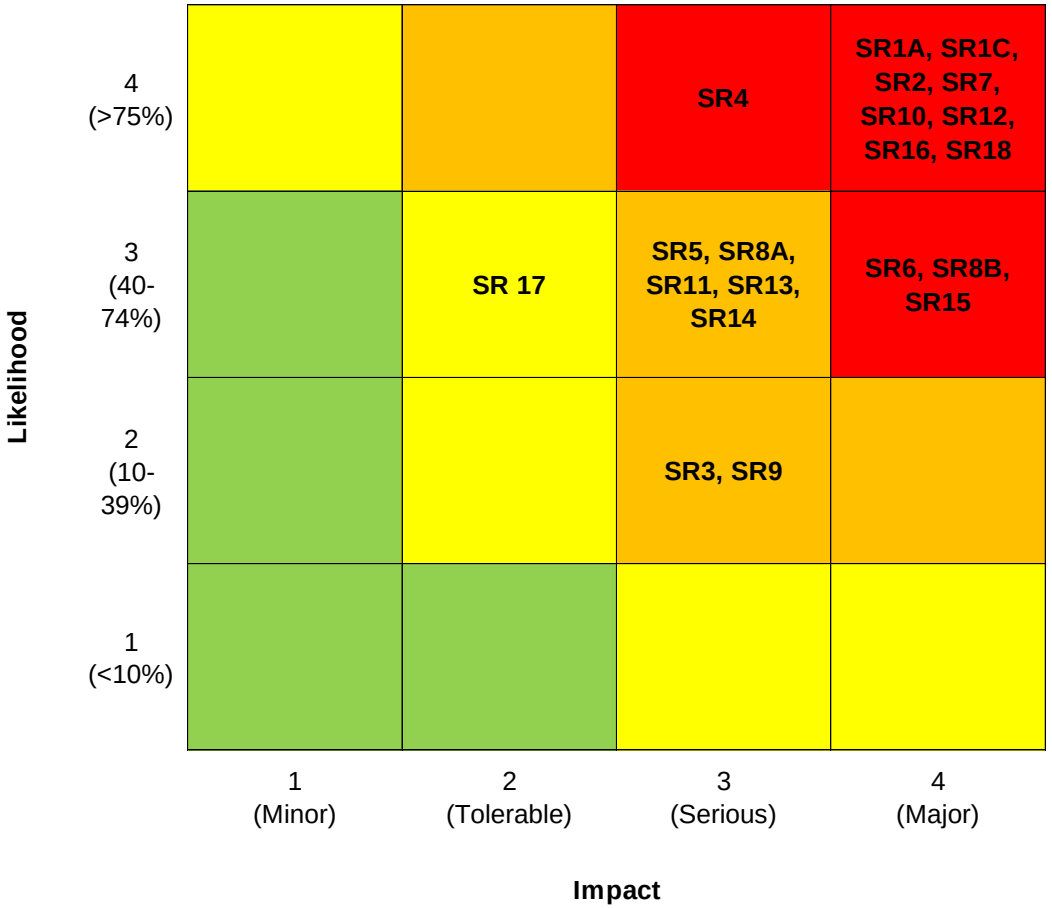
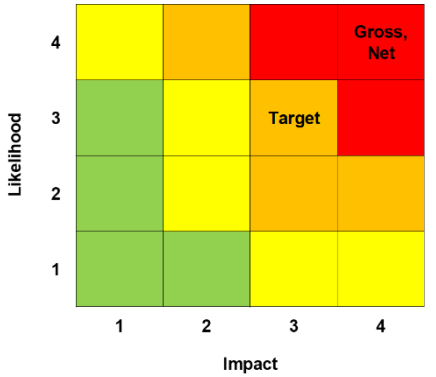
Risks in green are new for Quarter 2

Ref	Risk	Q1 Net	Q2 Gross	Q2 Net	Travel	Target
SR1A	Increased Demand for Adult's Services	16	16	16	↔	9
SR1C	Increased Demand for Children's Services	12	16	16	↑	9
SR2	NHS Funding	16	16	16	↔	12
SR3	Failure of Financial Management and Control	9	16	6	↓	6
SR4	Information Security and Cyber Threat	12	16	12	↔	12
SR5	Business Continuity	9	12	9	↔	9
SR6	Organisational Capacity and Demand	12	16	12	↔	12
SR7	Failure of Council Funding	12	16	16	↑	9
SR8A	Governance and Decision Making	9	16	9	↔	4
SR8B	Political Uncertainty	12	12	12	↔	6
SR9	Capital Projects - Place	6	16	6	↔	6
SR10	HS2 Infrastructure Investment	16	16	16	↔	6
SR11	Pandemic Virus	9	12	9	↔	6
SR12	Fragility and failure in the Social Care Market	16	16	16	↔	9
SR13	Reputation	9	16	9	↔	9
SR14	Climate Change (CEC Carbon Neutral 2025)	9	16	9	↔	6
SR15	Failure of the Local Economy	9	16	12	↑	12
SR16	Integrated Care System (ICS) Integration	16	16	16	↔	8
SR17	LPA Modernisation Plan	-	12	6	n/a	TBC
SR18	Delivery of the JTAI Improvement Plan	-	16	16	n/a	12



	Critical Risks - Only acceptable in the short to medium-term, requires immediate action implementing and close monitoring
	Material Risks - Areas of concern, but due to capacity and or uncontrollable external factors, these can be accepted. Expectation is that these must be actively managed with on-going monitoring to ensure they don't escalate
	Moderate Risks - Acceptable level of risk only requiring on-going monitoring to ensure they don't develop into something more serious
	Negligible Risks - Lowest level of risk, only kept in the register for completeness and to ensure there are no unexpected changes in the profile

