![Derby City Council logo]

Strategic Risk Register

Risk Matrix (Impact vs Likelihood)

Impact \ Likelihood	1	2	3	4
4		R4	R1, R5, R6, R7, R9, R10	R12, R13
3		R11	R3, R8	
2				
1				
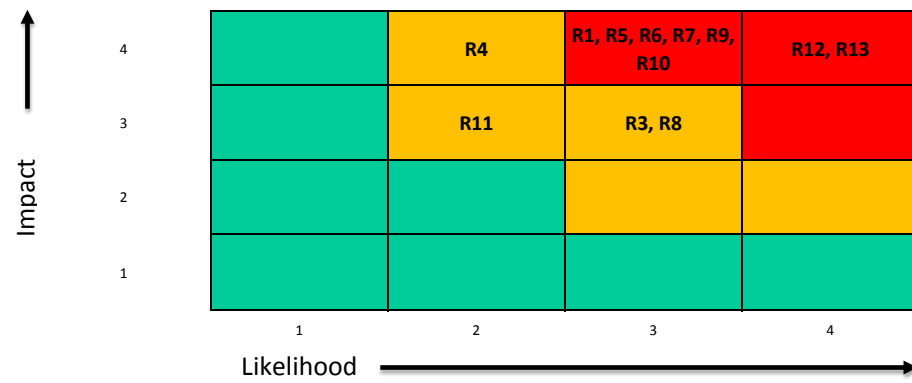
Legend:
- ★ New risk added
- ↗ Risk has improved compared to the previous quarter
- ⇨ Risk has remained the same from last quarter
- ↘ Risk has deteriorated compared to last quarter

Risk Ref	Risk Description	Inherent Risk Rating	Q3 Risk Rating	Q4 Risk Rating	DoT Status	Comments
Strategic R1 / CR 1	Staffing – capacity, skills and knowledge Increasing demands on existing resources	12	12	12	⇨	Staff Soapbox Survey results will enable targeted actions to be put in place to reduce the risk. Targets have been set with Managers - with better monitoring in place it is expected to reduce risk and help focus targeted interventions where needed.
Strategic R3 / CR3	Cyber security - Vulnerability of the Council 's IT estate to cyber attacks	12	9	9	⇨	Current threat levels for UK is 'Severe' - this has a direct influence on the likelihood and the impact despite all internal controls in place.
Strategic R4 / CR4	MTFP - Delivering the Medium Term Financial Plan for the authority	12	8	8	⇨	The risk for 19/20 is minimal as the budget has been set and provided the plans are monitored and met or adjusted as appropriate, the risk is low. The risk for the future years budgets 20/21 to 22/23 is still very much amber as the positions in each year are still not in balance.
Strategic R5 / CR5	Statutory Compliance and Property Health & Safety - Non-compliant condition of Council properties including land and buildings	16	12	12	⇨	Actions are being worked upon and aim to reduce the risk likelihood, as they start getting embedded into the business.
Strategic R6 / CC R1	Managing Major Capital Projects: Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget	16	12	12	⇨	Risk stays significant. Risk has been moved from Communities & Place Directorate to Corporate Core Directorate.
Strategic R7 / CR6	Procurement and ongoing management of service delivery contracts - Ineffective contract scoping and contract management	16	12	12	⇨	Vacancies in Procurement Team have been filled allowing Category Managers to increase the level of advice for contract scoping - so contract scoping should improve. Contract management still remains the main risk.
Strategic R8 / CR7	Data and records management - Poorly defined records management systems and processes	9	9	9	⇨	Risk is expected to improve once an action plan is devised (post a review of the Inform/Consult workshop findings) and starts getting embedded in business as usual.
Strategic R9 / CR8	Health and Wellbeing - Increased workload pressure on staff	12	12	12	⇨	Risk stays significant. New Mental Health First Aiders are now available if needed and sickness targets have been set. Monitoring of sickness hotspots continues but risk stays the same.
Strategic Risk 10 / People R1	Demand Management - Inability to manage demand within the approved budget	16	12	12	⇨	Risk remains significant despite the controls in place. Actions remain ongoing.
Strategic Risk 11 / CC R4	Risk of impact of No-Deal Brexit at a local level	8	6	6	⇨	Risk stays the same. Business Continuity plans have been updated to ensure they are accurate and up to date. 'No deal' risk and issue log (with 28 risks currently being mitigated) reviewed and monitored every week.
Strategic Risk 12 / C&P-R7	Sinfin waste plant - Failure to deliver overall project	12	12	16	↘	Risk has been escalated from Directorate level due to the potential financial implications of a high compensation payment. Project Team continues to monitor the situation closely as the operation date has been revised. A report has been sent to Cabinet seeking further advice.
Strategic Risk 13 / C&P-R11	Delivery of A52: Delivery of the A52 programme by end of Summer 2020.	16	-	16	★	Risk has been escalated from Directorate level with the re-assessment of the impact. Original risk has been re-defined.

