Risk Description					Mitigating Controls			Further Actions									Rating			
			Ţ					Quarter 2 2018/19 Review			Quarter 2 2018/19 Review		018/19 Rating		ik <u>Q2</u> 2018/19 Risk Rating					ARGET k Rating
RISK REF		K TITLE & SCRIPTION	RISK THEME - LOCA ANALYSIS	RISK CAUSE	RISK EFFECT	CONTROLS IN PLACE TO MITIGATE THE RISK	Is this control still in place?	Comments?	FURTHER ACTION REQUIRED	Have these actions been taken?	Commentary on progress (please also include details of any new actions that need to be taken and added to the log)	ыкец Ноор	VCT	g	ПКЕП		-	If the Risk Rating has changed since Q1, please provide a reason for this change		IMPACT RISK RATING
						Management controls across the organisation to		Quarter 1 - Stress policy has been refreshed and managers encouraged to complete stress risk assessments at least annually Quarter 2 - Mitigating controls as Q1	Strategic decision making through MTFP recognising pressures where appropriate with greater consideration to understand effects of decisions.	on track	Quarter 1 - Pressures collated and discussed at MTFP discussions/Directors workshops. Quarter 2 - Discussions re budgets and pressures continue to be addressed by DMTs and CLT									
Strategic R1 / CR 1	and	ffing – capacity, skills I knowledge reasing demands on titing 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	sickness reliance on temporary statt	review staff stress levels and identify concerns prior to sickness becoming apparent.	yes a		Corporate review of resilience with regular analysis of hotpots	major slippage	Quarter 1 - No analysis conducted Quarter 2 - No analysis conducted in Q2. More focussed work in Q3 will be carried out to finalise analysis and plan actions to try to address hot spots. This action has been re-classified from 'amber' to 'red' as no analysis has yet commenced	2	4	8	3	4	ri ir 12 ri ti ti	Major slippage on resilience hotspot analysis with no analysis conducted in Quarter 2. Further review of the departmental risk registers shows that this is highlighted as a risk	1	4 4
				good will of staff.	sanctions and fines.	Ability to recruit temporary staff in the event of high demand, subject to funding availability.	yes		Targeted work to address resilience hotspots including market supplements, workforce development and succession planning	minor slippage	Quarter 2 - Market supplement policy in place for hotspot areas. Workforce Development Strategy being compiled with strategic review by Chief Executive. This action has been re-classified from 'green' to 'amber'.							at departmental level as well.		
								Quarter 2 - Mitigating controls as Q1	Training for all managers on health and well-being approaches and stress management.	on track	Quarter 2 - Approximately 500 managers have attended Managing Health, Wellbeing and Attendance training, and 340 have attended Stress Management Training									
icR2 / CR2	Stru Chai	ior Management ucture - inges in structure	DERSHIP	Significant number of management positions either vacant or covered on interim basis leads to uncertainty of direction of travel or decision making.	uncertainty over long term position and	Interim post holders in place.	yes	Quarter 1 - Some interim posts have now been filled on a permanent basis Quarter 2 - No new controls - on-going permanent recruitment should replace this control	Monitor effect of uncertainty on staff morale	minor slippage	Quarter 2 - Majority of Service Director roles now recruited to on a permanent basis and reduction in number of interim arrangements Action remains classified as 'amber'	2	3	6	2	2	4	Interim posts have progressively been replaced with permanent roles, final permanent	1	2 2
Strateg	lead	d to uncertainty	LEAG			New structure being implemented with increased pace, maintaining BAU where possible with key decisions taken by Chief Officer Group position holders as appropriate	yes	Quarter 1 - Phase one almost complete. Phase 2 subject to personnel committee in September. Quarter 2 - Phase 2 progressed well in Q2 and final permanent Service Director recruitment in Phase 2 is underway	Clear and consistent messages continue to be shared with staff and structure changes.	on track	Quarter 2 - Chief Executive and CLT have issued updates throughout the recruitment to senior posts Propose this action becomes a control?, as is now business as usual as part of the KIT bulletins							Service Director recruitment underway.		