Greater weighting is given to impact over likelihood because we are more worried about a 10-39% chance of a serious event, than a 40-70% chance of a tolerable one

Risk Name: Increased Demand for Adult Services	**Risk Owner:** Executive Director of Adults, Health, and Integration
Risk Ref: SR1A	**Risk Manager:** Executive Director of Adults, Health, and Integration
Risk Description: An increase in demand for adult social services that cannot be met within the existing budget Since the COVID-19 pandemic the demand for adult social care has increased in both volume and complexity. There is currently a historically high demand for services from young adults right through to the elderly. This has been caused by an overall decrease in national adult health and wellbeing. Detailed consequences: A failure in one area of social care, either internal or external to the council, has knock-on effects and increases pressure on other services. This can cause an on-going downwards trend in adult health and wellbeing. In addition, the council may fail in its duty of care and its objective of supporting its most vulnerable individuals. Specific failures that have been seen are a reduction in preventative measure and early intervention, which ultimately increase demand. Increased pressure on practitioners causes stress related issues and reduces the appeal of working in the sector. Detailed causes: Due to the additional wellbeing pressures placed on residents, council staff, third-party providers and the NHS, the volume and complexity of demand for adult services has increased materially. As have political factors such as changes in legislation and resettlement agreements. Due to several different socio-economic factors recruitment and retention of staff is difficult resulting in increased use of agency staff.	
Interdependencies (risks): NHS Funding Pressure, Financial resilience, Fragility in the social care market	
Comments this quarter: No change to the risk, still at the highest possible rating. We are seeing the impacts of inflation impacting on demand for Care, families are increasingly turning to Adult Social Care to offer support when they are no longer in a position to offer this support. The pressure on the system to discharge from Acute hospital care together with a shortage of available care in the market is resulting in waiting lists and the subsequent frustrations that families feel. Individuals waiting for hospital interventions are seeing their independence begin to fail and as such are turning to Adult Social Care for support whilst awaiting their operations especially those waiting for hip and knee surgery. Providers report staffing shortages and difficulties maintaining stable structures. The difficulties of recruitment and retention of staff is having an impact across Adult Social Care, resulting in the increased use of agency staff across the whole service. Due to the challenges of managing the budget consideration will need to be given to the creation of waiting lists for assessments this risks reputational damage to the council and an increase in complaints and LGO investigations.	
Actions (Monitoring):	
ASC/ Commissioning and Communities, together with Public Health one Directorate continuing to work jointly to respond to challenges pertaining to prevention, health inequalities and our workforce.	
ASC/Commissioning and Communities developed a Standard Set of Fit for the Future Contracts – that set out specific measurable outcomes pertaining to each service area in driving prevention and key performance indicators that test the providers ability to retain a viable and sustainable business in responding to a population of changing need – higher levels of resident satisfaction and improved control.	
Continue to monitor and review preventative and support service activity.	
Continue to develop improved monitoring of people's outcomes	
Improved utilisation of public health JSNA and wider regional data sets informing future commissioning plans.	
Develop engagement with community groups and 3rd sector.	
Strengthen liquid logic and contract solutions to better map trend and demand.	
To monitor and review thresholds and gatekeeping processes.	
Review and strengthen partnership working with wider agencies.	
Restructured teams to ensure better integration with key partners.	
Continue to engage with leaders across teams – informing and influencing change.	
Continue with Connecting Leaders – through strong forward thinking visible leadership.	
Continued engagement with people who access services and the involvement of Healthwatch and independent advocacy	
Proactive engagement with the new Integrated Care Partnership (includes health partners)	

Ongoing response measures to COVID 19 pandemic

Maintaining Business Continuity across inhouse and external providers.

Key Mitigating Controls:

- ASC/Commissioning and Communities is engaged in the facilitation and forward planning of market engagement events, so to keep providers / people informed of preventative change as we progress with our People Live Well, for Longer Transformation Programme of Work.
- ASC/Commissioning have in place a robust Contracts and Quality Monitoring Policy Framework – that makes clear – how quality in monitored in a person-centred way with a vast range of partners, when to activate a suspension protocol working with care quality commission and when/ how we are decommissioning services – keeping people at the centre of decision making regarding any service disruption or period of market failure.
- ASC/Commissioning operate a monthly quality monitoring partnership forum that includes Police, Safeguarding, Care Quality Commission, ASC operations, Legal, CCG's and ASC lead commissioner – in the ongoing monitoring of quality and reporting and alerting of risk escalation that can be effectively managed – reports into relevant DMT's and Safeguarding Board.
- ASC/Commissioning hold a provider risk register whereby we monitor and review risk pertaining to specific providers as part of our role working with Care Quality Commissioning pertaining to Market oversight.
- ASC/Commissioning care sourcing/brokerage team support service and a local area co-ordination services- supporting vulnerable people to access wider community/ third sector services and wider more universal offers – diverting people away from care where appropriate.
- ASC/Commissioning finance and planning resource allocation system to promote and engage more people to take direct payments and will enable people to identify against changing needs – an indicative robust budget thus reducing people reliance on traditional models of care.
- ASC/Commissioning preventative policy framework that standardise of approach to prevention across adult social care "front door – whereby people will be directed away from traditional services towards a more empowering community solution, those accessing services will be fully assured working with providers – what our clear aim, vision and intentions are over the next three years.
- ASC/Commissioning provider financial self-assessment accreditation tool – to assist with the monitoring and management of potential uplift and or additional funding. This will ensure that funding is robustly based on clear evidence, against demand / trends in market development and impact on provider/ council and people accessing the service.
- ASC/Quarterly staff engagement groups are developed through leadership forums so to keep people informed and abreast of change as we progress to respond to demand and growth in the sector. Services operate regular staff conferences to address service specific developments and challenges.
- ASC/Commissioning are involved in the North-West regional and local programme of work pertaining to health and care staff recruitment, retention, and selection – resulting in a robust career path being developed with key partners and in being clear pertaining to local strategy.
- ASC/Commissioning influencing and working with Cheshire CCG pertaining to development of ICS and ICP plans
- ASC/Commissioning/communities have developed a robust and responsive policy framework (People Helping People) with a vast range of third sector providers – thus reducing demand on adult social care.
- To continue to develop with Children/families services joint commissioning and cross department work with adults – whereby risks can be better reduced together through a new joint commissioning management monthly working group.
- ASC/Commissioning monitor performance and demand against capacity to ensure service meets demand where possible, developing robust action plans for service/market failure.
- ASC performance monitoring reported on regular basis to CLT and Adult and Health Committee
- Additional risks escalated as appropriate.
- Consider the implementation of waiting lists to control demand and rising costs.