	RISK DEFINITION				MITIGATING CONTROLS			FURTHER ACTIONS REQUIRED			RISK RATING											
							Quarter 4 2018/19 Review			Quarter 4 2018/19 Review		Q3 2018/19			Q4 2018/19			TARGET				
RISK REF	RISK TITLE & DESCRIPTION	RISK THEME - LOCAL ANALYSIS	RISK CAUSE	RISK EFFECT	CONTROLS IN PLACE TO MITIGATE THE RISK	Is this control still in place?	Supporting Comments	FURTHER ACTION REQUIRED	Progress with action	Commentary on progress	LIKELIHOOD	IMPACT	RISK RATING	LIKELIHOOD	IMPACT	RATING	Reason for change in Risk Rating (compared with Q3)	LIKELIHOOD	IMPACT	RATING
Strategic R1 / CR 1	**Staffing – capacity, skills and knowledge** Increasing demands on existing resources	STAFF	Budget restrictions have seen services workforce shrink without proportional reduction in demands, increases expectation on remaining staff with more responsibilities and reliance on good will of staff.	Increased stress levels, increased staff sickness, reliance on temporary staff, increased costs, increased mistakes, reduction in morale, service delivery failure (including statutory responsibilities), external sanctions and fines.	Management controls across the organisation to review staff stress levels and identify concerns prior to sickness becoming apparent.	Yes	Stress risk assessments form part of the manager's responsibilities and HR advisors continue to remind managers to complete them at least annually. Specific training on the management of stress has been delivered and is ongoing. Stress issues are picked up in the Health, Wellbeing and Attendance clinics and in discussion with managers. A number of Mental Health First Aiders (MHFAs) have now aloes been trained and further training for additional MHFAs is scheduled to take place in 2019/20.	Strategic decision making through MTFP recognising pressures where appropriate with greater consideration to understand effects of decisions.	Completed	Discussions regarding budgets and pressures continue to be addressed by Directorate Leadership Team meetings (DLTs) and Corporate Leadership Team meeting (CLT) as part of the Council's Medium Term Financial Strategy (MTFS). This action is part of business as usual and targeted risks will be reflected in Department Risk Registers, in line with any proposed service changes. *Propose to remove this action from 2019/20 onwards, to be replaced with a control.*	3	4	12	3	4	12	Staff Soapbox Survey results will enable targeted actions to be put in place to reduce the risk. Targets have been set with Managers - with better monitoring in place it is expected to reduce risk and help focus targeted interventions where needed.	1	4	4
								Analysis of "hot spots" with high absence rates identified as due to stress.	On Track	Stress remains the highest reason for absence and consequently is a key focus for the Health and Attendance Advisors, who advise managers on wellbeing and take regular reports to CLT. Early indications show that the Mental Health First Aiders (MHFAs) are being used by colleagues, however it is too early to assess what impact this intervention may have on the absence figures. Improved guidance on attendance management and support is currently being developed. Targets have been set with each Service Director for the next 3 financial years, beginning from 01/04/19. Performance objectives also to be agreed for all managers on managing attendance.										
				Ability to recruit temporary staff in the event of high demand, subject to funding availability.	Yes	Market rate supplement policy is still in operation. Ability to recruit temporary staff, however, remains subject to funding availability.	Targeted work (as requested) to address resilience hotspots including market supplements, workforce development	Some slippage	Staff Soapbox Survey launched on 25/03/19 with publicity campaigns to encourage a high response rate, which will assist with identification of any themes/issues. No resilience hotspots requiring a change of recruitment approach have been identified by managers to the HR service for focussed support during the last quarter; excluding CYP services, where work has been on-going for the recruitment of Children's Social Workers. This action will reviewed for 2019/20 to better align to the controls in place, as work remains on-going but is dependent on services identifying support required. *Action has improved from "red" at the end of Q3 to "amber".*										
				HR continue to play an advisory role in supporting the organisation when there are planned changes to senior management roles.	Yes	Directors proactively consider the potential impact on service delivery of changes to senior management, and have plans in place to address the issue.	Training for all managers on health and well-being approaches and stress management.	Completed	There are a range of courses available to managers, via iDerby Health & Wellbeing pages, to assist with effectively managing health and attendance. These include; health, wellbeing and attendance, new manager induction, stress management for managers, using FirstCare effectively, effective return to work interviews, effective OH referrals, effective health, wellbeing and attendance conversations and stress risk assessment. Health & Wellbeing Advisors and HR advisors continue to advise managers on these available resources. *Propose to remove this action from 2019/20 onwards, to be replaced with a control.*										
				Courses available to managers, via iDerby Health & Wellbeing pages, to assist with effectively managing health and attendance (Health, Wellbeing and Attendance, New Manager Induction, Stress Management for managers, Using FirstCare Effectively, Effective return to work interviews, Effective OH referrals, Effective health, wellbeing and attendance conversations and Stress Risk Assessment. *Control was previously an action*	Yes	*Completed action moved to controls.*	Targeted work on Succession Planning.	Some slippage	Focussed work on succession planning in the HR Strategy is scheduled for future years and not 2019/20. The HR Strategy has been developed and agreed since this risk and action was initially described. It is recommended that for 2019/20 this action is reviewed and updated in line with the strategy.										

