

## Risk Management Strategy Assurance Review – December 2023

The purpose of this summary is to present a six-monthly overview of the status of the delivery of our Corporate Risk Management Strategy and Risk Management Handbook.

Key themes within our Strategy and Handbook	2021 RAG status	2022 RAG status	Current RAG status	Supporting information		
				Established arrangements	Progress made in 2023	Opportunities for development in 2024
<b>Roles and responsibilities in the Risk Management Strategy and Handbook</b>	<b>GREEN</b>	<b>GREEN</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>• Clear roles and responsibilities within the updated Risk Management Strategy and Handbook – reinforced, and appropriately challenged, as needed, through the work of the Assurance Team.</li> <li>• Each Directorate has at least one Risk Management Champion that attends the Corporate Risk Management Group regularly.</li> <li>• The Corporate Risk Management Group meets in line with its terms of reference, with good attendance from Risk Champions and Subject Matter Experts. All actions agreed through the group are documented and followed-up as part of the groups action control process. Highlight reports are requested from service leads to ensure appropriate identification and consideration of issues and risks; alongside the quarterly risk management reports.</li> <li>• There is regular reporting on risks to identified leads, as set out within our risk management roles and responsibilities.</li> <li>• Development of the Accountabilities Framework (Led by Organisational Development, OD); aligned to the risk management roles and responsibilities.</li> <li>• Communication of roles and responsibilities through key briefings to managers and colleagues.</li> <li>• Up to date content on MiDerby, with contact details aligned to the Risk Management Strategy.</li> <li>• Programme and project roles and responsibilities, aligned with risk management.</li> <li>• Recording arrangements are documented on risk registers to evidence appropriate oversight in line with risk management roles and responsibilities.</li> </ul>	<ul style="list-style-type: none"> <li>• Further information on the role of the Risk Champions added to the updated strategy.</li> <li>• Leadership accountabilities reflected within the updated documents.</li> <li>• Information included within the Strategy / Handbook on our training and support offer.</li> <li>• Project Manager Network and Assurance and Development Group added to roles and responsibilities ensuring alignment to programme and project activities.</li> <li>• Risk training sessions with Councillors, Cabinet, Heads of Service and Managers.</li> </ul>	<ul style="list-style-type: none"> <li>• Development of a training schedule for 2024/25, in line with the Accountabilities Framework, with on-going communication for all colleagues and councillors.</li> </ul>

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				Established arrangements	Progress made in 2023	Opportunities for development in 2024
				<ul style="list-style-type: none"> <li>Communication on risk management through the Project Manager Network, and targeted assurance reviews of projects.</li> </ul>		
<b>Risk Management Process</b>						
<b>Risk and opportunity identification</b>	<b>AMBER</b>	<b>GREEN</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>All directorate and strategic risks are reviewed by the Assurance Team, at least every quarter, with the routine identification of new risks and emerging issues.</li> <li>There are new risks appropriately added to risk registers, as they become known or are escalated.</li> <li>All priority projects have risk registers in place, which are subject to routine review by the Assurance Team and the Programme Management Office, as part of Gateway processes – this has been strengthened through the Project Management Platform.</li> <li>There are emerging risk and issues logs in place, 'held' by the Assurance Team to support strategic risk identification; these are regularly reviewed at CRMG meetings.</li> <li>Inclusion of risk indicators as a standard item for consideration by the CRMG, aligning to wider monitoring activities (<i>Audit recommendation</i>).</li> <li>Targeted risk registers in place, led by the Assurance Team, to ensure a consistent and appropriate approach on risk identification on city threats and opportunities (i.e. cost of living).</li> </ul>	<ul style="list-style-type: none"> <li>Strengthened identification of project risks and opportunities</li> <li>Guidance on risk escalation and de-escalation included in the refreshed handbook to aid risk identification and analysis</li> <li>Wider guidance on risk identification, as recommended by Internal Audit.</li> <li>Further information added on the emerging risk log and the role of the CRMG in risk and opportunity identification in the updated documents.</li> <li>Examples of risk indicators included alongside more guidance on the development of risk indicators and how these should be monitored / reported.</li> <li>Introduction of a monthly Corporate Health summary, which reflects key risk indicators.</li> <li>Further guidance added within the Handbook on the identification of issues versus risks, including on how to manage risks that</li> </ul>	<ul style="list-style-type: none"> <li>Review of department risk registers to be picked up by the Assurance Team; overseen by the Corporate Risk Management Group.</li> <li>Further embed and develop the Emerging risk log.</li> <li>Risks associated with working in partnership with other organisations informed by a shared understanding of any key risks arising from significant partnership relationships.</li> </ul>