Lead Service Committee: Adults and Health Committee

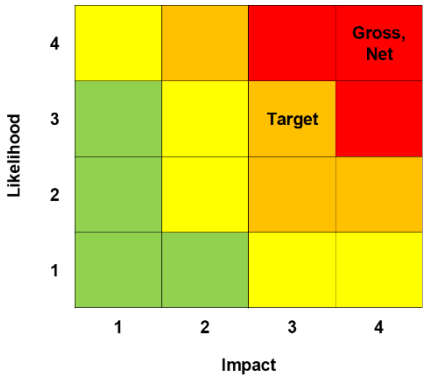
Risk Name: Increased Demand for Children's Services	**Risk Owner:** Executive Director of Children's Services
Risk Ref: SR1C	**Risk Manager:** Children's Services Directorate Management Team

Risk Description: That Cheshire East's local social, economic and demographic factors, including the impact of the pandemic, lead to an increase in the level of need and demand for children's services, resulting in the capacity of the council's systems relevant to these areas being unable to continue to respond/ absorb the pressures presented. Children's services has a mitigated budget deficit of £3.5m as reported in the first financial review for 2022-23 due to an increase in the complexity of children and young people's needs and the increased costs of placements and services including transport.

Nationally and locally there are challenges recruiting and retaining staff within specific areas of children's services, which is resulting in higher than average workloads and some delays in delivering services. There is a risk that this could result in children experiencing delays in receiving support leading to escalation of need and increased risk of poorer outcomes - including risk of harm and risk to life, a lack of continuity of workers for children and young people, and increased costs to the council. There is a risk that this impacts on our ability to deliver improvements in response to the joint targeted area inspection (JTAI).

There is also a risk that if the number of cared for children and young people increase, or if the complexity of children's needs increases, or the availability of placements decreases, this could result in increased pressure on placements, which could lead to difficulty providing the right homes for children and increased financial cost to the council.

There is a risk that the demand for education placements for children and young people with special educational needs and/ or disabilities (SEND) outstrips the number available, leading to children and young people needing to travel further, increasing travel costs, and requiring the use of more expensive provision. Changes proposed in the SEND Review could also have an impact on pressures within the SEND service if significant changes are required to working practices. This would mean that we would not achieve the council's desired outcomes for children and young people.



Interdependencies (risks): This risk shares an interdependency with the risk relating to demand to adult social care and health services. If NHS services experience an increase in demand this could impact on demand to children's services or could impact on the quality of support delivered by children's services, as services rely on health input to ensure children's needs are assessed and met. The same social, economic and demographic factors will also impact on the demand to adult and health services so it is possible that both risks would escalate at similar points. Pressures on other parts of the public sector, for example for tier 4 mental health beds, places further pressure on council children's services.

This risk is also affected by the risk to the council's financial resilience and lack of certainty about future funding, as increased funding may be required to enable services to meet increased demand. It is also affected by the UK economy, as rising inflation increases costs for providers, which results in increased costs of placements or services such as transport. There are also inter-relationships with the strategic risk on organisational capacity, as we need sufficient capacity to support recruitment and retention activity within children's services. Any capacity issues within support to this activity impacts children's services' ability to ensure our workforce can meet demand for services.

If the risk as a result of increased demand is not effectively managed, this could cause damage to the council's reputation, and damage to the relationship with our partners. The quality of the council's work to support children and young people is inspected by Ofsted, and an inadequate rating by Ofsted would have a significant impact on the council's reputation, ability to recruit and retain staff, and would increase costs in order to deliver improvement activity.

We do not have a large degree of control over our exposure to the risk as demand, and complexity of that demand, is driven by factors outside of our influence. Our appetite for the risk must remain low as the risk can result in children's needs not being met appropriately resulting in them experiencing poorer outcomes or harm. It can also impact on recruitment and retention, as an established and experienced workforce is crucial in delivering effective support to children and young people. To mitigate the risk we need to continue to monitor demand, take action to strengthen resilience within families and communities, for example through early help and prevention support, and to mitigate contributing factors which increase need, such as financial support to families made vulnerable to poverty as a result of the pandemic.

Comments this quarter: Net score increased due to recruitment difficulties which are impacting service delivery.

Children's services has a mitigated budget deficit of £3.5m as reported in the first financial review for 2022-23 due to an increase in the complexity of children and young people's needs and the increased costs of placements and services including transport as a result of inflation. An action plan is in place to mitigate the deficit which was received by the Corporate Policy Committee in October 2022.