RISK DEFINITION / MITIGATING CONTROLS / FURTHER ACTIONS REQUIRED / RISK RATING

Strategic R3 / CR3 — Cyber security

Risk Title & Description: Cyber security - Vulnerability of the Council 's IT estate to cyber attacks

Risk Theme - Local Analysis: SYSTEMS

Risk Cause: Historic lack of investment in IT; failure to maintain systems at most current release and constantly changing threat landscape. Open nature of IT infrastructure (proliferation of devices)

Risk Effect: Extended IT outages and significant data loss. Potential fines from the ICO and reputational damage.

Controls in place to mitigate the risk	Is this control still in place?	Supporting Comments (Q4 2018/19 Review)
Perimeter security - firewalls etc.	Yes	We adopt a 'defence in depth' approach with security controls at both the network perimeter and staff end user devices. Our approach to maintaining the security and integrity of our network is under review as part of the implementation of the replacement WAN and LAN project.
Anti-malware software	Yes	Anti-malware software continues to be upgraded as required.
PC Patching Programme	Yes	Work is ongoing to identify a new toolset to assist in software patching and enhanced auditing capabilities - the new improvements are being delivered as part of the Windows 10 and Office 365 upgrades in 2019, which will be on-going until December.
Information Security Working group (ISWG) meets monthly - looks at all threats and activities the council needs to take to counter those threats.	Yes	An Information Security Working Group (ISWG) has been created, comprising of Information Governance and Technical professionals, which meets monthly.
Incident response procedures	Yes	Incident response procedures are in place and regularly reviewed by the Information Security Working Group (ISWG).
GDPR and Cyber Security eLearning *Control was previously an action*	Yes	*Completed action moved to controls.*

Further Action Required: To support the cyber security agenda, a continued push for 'GDPR and Cyber Security' eLearning completion is required from all services.

Progress with action (Q4 2018/19 Review): Completed

Commentary on progress: Completion rate for GDPR and Cyber Security eLearning is approximately - 88% for staff and 73% for Councillors. Enforcement of training completion via Heads of Service continues. Stringent non-compliance penalties will be considered in the coming months, being led by the Corporate Leadership Team who will monitor performance monthly as part of their performance scorecard.

This is an ongoing activity - moved to controls

	Likelihood	Impact	Rating
Q3 2018/19	3	3	9
Q4 2018/19	3	3	9
TARGET	2	3	6

Reason for change in Risk Rating (compared with Q3): Current threat levels for UK is 'Severe' - this has a direct influence on the likelihood and the impact despite all internal controls in place.

Strategic R4 / CR4 — MTFP

Risk Title & Description: MTFP - Delivering the Medium Term Financial Plan for the authority

Risk Theme - Local Analysis: BUDGET

Risk Cause: Budget restrictions require proportionate consideration of future allocations to ensure delivery of services or a reduction or cessation of non-statutory services. Financial plans are too short sighted with limited consideration for longer term impacts of decisions being made with primary focus on election cycle within Derby and supporting projects with perceived greater impact for the city.

Risk Effect: Failure to strategically plan long term finances exposes potential for unidentified expenditure adding additional pressure on financial structure and jeopardising the financial sustainability of the council.

