owned by Corporate Leadership Team. These risks are reviewed by the Performance Team monthly and by the Corporate Leadership via monthly performance reports Risks which are escalated here are with a risk score of 16 or greater.
Directorate risk register	This register flows out from the Service risk registers and is owned by the Directorate Management Teams (DMTs). These risk registers are challenged by the Performance Team on a quarterly basis to ensure consistent application of the risk plan and scoring criteria. Risks which are escalated here are those with a risk score of 9 or above. Any corporate risks owned by the directorate are kept in the directorate risk register, to ensure the visibility.
Service risk register	This register flows out from the Service area/Team (risk registers) and is regularly reviewed at Service Team Meetings (STs). This is the master risk register and controls the escalation and closure of all risks in the service areas. All relevant service risks are kept in this document as the master copy for services, which are then referenced in either directorate or corporate risk registers.
Programme and Project risk registers	Where it is considered appropriate, major partnerships, programmes and projects will produce and maintain their own risk registers. Risk to the programme/project should be recorded within Verto and managed through the corporate project framework. Risks will be assessed at programme level and will be escalated on to the Corporate Centre Risk Register, should it score 9 or more in the scoring criteria below. This is the responsibility of programme managers

Table 4. Summary of the attributes of each tier of the risk register.

4.0 Roles and Responsibilities

Risk management should be an intrinsic part of corporate governance. For this to be effective it is vital that everybody within the council understands the role they play in effective management of risk. The table below summarises the different roles across the council.

Tier	Responsibility and reporting framework
Audit and Governance Committee	Responsible for ensuring that the council's risk management process is carried out effectively. It is not a function of the committee to examine specific risks in detail, but satisfy itself that risk management in the council is operating effectively. Should the committee have a concern about the scoring or detail of the risk, it might refer back to officers attending the committee, or scrutiny.

Onlyings	Occupant vials proportion and the second of
Cabinet	Oversee risk management as part of the quarterly performance monitoring on the Budget & Performance Report. Cabinet might be required to drive active steps to manage certain risks, particularly risks to strategic objectives, through decision making. Individual Cabinet members should also regularly review risks within their portfolio as part of Cabinet Member Briefings
Corporate Leadership Team	Own the council's Corporate Risk Register. Monitor and review risks on the corporate risk register ensuring adequate response. As part of this review, Management Board should challenge one another in their delivery of activity which effectively mitigates identified risks.
Internal Audit	Responsible for considering the risk registers when proposing the annual plan.
Performance Team	Assess risks for inclusion on corporate risk register when escalated from Directorates.
	Consider risks which appear high on directorate risk registers which have not been escalated to the corporate risk register. This will typically be done by challenging the application of scoring on directorate risk registers to ensure comparability across the council.
	Consider any risks identified in internal and or external audit reports and challenge directorates on their inclusion.
	Undertake an annual review of national risks, considering local implications of emerging national risks.
Solicitor to the council	Responsible for promoting the consistent use of risk management, developing the risk management plan and facilitation of the council's corporate risk register.
	Will review the Risk Management Plan annually in order to ensure effective management.
Directors	Accountable for effective risk management within their directorate, escalating risks to the corporate register as appropriate. This requires directors to ensure that staff are continually identifying emerging risks, monitoring and reviewing their risks in line with guidance. In addition, it is necessary that directors ensure that risks which are an unacceptable levels are managed to reduce the risk/impact to the council, and that these risks are an integral part of business planning processes.
	Responsible for providing cabinet members of the oversight of significant risks within their portfolios.
Heads of Service	Accountable for effective risk management within their service, escalating risks to the directorate register as appropriate. This requires them to ensure that staff are continually identifying emerging risks and monitoring and reviewing their risks in line with guidance. In addition, it is necessary that they ensure risks that have been managed can be accepted and transferred to the accepted risks section of the register.
Risk Owners	Risk owners are responsible for recording risks, updating risks, managing actions and ensuring that risk registers are up to date.

Performance Leads	Will support directorates to update risk registers and provide advice and support with their completion. However, directorate & service risk registers remain the responsibility of operational staff not performance leads.
	Performance Leads will provide challenge to directorates on their risk recording and support directors to embed risk within their directorates.
All Staff	Responsibility to be risk aware; to assess and manage risk effectively in their job and report potential hazards or risks to their managers, work to mitigate risks and to work within the appropriate risk management guidelines.