Due to difficulties with recruitment and retention, which are also being experienced nationally, some teams within SEND and children's social care are experiencing higher than average workloads. This is impacting on our ability to deliver timely services to children, young people and families at the high quality we aspire to. Work is underway to improve recruitment and retention however this is a significant national pressure and challenge.

We are participating in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND.

Actions (Monitoring):

Continue to deliver our Sustainable Futures Strategy and improve the quality of social work practice (Review through ED led Children's Transformation Board, and quarterly as part of the audit of quality of practice.)

We are exploring expanding our in-house residential provision and fostering sufficiency, learning from North Yorkshire's 'No Wrong Door' model. We have been granted a small amount of innovation seed funding to support developing this model locally (Children's Transformation Board to be developed to monitor progress in this area)

Develop and launch a new partnership Early Help Strategy to support good quality early help and prevention services (Progress against the strategy to be reviewed on a quarterly basis by the Early Help partnership. Impact on practice reviewed quarterly as part of the audit of quality of practice)

Continuing to support vulnerable children and young people through the Household Support Fund and the Holiday Activity Fund (Impact reports are produced on a regular basis to the DfE)

Continue to deliver the High Needs management plan to manage demand to SEND and the financial impact of demand (Progress against the plan reviewed on a quarterly basis by the SEND management group)

Participation in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND

Continue to increase SEND provision in Cheshire East (Reviewed quarterly)

Continue to develop Bespoke Children's Homes and Mockingbird fostering model (Reviewed quarterly through the Fostering Development Board and Social Care Leadership meetings)

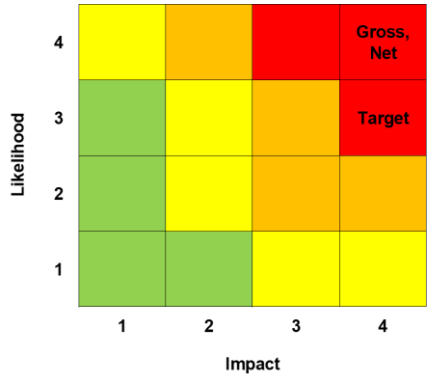
The Executive Director of Children's Services is co-leading a regional Cheshire and Merseyside workstream to look at regional solutions to recruitment and retention within children's services (Reviewed through the Cheshire and Merseyside workstream group)

HR and service areas are working together to develop a refreshed recruitment and retention strategy (Reviewed monthly through directorate management team meetings)

Key Mitigating Controls:

- In 2021/22, the council committed to growth bids for Children's Social Care, and for increased capacity in the SEND service to meet the continuing demands of the service. Additional business cases were agreed within the Medium Term Financial Strategy for further funding from 2022 onwards in these two areas to continue to meet the rising demand.
- We are closely monitoring the demand to services and the reasons that are driving demand so that we can be responsive and mitigate any risks to service delivery. Performance is monitored on a monthly basis by services. The children and families quarterly scorecard is reviewed at the Children and Families Committee and the Safeguarding Review Meeting attended by the chief executive and lead member for children and families. The Safeguarding Review Meeting includes discussion of workforce pressures and risks.
- We have a range of support available to families through early help and prevention services, including council, partner, voluntary, community, faith sector and commissioned services. These services support families and help prevent needs from escalating and requiring higher level intervention. We are continuing to develop our service offer through developing our partnership working and joint commissioning. We are currently reviewing our Early Help Strategy to ensure that we continue to strengthen our partnership offer moving forwards.
- The Cheshire East Safeguarding Children's Partnership and the 0-25 SEND Partnership Board meet on a regular basis and are sighted on changes to demand for services so there can be a partnership approach to meeting children and young people's needs.
- A strategy is in place to ensure only the right children come into care; this approach will reduce demand to Children's Social Care services. We are developing our in-house placement options through our Bespoke Children's Homes and Mockingbird fostering model.
- Our partnership Neglect Strategy was launched in July 2021 to ensure children at risk of neglect are identified early, which will reduce higher cost demand at a later stage.
- A robust governance structure is established for SEND. A strategy is in place to manage increasing demand and reinforce SEN Support in settings through our 'Access to SEND Services' strategy.
- Significant investment in local SEND provision to meets children's needs more locally but also reduce dependency on high cost independent school placements.
- High needs management plan in place to monitor the impact of demand to SEND services on financial pressures and monitor the delivery and impact of mitigations that have been put in place.
- We are participating in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND.
- We have supported children and young people who were most vulnerable through the pandemic through the Covid Grant Scheme/ Household Support Fund and the Holiday Activity Fund.
- We are delivering a comprehensive partnership improvement plan to address the recommendations from the joint targeted area inspection of child exploitation.

Lead Service Committee: Children and Families Committee

Risk Name: NHS Funding	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR2	**Risk Manager:** Director of Commissioning
Risk Description: An NHS funding deficit reduces their health service delivery and places additional strain on the council's provision of adult social care The ability to meet the council's target of residents living well for longer can only be achieved by an effective and comprehensive joint programme of health and social care services. Detailed consequences: Additional pressure on social care may be realised in diverse and unexpected ways due to the complex and volume of interactions between the two services. Their symbiotic relationship means that one partner under or over performing has a corresponding effect on the other. An effective relationship would see reductions in health inequality and reduce the requirement for long-term care. Potential causes: A funding deficit would be cause by a mismatch in resource and demand. The relatively poor levels of national public health and wellbeing following the pandemic and limited expectations for economic growth are potential drivers of a mismatch. Ultimately however NHS funding is a political decision, currently an area of uncertainty	

Interdependencies (risks): Increased Demand for Adult's Services, Increased Demand for Children's Services, Financial Resilience, Pandemic Virus

Comments this quarter: The end of short-term grants such as the Hospital Discharge Fund and increasing costs of short stay bed provision is impacting on Care Capacity and increasing Adults Social Care costs.