Controls in place to mitigate the risk	Is this control still in place?	Supporting Comments (Q4 2018/19 Review)
Senior officers taking ownership of Medium Term Financial Strategy (MTFS) and understanding implications for Council	Yes	Council's Budget was set for 2019/2020 at the 27th February Council Cabinet meeting. There is still work to do to monitor & take appropriate actions (if required) to ensure the 2019/20 plan is delivered, which is part of our business as usual financial processes. Future years are still not in balance and remain CLT's focus. There are plans to carry out thematic reviews in the next round of budget proposals including: Procurement & Commissioning/Income Generation/Demand Management/Commercial Approach/Structures: Agency working: Overtime.
Working with departments to fully understand budget position to ensure complete planning and ongoing monitoring.	Yes	The Council Budget was set for 2019/2020 at the 27th February Council Cabinet Meeting

Further Action Required	Progress with action	Commentary on progress (Q4 2018/19 Review)
Continued monitoring of plan development and changing circumstances and effect on budget and timely feedback	On Track	The Budget was set at Council Cabinet on 27th February 2019. The MTFP is a cyclical process and will continue to be reviewed and updated with an initial meeting with Heads of Finance proposed for April. The process is on track - however new savings/reduced pressures and further funding have not been identified to balance the future years MTFP at this stage. Further actions to mitigate risks will be considered as the process for 2020/21 continues (for example review of resilience toolkit once this is issued).
Implement a thematic approach to the MTFP which includes focus on areas such as commercialism, maximising assets, digital and lean working and managing demands. (As agreed at Risk Surgery in January 2019).	On Track	The approach was agreed by CLT at their away day on 30 April 2019 and is now being taken forward by nominated directors.
Review development needs of councillors to ensure a consistent understanding of the budget setting process. (As agreed at Risk Surgery in January 2019).	On Track	This will be reviewed and implemented during the course of 2019/20.

	Likelihood	Impact	Rating
Q3 2018/19	2	4	8
Q4 2018/19	2	4	8
TARGET	1	4	4

Reason for change in Risk Rating (compared with Q3): The risk for 19/20 is minimal as the budget has been set and provided the plans are monitored and met or adjusted as appropriate, the risk is low. The risk for the future years budgets 20/21 to 22/23 is still very much amber as the positions in each year are still not in balance.