Table 5. Roles and responsibilities for risk across the council

5.0 Areas for Improvement

Whilst there have been a number of organisational challenges and organisational changes, the council recognises the need to further improve our approach to risk management. The table below summarises the areas that have previsouly been identified for improvement and progress to date:

Area for improvement	Progress
There is a need for more consistency in the use of the scoring matrix	The performance team and PMO regularly meet with Heads of Service/Service Directors to review risks and assess any need for escalation/de-escalation. However, further training across the council would facilitate a more consistent approach.
Some risks stay on the register for a long time.	As above, the performance team and PMO office regularly meet with Heads of Service/Service Directors to discuss risks. It is recognised that some risks are strategic risks and are therefore likely to be more 'static' than operational risks. However, these are not sufficiently captured and further work is needed to capture these.
There needs to be more robust identification of action to mitigate risk. Actions need to be smarter.	Work is ongoing to support staff across the council to provide sufficient detail within the risk registers. Support is provided by the PMO and the Performance Team. Further training for staff is currently being explored.
There is a lack of clarity in use of terminology between strategic and corporate risks	This still needs to be addressed and options are currently being scoped to ensure a systematic approach to strategic and corporate risks.
There is evidence of confusion about the difference between strategic and corporate risks.	The corporate lead for risk management is now the Director of Public Health who also sits on the Local Resilience Forum (LRF). This will enable alignment with national and regional risk registers.
More could be done to aggregate similar risks within or across	It is anticipated that this should form part of the strategic risk register. A review of the performance team is currently underway which will facilitated

Directorates, for example, risks related to recruitment and retention.	more 'cross directorate working' with the role of the corporate leadership team to have further oversight and identification of synergies between risks
The risk management plan will be revised to reflect the strengthened, more proactive role to be taken by CLT in managing strategic risks.	The corporate leadership team have recently agreed a new timetable for meetings that will allow for greater focus and attention on strategic issues, such as the risk register. This will be in addition to the continuation of monthly performance reports which includes directorate risks
CLT will set the organisational risk strategy in relation to the council's transformation programme, Thrive.	Work continues around the Council's 'future operating model' and how we can be more efficient and effective in the delivery of support services, which is part of the Thrive Transformation
Adopting a strategic approach to risk management to make better informed decisions will be crucial for successful transformational change	Programme. Performance and risk management will be a key component of the new model
Commission training	Options for training for risk management are currently being scoped

Table 6. Areas for improvement and progress

Appendix 1 – Risk Categories and Impact Scoring

	1	2	3	4	5
	Insignificant	Minor	Moderate	Major	Significant
Delivery and operational	Day to day operational problems	Manageable disruption to the service	Disruption to one critical Council Service for more than 48hrs	Major disruption to Council's critical services for more than 48hrs (e.g. major ICT failure)	Potential to threaten the existence of a service/s
Compliance	Concern raised	Warning received	Breach	Enforcement Action	Prosecution
	Complaint received		Improvement Notice	Breach of legal or contractual obligation attracting medium-term attention of legislative or regulatory bodies	Service delivery has to be taken over by Central Government
Financial as per the finance procedure rules	Up to £100,000 – within a directorate	Up to £100,000 – across directorates	Between £100,001 & £250,000 – within a directorate Between £100,001 & £250,000 – across directorates	Between £250,001 & £500,000 – within a directorate Over £250,001 – across directorates	Over £500,001 – within a directorate
Environment (incl. consideration of - Biodiversity - Carbon emissions - Waste & pollution - Air Quality	Minimal impact on waste/pollution levels/carbon emissions requiring no/minimal intervention	Minor impact on waste/pollution levels/carbon emissions requiring minor intervention	Moderate impact on waste/pollution levels/carbon emissions requiring intervention	Increase in pollutant/carbon emissions/waste from service delivery requiring additional offsetting and mitigation measures	Significant increase in pollutant/waste/carbon emission levels which compromise the Council's ability to deliver carbon neutrality and biodiversity net gain.