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					<p>become issues. It has also been reflected within the Handbook that we have an issues log with guidance on the relationship of this with risk registers.</p> <ul style="list-style-type: none"> <li>Emerging risk log circulation widened to HOS monthly.</li> </ul>	
<b>Risk and opportunity analysis</b>	GREEN	GREEN	GREEN	<ul style="list-style-type: none"> <li>Derby's risk matrix requests analysis of threats and opportunities, in line with the latest edition of the Risk Strategy.</li> <li>All risks in strategic, directorate, department and project risk registers are scored in line with the 4x4 risk matrix.</li> <li>All risks are now consistently assessed under the threat and opportunity framework, including programme and project risks.</li> </ul>	<ul style="list-style-type: none"> <li>On-going review and challenge of risks – to ensure we seek to consider both threats and opportunities within our analysis</li> </ul>	
<b>Risk and opportunity treatment</b>	GREEN	GREEN	GREEN	<ul style="list-style-type: none"> <li>Risk treatment options are included in reporting options, for risk owners to complete and review.</li> <li>All templates updated to include opportunity options; with secondary treatment options included within registers, reflecting the complexity of risk management.</li> </ul>	<ul style="list-style-type: none"> <li>Risk appetite statements developed and finalised through workshops with senior leaders. Statements have been included within the refreshed Strategy, with more detailed guidance included in the Risk Management Handbook.</li> </ul>	<ul style="list-style-type: none"> <li>Work to ensure Derby's risk appetite is understood by all levels of the organisation and used to inform and assist decision-making and planning; with the benefits of risk management understood by all.</li> <li>Annual review of risk appetite statements.</li> </ul>
<b>Completing the register</b>	GREEN	GREEN	GREEN	<ul style="list-style-type: none"> <li>Strategic and directorate risk registers are maintained with targeted support from the Assurance Team.</li> <li>Project Leads are responsible for maintaining project risk registers, with appropriate review through the Programme Management Office Board and A&amp;D Group, as part of Gateway processes.</li> <li>Standardised corporate risk register templates provided for projects, directorate, and strategic risk management.</li> </ul>	<ul style="list-style-type: none"> <li>Risk register templates updated to align with the change in Administration May 2023.</li> <li>Guidance updated, in line with revised templates with specific information on the</li> </ul>	<ul style="list-style-type: none"> <li>Strengthen department risk register templates as part of the review of department risk registers.</li> </ul>

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				Established arrangements	Progress made in 2023	Opportunities for development in 2024
				<ul style="list-style-type: none"> <li>Continued embedding of the Project Management Platform (PMP) for programmes and projects, with risk logs aligned to our Risk Management Strategy and Handbook – including increased promotion of risk opportunities.</li> <li>Risk register templates updated to align with the Council Plan 2022-2025.</li> <li>Sign-off arrangements included within registers to strengthen oversight and governance.</li> <li>'Old' risk templates (i.e., HRA risk register) have been transitioned to the same corporate template.</li> </ul>	<p>PMP where the format is slightly different.</p> <ul style="list-style-type: none"> <li>Exceptions on risk templates flagged within the Handbook with a clear process for approving the use of these (i.e. Monte Carlo approach to risk modelling)</li> <li>Reviewed and refreshed guidance for Department Risk Registers.</li> </ul>	
<b>Monitoring, reporting and reviewing risks and opportunities</b>	<b>GREEN</b>	<b>GREEN</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>Risk Owners update their risks at least every three months, to inform strategic analysis and reporting.</li> <li>Strategic risks are reported to the Corporate Risk Management Group, Corporate Leadership Team and Cabinet, every quarter.</li> <li>The content of risk registers is subject to challenge and scrutiny by the Assurance Team, with identified risks/issues for discussion with the Corporate Risk Management Group and the Corporate Leadership Team.</li> <li>There have been deep-dive risk reviews hosted in the last 12-months, evidencing effective monitoring, review and challenge of our risk identification, analysis and controls.</li> <li>Risks are escalated and de-escalated, as appropriate.</li> <li>Strengthened alignment with Internal Audit work programme.</li> <li>Strategic and Directorate risk registers available on MiDerby</li> <li>Targeted reviews of risks in complex projects – i.e. mobility programme and OCOR.</li> <li>Robust schedule of deep-dive risk reviews in place.</li> <li>6-monthly assurance reviews in place on strategic and directorate risks where the scores remain unchanged, despite mitigations, to ensure risks are appropriately defined, review the context, barriers to reduced ratings and anticipated impact of controls.</li> </ul>	<ul style="list-style-type: none"> <li>Robust schedule of deep-dive risks in place (<i>please refer to Appendix 2 for information on reviews completed over the last 6-months</i>)</li> <li>Assurance Team support with specific service risk review requests, as appropriate (e.g. Property and Accommodation Sufficiency).</li> </ul>	<ul style="list-style-type: none"> <li>Development of a training schedule for 2024/25, in line with the Accountabilities Framework, with on-going communication for all colleagues and councillors.</li> <li>Review of department risk registers to be picked up by the Assurance Team; overseen by the Corporate Risk Management Group.</li> </ul>