Strategic R3 / CR3	Risk disru Cou esta Pote outa	er security - c of serious service uption across the uncil's entire IT ate. ential for extended IT ages and significant a loss.	SYSTEMS	Historic lack of investment in IT; failure and/or unwillingness to maintain systems at most current release and constantly changing threat landscape.	Increased potential of cyber incident leading to significant business disruption and potential data corruption. Potential fines from the ICO and reputational damage.	Perimeter security - firewalls etc. Anti-malware software. PC patching programme. Incident response procedures. New post of IT Security Officer. Prioritising system upgrades where budget available. Compulsory cyber security training.	yes	Quarter 2 - Mandatory GDPR and Cyber Security eLearning for all appropriate staff/Cllrs is ongoing. At 02/10 60% had completed, 7% were in progress and 33% not yet started.	To support the cyber security agenda, a continued push for GDPR and Cyber Security eLearning completion is required from all services.	on track	Quarter 2 - Continued engagement throughout the Council is premise to successful completion of GDPR and Cyber Security eLearning - reducing the risk of reportable breaches to the ICO for a decision Work is ongoing to identify toolset that can assist in software patching and enhanced auditing capabilities in order to improve knowledge and monitoring of systems and network security.	3	3	9	3	3		Risk Rating has not changed	3	2 6
						NEW - Continual monitoring and refinement of defences and response arrangement (moved from an action in Q1 to a control for Q2)	yes	Quarter 2 - Cyber security awareness training as above. Patching regimes are being continually improved.	Strategic involvement in budget priorities for cyber protection.	on track	Quarter 1 - Funding has been identified for ongoing improvements Quarter 2 - update as at Q1.									

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		AL					Quarter 2 2018/19 Review			Quarter 2 2018/19 Review		2018/19 Rating			18/19 Rating		<u>TARGET</u> Risk Ratin	
RISK REF	RISK TITLE & DESCRIPTION	RISK THEME - LOC ANALYSIS	RISK CAUSE	RISK EFFECT	CONTROLS IN PLACE TO MITIGATE THE RISK	Is this control still in place?	Comments?	FURTHER ACTION REQUIRED	Have these actions been taken?	Commentary on progress (please also include details of any new actions that need to be taken and added to the log)	ыкец Ноор	IMPACT	RISK RATING	НООР	RISK RATING	If the Risk Rating has changed since Q1, please provide a reason for this change	LIKELI HOOD	IMPACT RISK RATING
Strategic R4 / CR4			Budget restrictions require proportionate consideration of future allocations to ensure delivery of services or a reduction or cessation of		Senior officers taking ownership of MTFS and understanding implications for Council	yes	Quarter 2 - The MTFP process is experiencing some slippage as although there is an awareness of the numbers at a senior level and an understanding of the implications - it is becoming increasingly difficult to identify a range of options to close the identified gap.	Continued monitoring of plan development and changing circumstances and effect on budget and timely feedback	minor slippage	Quarter 2 - Currently there is minor slippage but October is a crucial month to get a range of options to close the budget gap agreed and incorporated into the consultation process. The first set of proposals (related predominantly to People Services) were taken to Cabinet on 24 October with a further set of proposals due to be presented in December 2018. The classification of this action has slipped from								
	MTFP - Delivering the Medium Term Financial Plan for the authority	BUDGET	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.	Failure to strategically plan long term finances exposes potential for unidentified expenditure adding additional pressure on financial structure and jeopardising the financia sustainability of the council.	Working with departments to fully understand budget position to ensure complete planning and ongoing monitoring.	yes	Quarter 2 - The timetable - although being planned and monitored is experiencing slippage as there are insufficient options being identified to close the MTFP gap. The timetable has been updated to accommodate extra meetings with both CLT and Cabinet required to pull together further alternative savings options to meet the estimated funding gap. The timetable has been reconfigured to accommodate this - but this will not impact on current plans to send a budget report to Feb 2019 cabinet meeting	NEW ACTION - The Chief Executive has asked all directors to put forward further proposals to meet the £9m savings target. This will be reviewed by CLT and Cabinet before the end of October.	minor slippage	The Chief Executive has intervened to meet the £9m savings target allocated by the Sec151 officer. New proposals are expected by 19th October at the latest in order to provide options to balance the budget. Further discussions are taking place with Cabinet.	2	4	8	3	4 12	Risk Rating has increased to reflect slippage on the MTFP timetable and the significant gap that remains to balance the Council's budget.	1	4 4
		~	Lack of capacity and resources to	Council will be in breach of statutory obligations and duty of care by	Health & Safety / compliance assurance now firmly embedded as a key objective in Property Team's Business Plan.	yes		A Property Compliance Improvement Plan will be developed by September 2018 to refocus responsibility and resources within the newly integrated Property Department	completed	Quarter 2 - Third action planning workshop held on 25th of Sep, actions and priorities for improvement now established. Plan has been developed and now needs to be delivered on.								
Strategic R5 / CR5	Statutory Compliance and Property Health & Safety	HEALTH AND SAFET	maintain and manage our land, building and facilities Failure to operate safe systems for the use and occupation of buildings, including management of events	compromising health and safety of people. May result in injuries/loss of life, disruption to service provision and damage to property assets.	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	Quarter 1: The lead responsibility for developing an assurance framework had been assigned to the Head of Service Facilities Management. Quarter 2: Controls still in place	NEW - Delivering on the Property Compliance Improvement Plan	N/A - new with monitoring to commence from Q3	monitoring to ommence from N/A		4	12	3	4 12	Risk Rating has not changed	2	4 8
								A review and development of policies and guidance for all services and teams responsible for operating buildings and managing events.	N/A - action to be removed, as is duplication	This action is covered by the Improvement Plan - proposed to delete this.								