Actions (Monitoring):

To continue to be a key player in the development of the integrated care system at a regional and local level (Via ICS review visits) bi-monthly) new Governance arrangements (Monthly), A&H Committee (bi-monthly), Health and Wellbeing Board (bi-monthly))

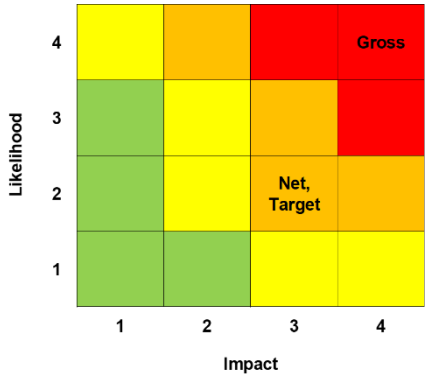
The development of new local Integrated Governance arrangements (Via Health and Care Partnership Board (bi-monthly) Leadership Group (bi-weekly))

Joint appointment of the Director of Commissioning as the Associate Director of Transformation and Partnerships (Via the Director of Place and Executive Director of Adults, Health and Integration)

Key Mitigating Controls:

- A Health and Wellbeing Board is established with representation from Clinical Commissioning Groups and the Council, which provides a forum for these challenges to be addressed at a strategic level. In addition, a Cheshire East Health and Care Partnership Board has been created where system leaders are looking at integration and how to make the system more financially sustainable to achieve better outcomes for the residents of the Borough.
- Contract clauses are in place to address cessation of service and performance management arrangements should any failing performance materialise.
- Partnership working is in place and commissioning is informed through the JSNA. The H&WB is working with Cheshire Fire and Rescue, NHS and other partners on various schemes of intervention and prevention which are intended to decrease demand. The Adults, Health and Community Directorate has introduced a new model for helping people to retain control and maintain their independence and reduce additional strain on services.
- The Cheshire East Integrated Care Partnership has been in place since October 2020 and is developing implementation plans across a number of work streams designed to achieve quality improvement and financial efficiencies across the system.

Lead Service Committee: Adults and Health Committee

Risk Name: Failure of Financial Management and Control	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR3	**Risk Manager:** Director of Finance and Customer Services (s151 Officer)
Risk Description: The risk relating to the effective planning, recording, allocation, review and transacting of income and expenditure. Consequences: Misuse of public funds and a failure to ensure good value for money would result in poor resident services and infrastructure, ultimately a reducing the health and prosperity of the borough and its residents. Causes: This risk is particularly operational in nature; failure to develop and follow comprehensive and effective internal controls would result in the risk materialising.	

Interdependencies (risks): Economy, External Funding

Comments this quarter: Discussed that this was an operational risk and that with future development of the Finance service's internal risk register it could be removed from the strategic risk register. However for the moment it inclusion does reflect that any funding issues currently being experienced are not due to failures of internal controls.

Risk description updated to draw out the consequences and causes, a number of completed actions moved to the controls section. Likelihood reduced; net score is equal to target.

Actions (Monitoring):

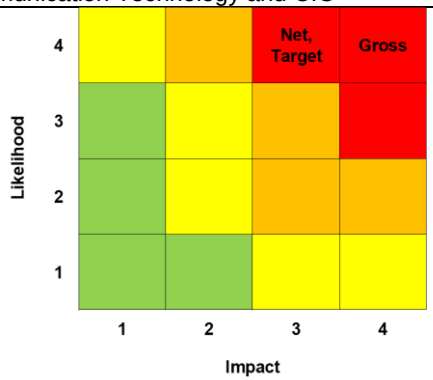
Training and briefing to Councillors (Committee Work Programmes)

Action Plan on adherence to FM Code (Finance & Customer Services Departmental Plan)

Key Mitigating Controls:

- Financial planning arrangements include preparation by the finance team, in liaison with senior operational managers, of detailed financial forecasts, based on the best available information and including prudent assumptions based on professional judgement and external advice
- Use of quality financial systems, with appropriate training and subsequent audit of their effectiveness to provide management and control of the Council's finances
- Balanced budget to put into effect the council's service plans for the forthcoming year, matched by available funding and including a risk assessment of the adequacy of general reserves
- MTFS sets out how the Council will deliver the Council's corporate plan including identification of budget gaps
- Use of a report format and report clearance process which ensures provision of relevant information on financial impact and risk exposure to the decision makers.
- Clear and effective communication of changes or updates to Finance and Contract Procedure Rules
- Sources of specialist advice and guidance
- Budget monitoring, comparing actual performance against approved budget, is undertaken throughout the financial year and reported to service committees.
- Outturn reporting and audit of statements supports in-year monitoring and future year planning
- Risk-based approach to the use of reserves, identifying appropriate reserve levels and ensuring that reserves are not depleted without first identifying a strategy to restore them to risk-assessed levels during the MTFS period.
- Where a residual deficit is forecast, a number of actions will be explored including:
    - use of any service or non-specific underspends to offset pressures elsewhere within the budget
    - accessing external funding ensuring compliance with any funding conditions
    - use of reserves
    - use of general balances
- Treasury management strategy to manage the council's cash flows, including an investment strategy focused on the security of principal sums and a borrowing strategy to manage interest payable and other charges
- A capital strategy that prioritises capital investment programmes, identifies the financial impact of investment in schemes and limits the amount of unsupported borrowing to be taken