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				<ul style="list-style-type: none"> <li>Updated guidance with the Handbook on risk assurance activities, reflecting the strengthened arrangements in place; with supporting guidance and information for risk owners.</li> </ul>		
<b>Our risk culture</b>						
<b>Risk assurance</b>	<b>GREEN</b>	<b>GREEN</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>Performance, project and risk reporting are aligned to assist in the identification of our risk control and impact measures.</li> <li>Strengthened alignment with Internal Audit work programme.</li> <li>Targeted risk reviews.</li> <li>6-monthly assurance reviews on strategic and directorate risks where the scores remain unchanged in places.</li> <li>Targeted review of high-risk projects alongside strengthened challenge and oversight through gateway processes.</li> </ul>	<ul style="list-style-type: none"> <li>Updated our guidance with the Handbook on risk assurance activities, reflecting the strengthened arrangements in place; with supporting guidance and information for risk owners.</li> <li>There are now clearer expectations of risk monitoring frequency presented for risk owners.</li> <li>An additional risk review tools section has also been added to the Handbook, with a 'review of risk scores' and 'project risk review' template included to further support colleagues in monitoring and owning their risk assurance activities.</li> <li>The Annual Governance Statement 2022/23 noted "<i>The Head of Internal Audit's opinion for 2022/23 is that there is a "Satisfactory System of Governance, Risk and Internal Control"</i>", and Senior Management Assurance Statements were produced by all Directors - most of these statements/ assurances evidenced full compliance with the principles of good governance.</li> </ul>	<ul style="list-style-type: none"> <li>Review of department risk registers to be picked up by the Assurance Team; overseen by the Corporate Risk Management Group.</li> </ul>

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<b>Risk appetite</b>	N/A	<b>AMBER</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>• Risk exposure and appetite surveys and workshops delivered to inform the development of a statement framework.</li> <li>• Draft risk appetite statements in place to aid assessment on how to treat risks in line with our organisational appetite for risk in key areas.</li> </ul>	<ul style="list-style-type: none"> <li>• Risk appetite statements were developed and finalised through workshops with senior leaders. Statements have been included within the refreshed Strategy, with more detailed guidance included in the Risk Management Handbook published in March 2023.</li> <li>• Covered in risk training to HOS and managers in November 2023.</li> </ul>	<ul style="list-style-type: none"> <li>• Work to ensure Derby's risk appetite is understood by all levels of the organisation and used to inform and assist decision-making and planning; with the benefits of risk management understood by all.</li> <li>• Annual review of risk appetite statements.</li> </ul>
<b>Risk maturity</b>	N/A	<b>GREEN</b>	<b>GREEN</b>	<ul style="list-style-type: none"> <li>• Initial risk maturity self-assessment completed, using two models to ensure a robust and holistic approach included within risk strategy.</li> </ul>	<ul style="list-style-type: none"> <li>• Self-assessment summary statements included within the refreshed Strategy, shaping the developments made within the Strategy and Handbook published in March 2023.</li> <li>• Risk maturity covered by risk training to HOS and managers in November 2023.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure risk maturity is routine and consistent across all service areas.</li> <li>• Annual review of risk maturity self-assessment to be completed by the end of 2023/24.</li> <li>• Opportunities identified will be used to shape ongoing development and reported through the six-monthly assurance reviews to the Audit and Governance Committee.</li> </ul>

#### Criteria for RAG ratings/status

	Ineffective
	In place, but further development is required
	Effective and embedded
N/A	New / developing area, baselines to be established to inform further assurance evaluations

### Risk Assurance – Strategic Risk Register Mid-Year Assurance Review

Presented below is a summary of assurance for each of the Council's strategic risks, as at the end of September 2023. A summary of changes in strategic risks are reported to Cabinet as part of quarterly monitoring arrangements.