					Significant loss to protected sites, species and loss of life.
Reputation	Short term local media attention	Sustained local media attention	Front page news locally	Adverse coverage in National Press	Potential public interest report, third party intervention
Health & Safety	Minimal injury requiring no/minimal intervention	Minor injury or illness, requiring minor intervention	Moderate injury requiring professional intervention. RIDDOR/ agency reportable incident.	Major injury leading to long-term incapacity/ disability	Incident leading to death, multiple permanent injuries or irreversible health effects Death of employees
Risk to vulnerable people	Minimal impact on individuals in the authorities care	Minor impact on individuals in the authorities care requiring minor intervention	An event which impacts on a small number of individuals in the authorities care	Serious impact to individuals in the authorities care Mis-management of care with long term effects Breach of human rights	Death to individuals in the authorities care



Appendix 2 – Corporate Risk Register (end of Quarter 3)

Risk Ref	Risk Description	Opened	Risk score before controls (LxC)	Existing Controls in Place	Risk score after controls (LxC)	Risk Appetite	Further actions required	Risk owner
CCR.64 (SC.001	Inability to recruitment and retain social care staff and other key roles within the service IF/AS: Unable to retain and recruit experienced social care staff and other key roles THEN: Retention and recruitment to critical key roles of experienced staff will not be achieved	Jun-21	25 (5 x 5)	*We have a small, dedicated recruitment team in Children's Services to ensure recruitment is consistently done in a timely manner *We have a dedicated senior HR lead supporting the service *We have introduced a Market Forces supplement and a recruitment and retention bonus *A new recruitment microsite has been established *We have an exception for MOU for social work agency post with a review after six months *We are having conversations about fixed term contracts for certain interim staff	20 (4 x 5)	Further mitigation required	*Further develop the marketing in respect of the recruitment microsite *Refresh our total reward package - look at other features and benefits e.g. 9 day fortnight, enhanced recruitment and retention bonus etc *Complete the job families and career progression work; ensure the learning offer supports this; advertise as part of our employment offer *Use up to date research to understand generational and cultural needs of our own and prospective staff *Engage recruitment agency to assist in the recruitment of permanent staff *Raising positive profile of Herefordshire Children's Services	Corporate Director Children and Young People
CRR.74 (E.001)	School Assets IF/AS: The condition of school estate continues to deteriorate with insufficient budget to maintain school assets proactively THEN: There may be an increase in costs due to unplanned significant spend, school closures and possible health and safety implications	Jun-21	20 (4 x 5)	•The capital programme board is now chaired by the DCS as part of the overview and monitoring in line with corporate infrastructure	20 (4 x 5)	Further Mitigation Required	The capital programme is being managed by the project managers office as agreed by the corporate infrastructure. This is a permanent risk as schools will continue to require maintenance and there is currently an underfunding of maintenance works (priority 1); there good oversight on this risk and mitigation continues to drive this work forward alongside the need for additional funding. A capital request for £2.7m has been made which would look to remove the emergency and Priority 1 backlog	Service Director Education, Skills and Learning
CRR.75 (E.004)	SEND inspection - Risk of adverse inspection IF/AS: We fail to prepare adequately for the SEND Inspection in a robust manner. Some aspects of SEND provision are at risk in inspection due to pressures in the system including capacity of staffing arrangements, including across	Oct-22	16 (4 x 4)	Peer review undertaken and feedback informing action plan to enable the service to prepare for inspection Multi-agency Assurance and Partnership Boards operational, inspection readiness task group in place DfE support in place and LGA fortnightly support in place. SEND multi-agency/factorial data dashboard live for partner and manager	16 (4 x 4)	Further mitigation required	Quality Assurance Framework introduced for EHCPs and Annexe A work driving review and updating of policies procedures and documentation need to be to ensure that the organisations are in a robust position prior to inspection taking place- work in prpgress to be completed •Engagement Strategy needs to be developed and implemented- good pace of work now at risk due to non-cover of cover for maternity leave	Service Director Education, Skills and Learning