	RISK DEFINITION				MITIGATING CONTROLS			FURTHER ACTIONS REQUIRED			RISK RATING										
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Strategic R5 / CR5	**Statutory Compliance and Property Health & Safety -** Non-compliant condition of Council properties including land and buildings	HEALTH AND SAFETY	Lack of capacity and resources to maintain and manage our land, building and facilities. Failure to operate safe systems for the use and occupation of buildings.	Breach of statutory H&S and duty of care obligations. Potential injury, loss of life, service disruption and damage to property.	Health & Safety / compliance assurance now firmly embedded as a key objective in Property Team's Business Plan.	Yes	It has been carried over to the new business plan (2019/20).	Property Design & Maintenance Service to lead on the development of a Buildings Operational Manual for all Council operational properties (as part of the delivery of the Property Compliance Improvement Plan)	On Track	Multi-disciplinary property/H&S team formed. Broad framework has now been agreed - detail on content is being developed.	3	4	12	3	4	12	Actions are being worked upon and aim to reduce the risk likelihood, as they start getting embedded into the business.	2	4	8
					Programme of three yearly condition surveys	Yes	The objective has been carried over to the 2019/2020 Property Business Plan, which will be monitored by the Head of Service.	Property Design & Maintenance Service to lead on Policy Development on key areas – Fire, Water Hygiene, Asbestos, Electricity And Gas (as part of the delivery of the Property Compliance Improvement Plan)	On Track	Fire / Gas Policy draft completed. The remainder are being currently being drafted so this action remains in progress.										
								Corporate H&S lead to develop policies and approach for the following service areas: Dangerous substance, explosive atmospheric regulations (DSEAR), working regulations, and working at heights (as part of the delivery of the Property Compliance Improvement Plan)	On Track	Working at Heights (priority) - draft completed, and to be formally adopted by Corporate Safety Committee in June 2019. DSEAR - policy and approach to be amalgamated into the Fire Policy (see above action).										
					A Buildings maintenance programme is in place supported by asset surveys to limit likelihood and potential of incidents occurring as a result of unidentified H&S issues.	Yes	In place and captured through 2019/2020 Capital Programme.	Strategic Asset Management & Estates Service to lead on further development of the approach around Vacant Properties (as part of the delivery of the Property Compliance Improvement Plan)	On Track	Council's Vacant Property Management strategy is in place clarifying roles & responsibilities around management of vacant properties. Work is continuing to ensure the Corporate Disposals Programme is accelerated to ensure the exit strategy for vacant properties is achieved (and risks are appropriately mitigated).										
								Strategic Asset Management & Estates Service to lead on Compliance of leased-out Properties (as part of the delivery of the Property Compliance Improvement Plan)	On Track	A framework has been developed to gain assurance of compliance of leased-out properties. The Audit process has commenced (with effect from February 2019). A hybrid approach has been adopted including physical audit inspections (high priority premises) and gathering evidence through correspondence (lesser priority premises).										
Strategic R6 / CC R1	**Managing Major Capital Projects:** Variable approaches across the Council in the management and delivery of major capital projects to agreed objectives and budget	PROJECTS	High number of projects currently underway requires significant management and governance resource. Resources and timescales associated with bids for project funding can lead to insufficient due diligence leaving the project vulnerable to cost overruns and programme delays.	Delay to delivery of projects, overspend and increasing pressure on council reserves, reputational damage for failure to deliver projects, political pressure from members	Projects allocated to staff with experience and knowledge of Prince management techniques, all projects sponsored by senior director and regular updates with members to ensure accurate and complete position of project delivery is understood and monitored	No	A review of roles and responsibilities is being undertaken against all significant projects being monitored by the PMO. *Control stays 'red' since Q3.*	Review of projects currently being undertaken with agreement of criteria for major projects.	Completed	The PMO Dashboard and criteria for assessing significant projects was signed off by PMO Board on 19 March 2019. *Action to be removed for 2019/20, as completed and will be part of the PMO control.*	3	4	12	3	4	12	Risk stays significant. Risk has been moved from Communities & Place Directorate to Corporate Core Directorate.	2	4	8
								Implementation of Gateway process across all major capital projects	Completed	The PMO Board met for the first time on 19 March 2019. Significant projects have been categorised into Gateway stages and will require PMO Board sign-off before proceeding to the next stage. *Action to be removed for 2019/20, as completed and will be part of the PMO control.*										
					Monitoring of capital projects by the Capital Programme Board.	Yes	Capital Programmes Board undertakes monthly monitoring of the top 12 projects.	Review lessons from A52 scheme and address recommendations from A52 scheme investigation (once it is concluded).	On track	Draft actions in response to the system weakness recommendations will be considered by CLT on 23 April.										
								Improved monitoring of projects with escalation of issues where appropriate.	Completed	Significant projects are subject to monthly monitoring through CLT. *Action to be removed for 2019/20, as completed and will be part of the PMO control .*										
					Programme Management Office (PMO) in place	Yes	The PMO was set up in September 2018. Current priorities include monthly monitoring of 40+ projects on the PMO dashboard, support for the PMO Board and management of the Gateway process.	Review risk registers of all high priority projects to ensure project risks are reflected in appropriate strategic / directorate risk registers.	Some slippage	Risk management training has been delivered to 35 project / contract managers in December 2018 and 250 managers in March / April 2019. Registers of significant projects are currently being reviewed. A widening out of the list of priority projects has resulted in the task being larger than first envisaged. In the meantime, the PMO Board is undertaking deep dive reviews into projects with a change in Deliverability Confidence Assessment. *Action has changed from 'green' at the end of Q3 to 'amber'.*										
								Undertake a review of programme board governance arrangements with recommendations for implementation agreed by CLT.	NEW ACTION - monitoring to commence in 2019/20	N/A										