					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	yes	Quarter 1 - Major capital projects have been reviewed to ensure there is appropriately experienced staff in place to lead and manage each project. Quarter 2 - No change to Q1 position.	Review of projects currently being undertaken with agreement of criteria for major projects.	on track	 Quarter 1 - A detailed review of projects has been undertaken to develop a long list. Further work will be undertaken during the October and November to prioritise these projects by impact, value and deliverability. Quarter 2 - A small working group of cross-directorate reps has been formed to lead this process; actions presented at Q1 remain also in progress. 	-							
ategic R6 / C&P R1	Managing Major Capital Projects: Managing major capital projects effectively to ensure delivery of agreed objectives and	PROJECTS	Variable approaches across the Council in managing 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	Delay to delivery of projects, overspend and increasing pressure on council reserves, reputational damage for failure to deliver projects, political pressure from members	Monitoring of capital projects by the Capital Programmes Boards.	yes	Quarter 1 - Capital projects are monitored regularly but this has not proven effective in all cases. Quarter 2 - No change to Q1 position	NEW - Implementation of Gateway process across all major capital projects.	minor slippage	Quarter 2 - The Gateway process was designed in Autumn 2017 and has been piloted. Further work is taking place to review the guidance and accountabilities before roll out across all projects. It is expected this will take place by December 2018 driven through the PMO.		4	12	3	4 1	Risk Rating has increased	2	4 8
Stra	budgets		due diligence leaving the project vulnerable to cost overruns and programme delays.		NEW - Project Management Office in place (moved from an action in Q1)			Review lessons from A52 scheme and address recommendations from A52 scheme investigation (once it is concluded).	on track	Quarter 2 - Once the investigation is concluded, lessons learnt will be evaluated and recommendations taken forward.								
						yes	Quarter 2 - The Chief Executive assumed responsibility for the PMO. Set up on 1 September, this is located within the Performance and Intelligence team 1 September 2018. The scope and priorities were agreed by CLT on 25 September 2018.	Improved monitoring of projects with escalation of issues where appropriate.	on track	Quarter 2 - All major projects will be monitored by the PMO with evidenced tracking of business cases, budget, outputs and outcomes. It is expected a provisional PMO report will be in place for quarter 2 by November 2018 - comment remains in line with Q1, with the deadline being delayed slightly from October to November.								

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		ONING			All contracts are issued with support and assistance from procurement, management passed onto service client team with oversight at board level from strategic sponsor. Additional investment in procurement team. Change to contract procedure rules to enable greater focus on high value contracts / category management.			Training staff in contract risk management skills should be considered to further mitigate this risk	major slippage	Quarter 2 - Resource has not been available to provide any training. The classification of this action has changed from 'amber' to 'red' -impacting on overall risk score									
strategic R7 / CR6	Procurement and ongoing management of service delivery contracts	1ENT AND COMMISS	Lack of training and capacity to ensure those responsible for contract scoping, procurement and management are suitably confident and experienced to proactively manage / monitor delivery.	contract management processes found to be inadequate, increased stress / sickness of staff, failure of contract, failure of service delivery. failure of		yes	Quarter 2 - Additional investment has not yet been approved. Currently experiencing a high level of funded project work requiring multiple procurement processes.	Development of strategic contracts library	major slippage	Quarter 2 - Resource has not been available to start this project. The classification of this action has changed from 'amber' to 'red' -impacting on overall risk score	3	3	9	3 4	12	Risk has increased due to increase in backlog of work due to high level of project work and staff holidays/vacancies	2 2	4	
		PR OCUREN						NEW - Recruitment to fill vacancies or to resource new structure if approved.	monitoring to	Additional funding will be required if new structure is approved. The filling of existing vacancies has been delayed whilst that decision is taken. Return to work of two post holders currently on maternity leave will not be complete until January 2018.									
			No corporate records management framework. Poorly defined processes. Historic lack of investment in system controls including user access.		Audits of key systems.	yes	Quarter 2 - Control still in place. Information Governance work with services to identify process issues and improvements when inaccurate information is identified through either a breach or a rectification requests.	Secure records management expertise to support a review of existing arrangements starting with the OpenText installation.	on track	Quarter 1 - Independent review of Open Text complete. The recommendations will form the basis of the Improvement Plan. Further support to be commissioned. Quarter 2 - Expertise secured through 3rd party contract and work now commenced.									