Strategic risks	Latest risk score, treatment & direction of travel*	Do we have controls in place that are assessed by the risk owner as effective?	Progress with additional actions & their effectiveness?	Has the risk been subject to any review activities in the last 12 months?	Is this risk regularly reviewed by a Strategic Board/Group?
<b>SR3/CR3 - Cyber threats to our systems</b> <i>Vulnerability of the Council's IT estate to cyber attacks</i>	<b>16 – risk is being treated with identified controls</b>  <i>No change in the score from Q1</i>	<b>Seven established controls</b> in place at the end of September 2023	<b>No additional actions</b> identified	<b>Yes</b> Risk reviewed through programme and project management activities.  Internal audit – <i>IT Key Controls 2023/24</i> (in progress)	<b>Yes</b> Information Security Working Group (ISWG) Information Governance Board
<b>SR6/CR19 - Ineffective project management governance</b> <i>Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget</i>	<b>9 – risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Seven established controls</b> in place at the end of September 2023	<b>Two additional actions</b> in place. ' <i>Scoping of project management training programme</i> ' which reported 'some slippage' at the end of quarter two and ' <i>Implement Portfolio Management approach across DCC (including major Partnership working)</i> ' reported as 'on track'.	<b>Yes</b> Risk reviewed through programme and project management activities	<b>Yes</b> Programme Management Office (PMO) Board Corporate Leadership Team (CLT)
<b>SR7/CR6 - Ineffective contract management</b> <i>Inconsistent and/or poor contract management arrangements that are not in line with good contract management practice</i>	<b>6 - risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Three established controls</b> in place at the end of September 2023.	<b>One additional action</b> in place, reported as 'on track'.	<b>Yes</b> Risk reviewed through programme and project management activities  Efficiency and Innovation programme	<b>Yes</b> Efficiency and Innovation Programme Board
<b>SR8/CR7 - Data and records management</b> <i>There is a risk that poor data quality and records management negatively impact on business efficiency</i>	<b>12 - risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Five established controls</b> in place at the end of September 2023	<b>Three additional actions</b> in place, one reported as 'on track, and two reported 'major slippage' at the end of quarter two (' <i>Review of information inventory</i> ' and ' <i>review of the document retention and disposal schedule</i> ')	<b>Yes</b> Internal audit - <i>SIRO/Information Governance (substantial control assurance)</i> , with an audit in progress on <i>records management</i>	<b>Yes</b> Information Governance Working group (IGWG) in Q1 – reported as postponed in Q2 due to capacity Information Governance Board