RISK DEFINITION					MITIGATING CONTROLS			FURTHER ACTIONS REQUIRED			RISK RATING									
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RISK REF	RISK TITLE & DESCRIPTION	RISK THEME - LOCAL ANALYSIS	RISK CAUSE	RISK EFFECT	CONTROLS IN PLACE TO MITIGATE THE RISK	Is this control still in place?	Supporting Comments	FURTHER ACTION REQUIRED	Progress with action	Commentary on progress	LIKELIHOOD	IMPACT	RISK RATING	LIKELIHOOD	IMPACT	RATING	Reason for change in Risk Rating (compared with Q3)	LIKELIHOOD	IMPACT	RATING
Strategic R7 / CR6	**Procurement and ongoing management of service delivery contracts** - Ineffective contract scoping and contract management	PROCUREMENT AND COMMISSIONING	Lack of training and capacity	Potentially significant financial, service delivery, reputational and compliance effects. Council placed in special measures and adverse effect on Council's Value for Money (VfM) rating	All major contracts are issued with support and assistance from procurement team	Yes	The Procurement Team continues to provide support & assistance with scoping.	Training staff in contract management skills	Major slippage	Once contracts are awarded the Procurement Team monitors the spend to ensure the budget is not exceeded. However, day to day contract management responsibility remain with the Contract Manager. Council's current training structure does not include Contract Management. This action will be discussed at the Risk Surgery on 8th April 2019. *Action remains 'red' since end of Q3.*	3	4	12	3	4	12	Vacancies in Procurement Team have been filled allowing Category Managers to increase the level of advice for contract scoping - so contract scoping should improve. Contract management still remains the main risk.	2	2	4
					Regular review of the Directorate Contracts Register by DLTs (Category Managers highlight non-compliant contracts and contracts in need of Procurement or action)	Yes	Reviews continue at Department Leadership Teams and control remains in place.													
					Procurement eLearning available on the DCC intranet (also covers some elements of contract management)	Yes	eLearning remains published.	Regular review of strategic contracts by Corporate Leadership Team (CLT)	Completed	The first report has been to CLT. *This is an ongoing activity - moved to controls*										
					Regular review of strategic contracts by Corporate Leadership Team (CLT): to highlights the highest risk/most significant non-compliant contracts held by the Council. *Control was previously an action*	Yes	*Completed action moved to controls.*	Recruitment to fill vacancies or to resource new structure if approved.	Completed	Recruitment is completed and vacancies have been filled. Resources will be in place by the 8th of April. *Action to be removed for 2019/20.*										
Strategic R8 / CR7	**Data and records management** - Poorly defined records management systems and processes	DATA	No corporate records management framework. Historic lack of investment in system controls including user access.	Inefficiencies from time taken finding material. Poorly informed decision-making. Data breaches leading to ICO fine and reputational damage.	Audits of key systems: IG team support process reviews and audits of key systems after a data breach or rectification request	Yes	Lessons learned' are implemented after any data breaches and actions, identified as part of audits of key systems, are managed. A significant system change in Liquid Logic seems to have eradicated breaches of a certain type.	Review on "Inform/Consult" workshop findings and subsequent recommendations from the independent contractor	Some slippage	The Business Classification Scheme and Records Management Policy created by Inform Consult are being reviewed internally before sign off. It is anticipated that this will happen in early 2019/20 but has slipped slightly due to higher corporate priorities. There will need to be a follow up action plan to ensure that implementation is done in a clear and efficient way. *Action has deteriorated from 'green' at the end of Q3 to 'amber'.*	3	3	9	3	3	9	Risk is expected to improve once an action plan is devised (post a review of the Inform/Consult workshop findings) and starts getting embedded in business as usual.	2	2	4
					Each Service has an Information Asset Owner (IAO) - and together they form the Information Governance Working Group (IGWG). They report any risks and issues associated with their information assets to the IG board.	Yes	The Information Governance Working Group (IGWG) is working on an on-going programme of targeting Information risks and government standards. The Data Protection Officer has issued a briefing note to the group escalating the lack of engagement on IG and GDPR related tasks.													
					Nominated Systems have management/data quality groups	No	Control is no longer valid. *To be removed from Q1 2019/20 onwards.*													
					Training programme on Data Protection Policy and processes	Yes	Completion rate for GDPR and Cyber Security eLearning is approximately - 88% for staff and 73% for Councillors. Enforcement of training completion via Heads of Service continues. Stringent non-compliance penalties will be considered in the coming months. The Information Governance team has organised further informal drop in sessions (not formal training sessions) throughout 2019.The drop in sessions are intended to cover all GDPR and data protection queries.													
					Robust data breach reporting and follow through.	Yes	A robust data breach reporting process is in place and 'lessons learned' are implemented. A significant system change in Liquid Logic seems to have eradicated breaches of a certain type.													