Strategic R8 / CR7	Data and records management - Risk of error or wrong decisions due to poor, or incomplete, records	DATA		Inefficiencies from time taken finding material. Incomplete records. Data from systems used to support decision making may not be robust. High levels of data breaches. Potential fines from the ICO and reputational damage.	Management and data quality groups in place for nominated systems. New security posts in IT division. Separated existing Quarter 1 control to track and log comments efficiently	yes	Quarter 2 - Control still in place. Information asset owner (IAO) roles assigned/reviewed as part of the GDPR implementation process. Maintaining up-to-date information inventory is a key focus of the new Information Governance Working Group which will report directly to information governance board. The IAO and system owner roles and responsibilities will also be emphasised through the metals system project and the document management review.	NEW - Commissioning of the "Inform / Consult" consultancy contract to enable a robust way forward for data and records management	completed	Quarter 2 - The commission will produce the way forward for - Business Classification Scheme, Records Management Policy, and Access Control Policy, and will form the Council's future Information Strategy, and the actions to address this. "Inform/Consult" involves a high degree of collaboration from Heads of Service and Service Managers.	2	3	6	2 3	3 6	Risk Rating has not changed	2 2	4	
					Robust data breach reporting and follow through. Separated existing Quarter 1 control to track and log comments efficiently	yes	Quarter 2 - Control still in place. IS policy is now in place and has been well received - this instils a strict reporting process for breaches; process is under review to provide staff with further support and guidance. Significant internal corporate communications have been distributed to promote the process and the 24 hour deadline. Follow-up work is undertaken for all personal data breaches.	NEW - "Inform/Consult" consultation workshops are being scheduled between 19 October 2018 and the end of November 2018 and will need representatives from each department to attend	N/A - new with monitoring to commence from Q3	Quarter 2 - Progress on the consultation/review to be fed into the IG Board, who are the key stakeholders.									

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		OCAL				Quarter 2 2018/19 Review				Quarter 2 2018/19 Review	-	Q1 2018/19 Risk Rating		sk <u>Q2</u> 2018/19 Risk Rating		If the Risk Rating has		RGET Rating		
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			Increased pressures on staff as a result of budget cuts, loss of workforce and retained levels of expected delivery		Health and Well-Being Strategy implemented	yes	Quarter 1 - over 500 managers have been trained on the health and well-being strategy and stress management. Quarter 2 - Training to be made available to new managers on a rolling basis.	Specific actions to focus on mental health / reducing impact of stress - Mental Health First Aider, Stress Risk Assessments etc.	on track	Quarter 2 - Training for Mental Health First Aiders began in September. Terms of reference to be developed for the First Aiders in Q3. It should be noted that 'stress risk assessments' have been added to the description of this action and removed as a 'control'.										
Strategic R9 / CR8	Health and Wellbeing Ongoing impact of high levels of sickness absence across the organisation	STAFF		Increased sickness levels (including stress), failure to deliver service, statutory duty, decreased staff morale, potential for EL claims - potential pay- out	NEW - Regular monitoring of sickness absence levels by CLT and DMTs.	yes	Quarter 2 - Health and Wellbeing Team presenting regular reports on absence levels to DMTs and CLT Performance Board on a monthly basis.	NEW - Monitoring of sickness hotspots with targeted interventions to support a gradual reduction of stress related absence (Moved from a control to an action for Q2)	minor slippage	Quarter 1 - Work is taking place in key areas such as Adult Social Care and Streetpride Quarter 2 - No evidence of any ongoing activities This action / control has been amended from 'green' at the end of Q1 to 'amber' at the end of Q2.		4	8 2	2 4		Risk Rating has not changed	1 4	4 4		
								Overall targets for sickness absence to be agreed (including individual director targets).	on track	Quarter 1 - Review of targets commissioned by CLT on 21/8/18. Planned for launch in April 2019. Quarter 2 - no change from the position reported at the end of Q1.										
								NEW - DMTs to monitor on a quarterly basis the number of stress risk assessments completed by HOS area	N/A - new with monitoring to commence from Q3	N/A										
c Risk 10 / People R1	Ability to manage demand to avoid significant overspends in budget. Short term focus on	BUDGET	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	Quarter 1 - Challenge, action planning and review of budget issues at weekly DMTs. Agreed MTFP priorities in place and targeted meetings in high pressure areas (i.e. CYP demand and children in care) Quarter 2 - Work remains on-going as part of the budget proposals with engagement of all key stakeholders	Maintain close working relationship with all interested parties	on track	Quarter 1 - Well established relationships, with discussions focused on priority areas. Quarter 2 - Work remains on-going as part of the budget proposals with engagement of all key	3	4	12 :	3 4	12	Risk Rating has not changed	2	4 8		
Strategic	financial prioritisation.		 disability, greater levels of need. 		Close liaison with responsible cabinet member to ensure social care given appropriate focus when reviewing MTFP		Quarter 1 - Regular Cabinet Member Meetings - where pressures and priorities are both considered. Quarter 2 - Action remains in place			budget proposals with engagement of all key stakeholders.										