• Education and training for Officers and Councillor, includes Finance and Contract Procedure rules • Engagement with government departments related to financial models and consultation
Lead Service Committee: Corporate Policy Committee

Risk Name: Information Security and Cyber Threat	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR4	**Risk Manager:** Head of Information Communication Technology and CIO
Risk Description: (Cause) There is a risk that as the Council continues to move towards using new technology systems to reduce costs and fulfil communication, accessibility, and transaction requirements, (threat) it becomes increasingly vulnerable to a security breach, either maliciously or inadvertently from within the Council or from external attacks by cyber-criminals. (Impact) This could result in many negative impacts, such as distress to individuals, legal, financial, and reputational damage to the Council, in addition to the possible penetration and crippling of the Council's IT systems preventing it from delivering its Corporate Outcomes.	

Interdependencies: This risk has interdependencies with corporate risk SR5 Business Continuity and SR13 Reputation. It also has links to the Financial Resilience risk, as funds for maintenance and replacement will be stretched, placing additional strain on assets and resilience of information security controls.

Comments this quarter: Work continues to define the work plan and activities under the Security & Compliance Programme. Risk workshops have been held with managers in ICT Services to embed a risk approach to project and business activities.

PSN accreditation has been achieved for 22/23. New tools to monitor and capture phishing exploits are being deployed with additional training for staff to raise awareness being made available. Enhanced security features secured from Microsoft are being rolled out to further protect the estate.

An Information Security Steering Committee has been setup to co-ordinate activity across the Security and Compliance Programme, the DLUHC Cyber Funded projects and the security projects within ICT Services.

Actions (Monitoring):

Simplify and consolidate the ICT infrastructure (TDA runs on a weekly basis to ensure that solution adhere to ICT principles of standardisation)

Reduction of the information storage, removal of duplicates information and validate that the asset register is being adhered to (The Information Asset Register (IAR) is continually under review, the Records Management Team contact services via the Virtual Information Governance Group to request the services review their areas on the IAR. Services voluntarily contact the team to make amendments)

Enhancement of the Data Classification and technical controls to further protect information, project has re-scope with the introduction of e% licensing (Peer review)

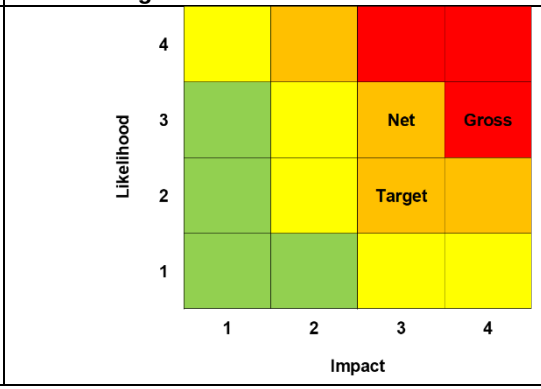
Enable Data Quality consistency across multiple service areas. Master Data Management which will standardise the format and structure of corporate data fields which are prevalent across the Authority relating to Resident, Employee, Address and Business Records. Phase 1 MDM scheduled live date end of December (use of and assessment against the IADM national data quality standards)

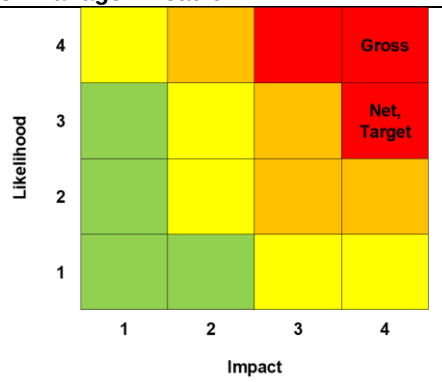
Key Mitigating Controls:

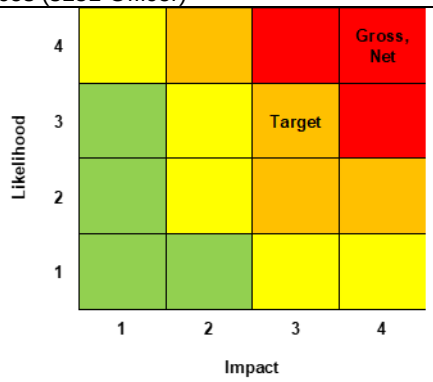
- The CIO is an advocate of and reports on Information Risk to the Corporate Leadership Team and the Audit and Governance Committee and makes the Annual Statement of Internal Control of Information Risk.
- The Council has a number of Information and Data Security policies which are published on the Centranet and help to protect from the Council from inappropriate and unauthorised access and communicates what to do in the case of an incident. Policies; Information Security Policy Overview, ICT Access Policy, ICT Communications and Operations Policy, ICT Computer, Telephone and Desk Use Policy, ICT Email and Messaging Policy, ICT Flexible and Mobile Device Policy, ICT Incident management Policy, ICT Infrastructure Policy, ICT Internet Policy, ICT Legal Responsibilities for Data Policy, ICT Personnel Standards for Information Security, ICT Protection Policy, ICT Removable Media Policy and ICT Software Policy. Policies review and guidance materials updated to strengthen advice to staff on how to manage various information types
- Progress on Information Risk and Information Security is monitored through the Information Security Steering Committee (ISSC), Strategic Information Governance Group (SIGG) and the Virtual IGG Task and Finish Group.
- The Council has an Incident Reporting process which has been communicated to staff, all incidents are scored and assessed by IGG to ensure that the breaches are minimised, and future breaches are reduced.