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Strategic R9 / CR8	**Health and Wellbeing -** Increased workload pressure on staff	STAFF	Budget cuts, loss of workforce and retained levels of expected delivery	Increased sickness levels (including stress), failure to deliver service statutory duties, decreased staff morale, potential for EL claims - potential pay-out	Health and Well-Being Strategy implemented	Yes	The Council has trained over 100 Mental Health First Aiders (MHFAs), and a review of their impact is underway, with an update report scheduled to CLT. People Services are promoting MHFAs with the aim of increasing the number within the directorate. Monthly reports submitted to Strategic Directors with actions identified to improve attendance, monitoring reports sent to CLT.	Specific actions to focus on mental health / reducing impact of stress including Mental Health First Aider	Completed	Action is completed. Further Mental Health First Aiders will be trained. Publicised via iDerby, on AV Boards. More staff continue to be trained as MHFAs. *This is an ongoing activity - moved to controls*	3	4	12	3	4	12	Risk stays significant. New Mental Health First Aiders are now available if needed and sickness targets have been set. Monitoring of sickness hotspots continues but risk stays the same.	1	4	4
					Regular monitoring of sickness absence levels by CLT and DLTs. Management responsibility for monitoring and managing workload of team colleagues	Yes	Attendance management update is reported as a standing item on Personnel Committee agenda. Attendance Management project group has directorate senior management representation. Line managers continue to have responsibility for monitoring and managing the workload of their team colleagues.	Monitoring of sickness hotspots with targeted interventions to support a gradual reduction of stress related absence	Some slippage	Target changed to 11.5 approved by Cabinet as part of the target review at Q2. The Q4 figure of 12.7 FTE days lost shows a small decrease on the outturn on quarter 4 in 2017/18, which was 12.8 days lost. The current position at Q4 by Directorate is: - Communities and Place – 11.95 days lost - Corporate Resources – 11.08 days lost - Corporate Core – 2.05 days lost - People Services – 13.18 days lost Some slippage has been assigned, as although actions/controls are in place these have not yet had an impact on current sickness levels related to stress. *Action has improved from 'red' at the end of Q3 to 'amber'.*										
					Mental Health First Aiders (MHFAs) available to provide information and sign-posting to staff *Control was previously an action*	Yes	*Completed action moved to controls.*	Overall targets for sickness absence to be agreed (including individual director targets).	Completed	Attendance targets have been set with Service Directors for the next 3 financial years, starting 01/04/19. Performance targets will be included in managers objectives, as part of the Great Performance Conversations, from 01/04/19. *Action to be removed for 2019/20.*										
								DLTs to monitor on a quarterly basis the number of stress risk assessments completed by HOS area	Some slippage	This action needs to carried forward to the financial year 2019/20, whilst we have a process in place further reassurances are required on how this is being implemented and monitored across directorates. Action will move to Controls when the first monitoring has started.										
Strategic Risk 10 / People R1	**Demand Management -** Inability to manage demand within the approved budget	BUDGET	Short term focus on financial prioritisation; Social and economic factors such as increased migration and asylum, longer life expectancy, higher levels of disability, greater levels of need.	Higher number of placements required beyond LA capacity leading to major budget overspends	Discussions at Strategic level with services outlining justification for budget structure	Yes	Ongoing and focussed fortnightly budget meetings take place and span across a range of priorities within CYP services (particularly focussing on placements and demand pressures).	Work with partners through DSCB Demand Meetings to support local decision making and a city-wide understanding of demand	On Track	Local area partners are developing an improvement plan, following our Joint Targeted Area Inspection (JTAI), which will include actions on how partners collectively address the capacity challenges of individual agencies. This will include a review and refresh of local authority front door arrangements. Partnership demand meetings will continue alongside this to ensure we continue to consider key themes that impact across the 'system' (i.e. large families and contextual safeguarding).	3	4	12	3	4	12	Risk remains significant despite the controls in place. Actions remain ongoing.	2	4	8
					Close liaison with responsible Cabinet member to ensure Social Care given appropriate focus when reviewing MTFP	Yes	Budget approved for 2019/20 giving priority additional investment for People Services.														
					Established Learning and Improvement Framework, with monthly audit activity to make sure thresholds are correct and interventions are in line with children, young people and family's needs	Yes	Q4 Thematic Audits completed: • Parents open to Adults social care • Feb – pre birth • March – single assessment and plans Audits routinely shared at SIF improvement board - HOS for Safeguarding / Integrated and specialist service respond to recommendations made.														
					Close working relationship with Service Managers, Directors, Finance and BI colleagues with a view to share information on demand levels, accurately account for spend, account for the services already being delivered, and ensure future budgets reflect the current position.	Yes	Close working relationships continue.														
					Regular senior management scrutiny on spend and commissioned placements	Yes	The scrutiny happens at the fortnightly meetings. Only Strategic Directors can approve high cost placements.	Undertake 'deep dive' performance reviews, in linked areas, to support strategic understanding and on-going management of demand and the impact of this on our budgets	On Track	There is a meeting scheduled for 2 May 2019 to commission further deep dive work on current drivers of demand. Furthermore, Derby hosted colleagues from Nottingham City and Leicester City at the end of April 2019, to support a review of our plans for addressing the sufficiency of carers and placements for our looked after children and young people, which is impacting on budget pressures.										
					Review placement approval authorisations levels for certain needs	Yes	Only Service Director can approve placements for certain needs. This control will remain in place until the budget is back in a manageable position.														
					Weekly budget monitoring on the high risk budget	Yes	Continue to monitor placements on a weekly basis.														
					Staffing Establishment Control - No automatic recruitment of vacant posts without Strategic Director's approval	Yes	All recruitment considered by Strategic Director.														