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		the partnership - health and commissioning, to deliver statutory services. Then: This will have an impact on the service and the progress			use , improvements needed e.g. Power BI identified •SEND strategy, delivery plan and SEF signed off. •Local offer updated.				
		on improvement of the service to meet the needs of the SEND children in Herefordshire			•Staffing has stabilised and some increase in health				
	CRR.77 (E.007)	Increase in out of county educational placements IF/AS: There is an increase in out of county educational placements for EHC Plan Pupils Then: This places pressures on SEN Funding (High Needs Block and local authority transport budgets)	Oct-22	16 (4 x 4)	Commissioning capacity secured to improve supporting processes for school aged and thereby quality of placement/outcomes as well as better position for regional working. GEM school opened in Herefordshire- along with National Star- 2 local INMSS provisions mitigating impact of distant educational placement	16 (4 x 4)	Further mitigation required	Joint working with health to address late health advice	Service Director Education, Skills and Learning
22	CRR.80 (RI_TP0 5)	Supply chain capacity IF: There remains insufficient capacity in the supply chain to meet the increasing demand (public and school transport). THEN: The service will be unable to deliver statutory/socially necessary services and contracting costs will increase	03/11/20 22	25 (5 x 5)	Procurement DPS open for suppliers to join at any time. Personal Transport Budget scheme to reduce reliance on provided transport.	16 (4 x 4)	Further mitigation required	Consider options to relax taxi licence policy/fees to attract more drivers to the market, or/and increase im house vehicle fleet.	Mark Averill (Interim Service Director Highways and Transport)

CRR.	Reviews - capacity, timeliness and statutory duty of care. We are currently unable to complete reviews in a timely way THIS is our statutory duty. In addition, people's needs may have changed so they may require an increase or decrease in service. There may be an increase in unplanned pressure on the system if reviews are not completed in a timely way. This also impacts on staff workloads. This is due to recruitment and retention issues in staffing.	Jan-23	16 (4 x 4)	Daily triage of changing needs by locality managers to ensure that those most in need are reviewed. Use of agency staff to undertake more complex reassessments and reviews has been completed. Retention payments for some key staff and welcome payments to attract staff alongside an ongoing recruitment campaign was undertaken last year we are now benchmarking to look at the year ahead. We still do not have a full staff structure in order to achieve our full review compliance although the position has improved and is currently at 61% which is the best position in 3 years.	16 (4 x 4)		We will continue to monitor our staff capacity and skill capacity. A workforce review of roles and what is required in 2024 and beyond is planned. Adults and wellbeing maintain a constant monitoring of where staffing pressures are that will affect delivery of care and assessment services. We can if necessary ask staff to work within other areas. There is a continued process with Hoople to address this that is revised. HR currently supporting with scoping the recruitment and retention issues within Adults and also in Childrens. We have a new approach with HR on our recruitment strategy including advertising and a microsite developed. We are exploring the addition of HC9 posts to reflect the experience and/or qualification of senior social workers in practice which we aim to have a decision on before April this year There is a report with weekly staffing position and waiting list position and we target reviews as best we can with available resources. Recruitment and retention is a key strand of the recently launched transformation strategy. Numbers of social workers is much the same as previously but our new assessment officer posts has started to improve in	Service Director Social care delivery
CRR. (RI_C 20)	M. IF: the risk that BBLP fleet	16/02/20 23	20 (5 x 4)	CMT have instructed BBLP to prepare and submit a full fleet replacement programme that sets out which assets have expiry leading up to Aug 24. This will be evaluated to develop the optimised method to ensure that assets are available. BBLP have confirmed that all fleet assets will remain in place until the end of the 23/24 financial year.	20 (5 x 4)	Accept	recruiting resource. BBLP have now submitted initial proposals and costs for consideration by the council. New medium term hire fleet to be introduced to ensure service continuity. This will enable the council to keep its options open for future fleet provision and meet the requirements of the FOM. New assets will be required from April 24. CMT now reviewing with commissioners prior to confirming requirements to BBLP. This will result in increased costs, circa £300k in 24/25, due to current market rates.	Mark Averill (Interim Service Director Environment, Highways and Waste)
CRR. (RI_C 22)		01/12/20 23	20 (5 x 4)	The council has issued Early Warnings to BBLP notifying of the requirement under the contract to evidence value for money in 2023/24 and BBLP are yet to fully respond. The council will also address this matter as an integral part of reviewing the annual plan for the contract for 2024/25	20 (5 x 4)	Accept	CMT to ensure that the VFM evidence is provided to assess the payment mechanism options and test VFM on an ongoing basis.	Mark Averill (Service Director Environment, Highways and Waste)