Strategic risks	Latest risk score, treatment & direction of travel*	Do we have controls in place that are assessed by the risk owner as effective?	Progress with additional actions & their effectiveness?	Has the risk been subject to any review activities in the last 12 months?	Is this risk regularly reviewed by a Strategic Board/Group?
<b>SR14/CP1 - Adverse Outcome to estimated fair value determination</b> <i>Adverse outcome to estimated fair value determination of Long Term Waste Management Contract</i>	<b>N/A - Risk closed during quarter one.</b>  Derby City and Derbyshire County Councils reached a settlement in July 2023. The adjusted estimated fair value of the contract was determined, and the risk was closed.  Reviewed by the Corporate Risk Management Group in August 2023.				<b>Yes</b>  Project Board Corporate Leadership Team (CLT)
<b>SR15/CR16 - Inability to deliver a balanced MTFP</b> <i>Changes in Government Funding frameworks alongside increasing local budget pressures</i>	<b>16 - risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Five established controls</b> in place at the end of September 2023	<b>No additional actions</b> identified	<b>Yes</b>  .Budget monitoring takes place monthly  Internal audit on <i>financial controls</i> reported substantial control assurance	<b>Yes</b>  Corporate Leadership Team (CLT)
<b>SR16/CR17 - Inability to deliver against our current annual revenue budget</b> <i>Insufficient resources to meet planned expenditure; external impacts which may impact on long-term financial resilience such as Cost of Living crisis, increasing inflation and long term impact of Covid-19</i>	<b>16 - risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Four established controls</b> in place at the end of September 2023	<b>Two additional actions</b> in place, both reported as 'on track' at the end of quarter two (' <i>Introduce integrated monthly financial and performance monitoring for CLT</i> ' and ' <i>Targeted support for directors and budget holders that repeatedly overspend and Budget mangers financial training in place</i> ')	Risks subject to a targeted review completed by the Risk Owner and Assurance Team - risk descriptions updated in quarter one.  External-led review of the Delivery Board in November and December 2023.	
<b>SR21/CR22 - Health, Wellbeing and sickness related absence</b> <i>Increase in levels of sickness absence in 2022/23. Perceived low levels of emotional health and wellbeing amongst council colleagues and loss of significant working time due to sickness</i>	<b>9 - risk is being treated with the identified controls and actions</b>  <i>No change in the score from Q1</i>	<b>Five established controls</b> in place at the end of September 2023	<b>Three additional actions</b> in place, all reported as 'on track' at the end of quarter two. Two actions were reported as completed (' <i>Leadership purpose, accountabilities and expectations to be launched and embedded</i> ' and ' <i>Hybrid working statement to be launched in Q2</i> ')	<b>Yes</b>  Risks subject to a targeted review completed by the Risk Owner and Assurance Team.  Risk has changed from an 'opportunity risk' to a 'threat risk' due to increased absence during last financial year, continuing cost of living pressures and on-going MTFP challenges. Risk redefined and sickness related absence risk was combined with SR21 Health and Wellbeing risk.	<b>Yes</b>  Corporate Leadership Team (CLT)  Attendance and Wellbeing Group

Strategic risks	Latest risk score, treatment & direction of travel*	Do we have controls in place that are assessed by the risk owner as effective?	Progress with additional actions & their effectiveness?	Has the risk been subject to any review activities in the last 12 months?	Is this risk regularly reviewed by a Strategic Board/Group?
<b>SR26/CP15 - Inability to meet statutory duties for accommodation-based support for domestic abuse (specifically male victims)</b> <i>Domestic Abuse Act 2021 introduced a statutory definition of domestic abuse based on existing cross government definition</i>	<b>N/A - Risk de-escalated to department level during quarter one.</b> Reviewed by the Corporate Risk Management Group in August 2023. Risk now covered in department risk register as within tolerance score, and increased range of accommodation and procurement scheduled.				<b>Yes</b> Derby Partnership Board DA/SV Governance Board
<b>SR28/PS22 - Inadequate placement sufficiency to meet the increase in complexity of need for Derby's looked after children and young people,</b> with insufficient placement type available at the right time.	<b>12 - risk is being treated with the identified controls and action</b> <i>No change in the score from Q1</i>	<b>Eight established controls</b> in place at the end of September 2023	<b>No additional actions</b> identified	<b>Yes</b> Risks reviewed through programme and project management activities. Risks subject to a targeted review completed by the Risk Owner and Assurance Team in quarter one. Risk definition, description and consequences updated. Internal audit in progress on <i>Establishment Reviews - Children &amp; Young People</i> Ofsted focused visit	<b>Yes</b> Demand and Insight Programme Board D2N2 Board Children in Care Commissioning Group Safeguarding Assurance Meetings Safeguarding Partnership Children, Families and Learner's Board
<b>SR30/PS24 - 'Inability to meet the demand of Local Area SEND High Needs Block and conditions of the Dedicated School Grant</b> <i>The High Needs Transformation Programme and DSG Management Plan are unable to manage the demand of the Local Area SEND High Needs Block and reduce spend pressure</i>	<b>12 - risk is being treated with the identified controls and action</b> <i>Increase in the score from Q1</i>	<b>Six established controls</b> in place at the end of September 2023	<b>Seven additional actions</b> in place, all reported as 'on track' at the end of quarter two.	<b>Yes</b> Risk was redefined from ' <i>Local Area SEND services and provision is not effective</i> ' with risk updaters in Q1. Risk definition, description, consequences, and controls updated. Internal audit on <i>element 3 funding</i> – this relates to calculating and awarding element 3 funding to schools reported reasonable control assurance	<b>Yes</b> Local Area SEND Board SEND Capital Programme Board and High Needs Transformation Board Co-production Delivery Group Local Area SEND Impact and Analysis Group