- The Council complies with the Public Services Network PSN Code of Connection, NHS Data Security and Protection Toolkit, DWP's MOU and NHS Digital controls, work continues with the consolidation and enhancement of elements of the security estate to meet the ever-developing threat profiles. This includes third party IT hardware and software tests undertaken by accredited security vendors, these validate that the network and hardware are secure and robust, if any vulnerabilities are found then a mitigation plan is drawn up and actioned.
- The Council has an Information Asset Register which is reviewed on an annual basis and has been published on the open data portal.
- There is also an Information Assurance Data Management (IADM) programme of activity to increase awareness and maturity of information assurance and governance across the Council. The programme is tasked with guiding the organisation to manage its information in a compliant and efficient way.
- Data Classification has been rolled out to the organisation; this allows the categorisation of information so that appropriate controls can be employed to protect the information.
- The Council provides security and compliance e-learning courses (which are mandatory for all employees) on the Learning Lounge and Metacompliance portal. This includes several modules of Data handling, Cyber Security, and Information Assurance.
- Controls are in place to restrict access to the data centres and network equipment and risk assessments of existing systems and networks are on-going.
- The Council has a Data Protection Officer who assists in ensuring compliance with GDPR and to specify the procedures to be adopted.
- The Council's ICT Services have a strategic direction to move to a "Cloud First" principle, whilst this enables an evergreen environment which is always up to date, additional controls are needed to prevent compromise or inappropriate use and access. This includes contract compliance and monitoring to ensure ongoing protection of information. In addition, the Council is looking to move to Zero Trust architecture, this is a direct result of increased threats posed to the working infrastructure. This shift is in line with the latest thinking and guidelines issued by the NCSC. In support of this a high-level business case was submitted and subsequently approved. This additional funding will be used to develop the necessary tools to start the implementation.
- An assessment was completed using the Council's insurance broker to understand current and future risks and whether any risks needed treating or could be offset through insurance cover.

Lead Service Committee: Corporate Policy Committee

Risk Name: Business Continuity	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR5	**Risk Manager:** Head of Audit & Risk
Risk Description: Failure to maintain business continuity after an unusual or unexpected, disruptive event or events The risk that, some or all, of the council's services, projects or initiatives are unable to resume operations within the expected timeframes after a disruption. A disruptive event, or multiple events, may occur either in isolation, or across the whole organisation. Detailed consequences: The council has a number of safeguarding obligations to its residents, a failure could result in it being unable to fulfil those obligations, and as such not protect them from mental or physical harm. Failures may also cause an unacceptable loss of local services. Detailed causes: The unavailability of staff, ICT systems, equipment or a suitable working environment are the most common causes of a material failure. Many different social, economic, environmental or public health factors can drive these causes to manifest themselves. Underlying this may also be a failure to reasonably allocate resources to eliminate single points of failure in these areas.	
Interdependencies (risks): Information Security and Cyber Threat, Pandemic Virus, Fragility in the Social Care Market, Council Funding, Organisational Capacity & Demand	
Comments this quarter: Review of training materials to support use of ClearView use in progress. Exercise to ensure employee and users of ClearView system are current began in Q2 and continues into Q3. Working with ICT Services on refresh of Risk Registers is identifying a number of connection points into IT disaster recovery plans and areas to challenge service business continuity plans on in relation to their reliance on ICT, and expectations on sustained loss of service. These can be progressed through the refresh of the individual and organisation wide plans.	
Actions (Monitoring):	
Co-ordinate refresh of BC plans with specific focus on ICT systems (One off action)	
Review and refresh of the Business Continuity Framework (2-year review cycle)	
Development of training materials on Learning Lounge to support staff training and awareness (2-year review cycle)	
Introduce moderation of BC plans across a working group for internal challenge and support	
Work with Emergency Planning to hold regular scenario testing	
Assessment of BC software with ongoing organisational needs	
Key Mitigating Controls: • Implementation of Clearview; Business Continuity Software for business continuity planning; Clearview provides the process in an easily understandable format to identify critical and serious priority activities • Executive Directors, Directors and Heads of Service have received training in developing Business continuity plans First round completed Feb 2020 • Awareness raising campaign by undertaking a Cyber Attack • Awareness Exercise and fire in a public building (in addition to emergency planning colleagues and also included a community flooding and a fire scenario which had business continuity implications and the council's response) with colleagues from across various areas of the Council • The Clearview system enabled staff to review and revise their BC plans for both Departmental and Service Level Plans with relevant templates for appendices (in line with the structure formats) • All BC plans were uploaded to the system by March 2020 and have been asked to review in light of second wave COVID • High level course on Business Continuity Management has been added to the Council's Learning Lounge • ICT Shared Service also have a Crisis Recovery Plan that has been updated to take account of lessons learned as a result of ICT outage incidents. This Crisis recovery plan overview contains key information for the ICT Shared Service disaster recovery • A corporate business continuity plan has been developed and is contained within Clearview	
Lead Service Committee: Corporate Policy Committee	