22	CRR.85 (RI_EW. 02)	Waste management services contract IF: we do not appropriately resource the review THEN: there is a risk that we may not meet the tight timescales to be able to re-procure a new service in time	15-Jul- 21	20 (4 x 5)	* Governance and budget allocated from Waste Reserve with waste transformation officers seconded from Waste team. * Budget allocated for required technical consultants to support review. (funded by reserve) * Two members of the Waste Services team have been seconded to the Waste Transformation Team in the PMO. * Vacant Waste Services team members backfilled * Woods appointed as technical support consultants for the Waste Collection Reprocurement and mobilisation * Transformation Project Lead - started April 22 (struggled to recruit to this position) * External legal support procured to support waste collection reprocurement (April 22) * ISFT live - final tenders due 05.12.23 * Waste Transformation lead - contract extended until Nov 24 * Acting up arrangements in place and Paul West appointed as Waste Team Leader for 12months. * Interim triage arrangement in place to provide support whilst re-recruiting to vacant waste and recycling officer post and long term absence for a member of staff.	20 (4 x 5)	Further mitigation required	* Ongoing project management - tight timescales * Resourcing plan for mobilisation, rollout and new BAU to be drawn up. * Staff working on evaluation clearing all other work to meetin ambitous timescales * Resource paper to extend transformation officer positions by 12months and also to extend backfill arrangements by 12months - endorsed by Waste Strategy Board (21st Nov), RoOD approved by service director and contract extensions due for consideration at E&E Board on Weds 6th Dec. (Risk to reduce back to 15 once approved)	Mark Averill (Interim Service Director Environment, Highways and Waste)
	CRR.86 (SC.002	There is an insufficient range and quantity of placements (fostering homes) for children in our care and for care experienced young people. •Development of Sufficiency strategy to support best value model IF/AS: the sufficiency strategy is not effective in a timely manner in order to meet outcomes for c&YP THEN: high costs demands in order to meet service need will continue within the budget	Jun-21	25 (5 x 5)	Panels have been implemented to ensure robust monitoring and approval of all placements. Data and information systems shared between the service, finance teams, and the placement team have been strengthened. Revision of the sufficiency strategy. Employment of Marketing Officer to promote recruitment of in-house Foster Carers	20 (4 x 5)	Further mitigation required	*Working with Commissioning to support the review of contracts and inform future sufficiency and needs *Reviewing of current contracts to ensure value for money. *Develop and implement a recruitment and retention model to increase fostering, short breaks / respite provision and emergency foster care. *Commissioning to continue market development and considerations to be given to block purchase *Develop options and business case for potential future residential provision *Consideration to be given to increase rate for inhouse Foster Carers	Service Director Safeguarding and Family Support