RISK DEFINITION					MITIGATING CONTROLS			FURTHER ACTIONS REQUIRED			RISK RATING										
						Quarter 4 2018/19 Review			Quarter 4 2018/19 Review		Q3 2018/19			Q4 2018/19				TARGET			
RISK REF	RISK TITLE & DESCRIPTION	RISK THEME - LOCAL ANALYSIS	RISK CAUSE	RISK EFFECT	CONTROLS IN PLACE TO MITIGATE THE RISK	Is this control still in place?	Supporting Comments	FURTHER ACTION REQUIRED	Progress with action	Commentary on progress	LIKELIHOOD	IMPACT	RISK RATING	LIKELIHOOD	IMPACT	RATING	Reason for change in Risk Rating (compared with Q3)	LIKELIHOOD	IMPACT	RATING
Strategic Risk 11 / CC R4	**Risk of impact of No-Deal Brexit at a local level**	LEGAL	Uncertainty over national decision making process and expected exit from the EU.	Risk of increased community tensions and possible disruption to services and access to some goods / services. Financial risk due to increased demand for services due to recession and loss of EU funding. Risk to recruitment and retention of EU nationals in some services following transition period. Risk of failure to deliver statutory requirements in light of changing regulatory laws and processes. Risk of failure to communicate effectively with those affected by Brexit in the local area.	Brexit working group in place and meeting weekly to assess any new intelligence / guidance. Ongoing participation in the Local Resilience Form (LFR).	Yes	The group includes our emergency planning leads from LRF.	Ongoing monitoring of the Brexit preparedness issue and risk log in light of No Deal	On Track	The issue and risk log is restricted but is being shared with key leads to ensure preparedness . There are currently 28 risks which are being mitigated against.	2	3	6	2	3	6	Risk stays the same. Business Continuity plans have been updated to ensure they are accurate and up to date. 'No deal' risk and issue log (with 28 risks currently being mitigated) reviewed and monitored every week.	1	4	4
					Business continuity plans (BCPs) in place with up to date contacts and communications leads in place	Yes	BCPs have been updated during February and March 2019 to ensure they are accurate and up to date.													
Strategic Risk 12 / C&P-R7	**Sinfin waste plant -** Failure to deliver overall project	PROJECT MANAGEMENT	Refer to Project Documentation	Higher costs of waste disposal; risk of having to pay compensation to contractor	Regular partnership meetings: Regular meetings with the contractor representatives, legal advisors and briefings to members	Yes	Partnership meetings continue. Recent meetings with Derbyshire County Council and the contractor have resulted in a revised operation date. A report has been sent to Cabinet seeking further advice.	At present we need to allow the contractor to move into the testing phase and our technical experts to carry out the review required.	Major slippage	Independent Certifier's review is still ongoing. New completion date to be confirmed. *Action remains red since Q3 end.*	3	4	12	4	4	16	Risk has been escalated from Directorate level due to the potential financial implications of a high compensation payment. Project Team continues to monitor the situation closely as the operation date has been revised. A report has been sent to Cabinet seeking further advice.	2	4	8
					Independent technical review of compliance and independent legal advice commissioned	Yes	Legal advice continues to be solicited. Independent technical review of compliance is ongoing.	Contingency planning for the disposal of waste	Major slippage	2 WM facilities are online and can be used when needed. Contingency planning is still being worked through as it is dependent on the project outcomes. *Action status has changed from 'green' at the end of Q3 to 'red'*										
Strategic Risk 13 / C&P-R11	**Delivery of A52:** Delivery of the A52 programme by end of Summer 2020.	PROJECT MANAGEMENT	Designs and cost estimates need to keep pace with the building of the new highway and road scheme and the deployment of the new footbridge.	Financial impact is low due to existing cost envelope. Further reputational damage with external stakeholders if scheme is delayed.	Regular review by Corporate Capital Programme Board	Yes	Board meets quarterly and undertakes monthly monitoring.	Finalise design for scheme and revised costings	Major slippage	Project budget for delivery of the whole scheme is due to go to Cabinet on 10 April 2019 for approval. A progress update on this action will be provided at Q1.				4	4	16	Risk has been escalated from Directorate level with the re-assessment of the impact. Original risk has been re-defined.	2	4	8
					Monthly review by Project Board	Yes	New Senior Responsible Officer (SRO) for Project Board has refreshed the board membership to include the main contractor.	Retention of independent technical experts to provide assurance on design	NEW ACTION - monitoring to commence in 2019/20	N/A										
					Regular review of Project Governance arrangements to improve project management and ensure project delivery	Yes	A new Project Director has been recruited.	Retention of independent technical experts to provide assurance on Contract Management	NEW ACTION - monitoring to commence in 2019/20	N/A										
					Monthly monitoring and reporting to PMO board	Yes	Monitoring is in progress and 1st report has been presented to the board.	Address system weaknesses identified by internal audit	NEW ACTION - monitoring to commence in 2019/20	N/A										