Strategic risks	Latest risk score, treatment & direction of travel*	Do we have controls in place that are assessed by the risk owner as effective?	Progress with additional actions & their effectiveness?	Has the risk been subject to any review activities in the last 12 months?	Is this risk regularly reviewed by a Strategic Board/Group?
<b>SR32/CR29 - Compliance with the Freedom of Information (FOI) Act</b> <i>There is a risk that FOI requests are not dealt with in the correct way or within the defined timescales as set out in the act.</i>	<b>N/A - Risk de-escalated to directorate level during quarter one.</b>  Risk de-escalated to directorate level after review of all strategic risks by Assurance Team and members of CRMG during quarter one. Covered at strategic level by <b>SR3/CR3 - Cyber threats to our systems.</b>				<b>Yes</b> Information Governance Working Group (IGWG)  Information Governance Board  Audit and Governance Committee
<b>SR33/CR30 - Compliance with data protection legislation</b> <i>There is the risk that data is not managed in line with the relevant data protection legislation</i>	<b>N/A - Risk de-escalated to directorate level during quarter one.</b>  Risk de-escalated to directorate level after review of all strategic risks by Assurance Team and members of CRMG during quarter one. Covered at strategic level by <b>SR3/CR3 - Cyber threats to our systems.</b>				<b>Yes</b> Information Security Working Group (ISWG)  Information Governance Working Group (IGWG)  Information Governance Board  Digital Enablement Board
<b>SR38/CR38 - Risk of Industrial action - NJC pay claim 2023 and Teaching unions pay claim</b> <i>The Council is at risk of reduced service capacity, inability to deliver statutory services, and work backlogs if industrial action is carried out in response to national pay award negotiations.</i>	<b>N/A - Risk resolved during quarter three.</b>  New risk was added during quarter one and resolved when the pay award was accepted. Risk resolved and closed in quarter three.				<b>Yes</b> Personnel Committee  Corporate Leadership Team (CLT)

Strategic risks	Latest risk score, treatment & direction of travel*	Do we have controls in place that are assessed by the risk owner as effective?	Progress with additional actions & their effectiveness?	Has the risk been subject to any review activities in the last 12 months?	Is this risk regularly reviewed by a Strategic Board/Group?
<b>SR39/CP19 Inadequate accommodation sufficiency to meet the need for statutory housing duties in the city.</b> <i>Insufficient suitable and affordable accommodation to meet demand affecting delivery of statutory housing duties and services, and housing vulnerable customers in the city</i>	<b>12 - risk is being treated with the identified controls and action</b>  <i>No change in the score from Q1</i>	<b>Seven established controls</b> in place at the end of September 2023	<b>Three additional actions</b> in place, one reported as on track ( <i>Further CLT discussions on actions to manage the risk</i> ). One reported as 'on hold' ( <i>Follow up workshop with internal stakeholders</i> ). One reported as 'not started' ( <i>Longer term understanding across Council of interim property pipeline</i> ).	<b>Yes</b> Internal audit on <i>Strategic Housing</i> reported substantial control assurance  Risk workshop took place with stakeholders May 2023.	<b>Yes</b> Derby Partnership Board  Corporate Leadership team (CLT)  Asset Rationalisation Programme Board  DCC / Derby Homes Strategic Partnership Board
<b>SR40/PS28 Increased volume of ASC Safeguarding referrals leading to delays and waiting lists for investigation</b>	<b>12 - risk is being treated with the identified controls and action</b>  <i>No change in the score from Q1</i>	<b>Three established controls</b> in place at the end of September 2023	<b>Three additional actions</b> in place, all reported as on track at the end of quarter two.	<b>Yes</b> Internal audit on <i>Safeguarding - The Role of the LADO</i> reported reasonable control assurance, and also supported with in delivering a number of quality assurance reviews following a set programme of questions designed to assess the quality of services provided for adults in relation to safeguarding episodes.  Sector Led Improvement annual conversation and assessment in July 2023	<b>Yes</b> Adults Safeguarding Assurance Group  Corporate Leadership team (CLT)  Adult Social Care Improvement Board

\* The risk scores are those last presented to Cabinet in November 2023, as part of the Quarter 2 Performance Monitoring Report. The Q3 position will be reported to Cabinet in February 2024, at the earliest.