	CRR.87 (SC.006)	Lack of pace in development of Performance IF/AS: We there is no additional or ring-fenced resource we will not develop Performance reports at pace Then: Our Managers are less able to manage their teams, we are less able to manage demand and there will be a delay in the performance arrangement to support and test service improvements (Ofsted "What needs to happen" - ILACS 2022) which will have a potential impact on future inspections and corporate reputation.	Oct-23	16 (4 x 4)	*Additional funding agreed for Lead Developer, Data Analyst to remain in post from October - December 2023 *Head of Corporate Performance considering resources vs demand and will present to CLT *Priorities in reporting have been set by DLT (immediate priorities Care Leaver data and Scorecard)	16 (4 x 4)	Further mitigation required	•Further mitigation to be considered following initial scoping by Head of Corporate Performance	Corporate Director Children and Young People / Director of Strategy and Performance, Corporate Services
36	(SC.007	Lack of pace in development of Mosaic IF/AS: We there is no additional or ring-fenced resource we will not develop Mosaic Then: The Mosaic system will not enable or facilitate best practice which will hamper our improvement journey and potenital Ofsted inspections; lastly it and will lead to data quality issues and as such impact on reporting (see SC006)	Oct-23	16 (4 x 4)	Additional funding agreed for Systems Analyst to remain in post from October - December 2023 Head of Corporate Performance considering resources vs demand and will present to CLT Work to replace CiN Signs of Safety forms has concluded; CLA forms are due to go live in November 2023	16 (4 x 4)	Further mitigation required	•Further mitigation to be considered following initial scoping by Head of Corporate Performance	Corporate Director Children and Young People / Director of Strategy and Performance, Corporate Services
	CRR.89 (SC.008	Business Support IF/AS: Business Support does not currently support staff and teams in the most efficient manner Then: Staff are less supported, there are multiple hand-offs and delay in moving to face-to-face activities	Oct-23	16 (4 x 4)	DLT decision made that review/restructure could progress Initial consultation held with HR Discussions held/scheduled to encourage face-to-face minuting	16 (4 x 4)	Further mitigation required	•Revised structure chart to be completed and proposed to DLT	Service Director Early Help, QA and Prevention
	CRR.90 (E.009)	EYFS Sufficiency - Spring Budget Announcement: has created a changing landscape. Meaning there is an increasing pressure on ensuring sufficiency for early education spaces in Herefordshire. It is likely that by September 2024 we will not	Nov-23	16 (4 x 4)	*Working closely with the sufficiency team to see where existing settings could be expanded	16 (4 x 4)	Further Mitigation Required	*Application to the DFE scheme for support from an external consultant in this area	Service Director Education, Skills and Learning

		have enough spaces: Sufficieny work suggests a minimum shortfall of 1400 spaces which is equivalent to 30 rooms							
•	CRR.91 (E010)	Secondary School Places Pupils not able to access secondary school places within 15 school days of submitting an application IF/AS Pupils who move into the county/ within the county cannot access school places Then: We are failing to meet our statutory duties	Jan-24	16 (4 x 4)	School admissions officers flag pupils unlikely to secure a local school place to the Admissions team manager. Discussions have been had with a secondary school who is keen to increase numbers and parents are directed to them. Staff explain to parents in detail what the likely outcome of applications will be and the likelihood of an appeal being successful using known data. Academy 21 on line tuition can be spot purchased for pupils unable to access a school place, this is a short term solution.	16 (4 x 4)	Further Mitigation Required	Officers are currently in discussion with the DfE regarding what actions can be taken regarding a city academy school built for 1100 pupils but has approximately 650 on roll, therefore has physical space to admit additional pupils. The current solution of using a rural school on the Welsh borders is having significant impact on transport costs and has resulted in increased communications from parents to MP's. The use of Academy 21 has a cost implication.	Service Director Education, Skills and Learning
3	CRR.92 (E.002)	Special School Demand If/AS: Demand continues for special school places, we are not be able to place locally and we might run out of independent and non-maintained places within daily travel. Then: There is a risk to the High Needs budget which in turn carries a reputational risk, there is a risk of legal challenge as we will not be able to meet need and children might unnecessarily placed residentially disrupting family life. Not all SEND children who require specialist provision can now be placed smoothly e.g. early years cohorts.	Jun-21	20 (5 x 4)	•SEND Sufficiency report commissioned and available. Commissioning Officer some capacity supporting SEND planning. Beacon College completed. 60 post 16 places. Child Readiness Project in early years led to increased number transferring mainstream school. •Westfield rebuild secured through DFE funding routes. Project will start 2027. •Brookfield remodelling funding from DFE and council secured awaiting academisation outcome. •Project board established re DFE high needs capital grant - 3 short term mitigating projects identified and feasibility studies completed. 4 new autism resource bases to opened in Sept 2023 - 2 x primary and 2 x secondary creating an additional 32 places new Nursery assessment base opened October 23 initially 9 places to increase to 15 Sept 2024 Brookfield intervention SEMH provision extended from September 23	20 (5 x 4)	Further Mitigation Required	Bid for free AP school in partnership with Contuturust, Kidderminster in progress. Will create 99 additional places if successful. Interview stage completed. SEND Sufficiency requirements part of Capital strategy to identify need for additional provision - context local, national and regional growth in demand. Governance routes September 23. Granular mapping of need using projecton data and specialist provsion intelligence to inform options analysis for new provision and targetted inclusion development work.	Service Director Education, Skills and Learning