Risk Name: Organisational Capacity and Demand	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR6	**Risk Manager:** Head of HR
Risk Description: Local demographic and external factors (including COVID and EU Exit) lead to increasing and changing demands on services. This, combined with ongoing financial pressures, an ageing workforce, staff turnover and skills shortages in key areas of the workforce, result in insufficient capacity and an inability to retain or attract staff. This results in a detrimental impact upon physical, emotional and mental wellbeing of staff, and impacts negatively on the Council's ability to deliver all of its intended objectives and outcomes. More recently increases to the cost of living also present risks to the resilience and wellbeing of our workforce and therefore the capacity to respond to demand.	
Interdependencies (risks): Business Continuity, Pandemic Virus, Increased demand for Adults Services, Increased demand for Children's Services, Financial Resilience	
Comments this quarter: Gross scores remain the same. The labour market nationally remains challenging and additional pressures are being seen from the increases to the cost of living. Staff continue to work flexibly, alongside designing a future hybrid way of working. The development of a recruitment and retention is underway, with targeted actions to address any identified workforce gaps.	
Actions (Monitoring):	
Revised Council wide Workforce Strategy and Directorate /Service Workforce Plans (3-year strategy then rolling coverage and review)	
Equality, Diversity and Inclusion Strategy (3-year strategy then rolling coverage and review)	
Recruitment and Retention Programme and Steering Group. (Work of the programme overseen by Steering Group.)	
Key Mitigating Controls: • In terms of the demand, work planning in advance has been improved. Significant increases in work pressures are being raised in advance, so that additional resource can be sourced for commissioned work. Improved HR data is being used to identify potential issues and service workforce plans developed to mitigate. The apprenticeship levy and talent management and succession planning frameworks are under development to help mitigate • Work on a recruitment and retention programme progresses at pace to put in place any additional measures available to attract and retain staff to those areas that have identified gaps. This is alongside consideration being given to identifying controls and support that can be provided to retain existing staff. Ongoing work to reduce work on reliance on agency staff, for a more stable permanent workforce base and reduced costs • A range of comprehensive measures are in place to support staff wellbeing and resilience and additional measures to offset cost of living pressures in place. Additional wellbeing and benefits measures are also being explored as the national cost of living crisis develops • Labour and national markets are now seeing significant movement due to the impacts of Covid19. Locally, there are particular pressures, for example, on the care sector, social workers, planning and ICT with some neighbouring authorities are offering higher salaries which impacts on staff retention • Agency staff are not always available to fill the roles. Additional work programmes and recruitment campaigns are also in place for areas such as Care4CE and social work Redeployment of staff is being considered where services are stretched and agency staff are not available • The council is moving to agile working as a permanent feature of future ways of working, which may attract a wider pool of candidates. Alongside service workforce plans, a recruitment and retention programme in place to ensure the Council addresses identified shortfalls with agreed actions and service specific solutions • The Head of HR considers that the measures reduce the likelihood but not the impact	
Lead Service Committee: Corporate Policy Committee	

Risk Name: Failure of Council Funding	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR7	**Risk Manager:** Director of Finance and Customer Services (s151 Officer)
Risk Description: The risk that the level of income is insufficient to support delivery of the Corporate Plan. This risk acknowledges that council reserves are not a sufficient, or intended, to support day-to-day operations for any meaningful period. Consequences: Based on an extreme but plausible worst-case scenario of funding cuts, the council's regulatory obligations would be maintained, although delivered by barebones services. Other services may see similar resources reductions or be closed altogether. A reduction in services would negatively affect the quality of life in the borough and the strength of the local economy. Regulatory breaches could also occur in relation to a number of different services, financial management being one of them. Some funding is specific to a service or outcome and cannot be redistributed, without the designated funding a service could not be provided. Causes: Significant reduction to local income generation or central government cuts would result in the worst-case scenario. The high levels of national debt, high inflation and weak national economy mean that the council is likely to have to prioritise its spending in the short to medium-term.	
Interdependencies (risks): Financial Management and Control	
Comments this quarter: Risk description updated to draw out the consequences and causes, increase in the likelihood due to high levels of national debt, high inflation and a weak national economy. Budget balancing action added, funding for SEND services is also under review (also noted on SR1C Demand for children's services risk). Based on the external influences the target score has also been increased, reflecting the current pressures, there has been a reduction in the best-case scenario.	
Actions (Monitoring):	
Each directorate is required to develop an action plan to balance their budgets due to recent forecasts of financial pressure	
Children's Directorate is participating in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND	
Key Mitigating Controls: • Financial planning arrangements include preparation by the finance team of detailed financial forecasts, based on the best available information and including prudent assumptions based on professional judgement and external advice • Balanced budget to put into effect the council's service plans for the forthcoming year, matched by available funding and including a risk assessment of the adequacy of general reserves • Monitoring of grant funding formula, and engagement with consultants and government representatives to enhance local forecasting and access to funding.	
Lead Service Committee: Corporate Policy Committee	

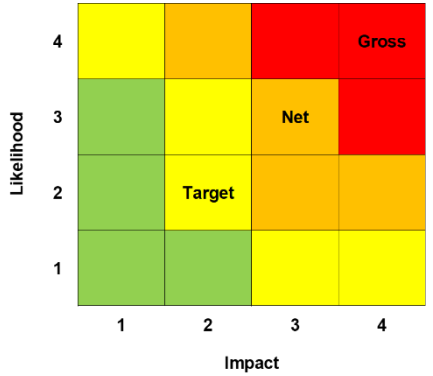
Risk Name: Governance & Decision Making	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR8A	**Risk Manager:** Director of Governance and Compliance

Risk Description: Failure to develop a robust corporate governance infrastructure and ensure aligned decision-making throughout the organisation

The council is a complex public sector organisation with a broad range of objectives, some of which it is legally obligated to deliver, others are identified within its Corporate Plan. Formal reporting and decision-making within the council is prescribed by local authority regulation. The decision-making process at all levels, must comply regulatory requirements while also delivering those stated objectives.

Detailed consequences: The failure of governance and decision-making may result in stated goals may not be met and, or public funds wasted. Ultimately these can result in a reduction of living standards and physical health and mental wellbeing of residents. Failure to provide a reasonable level of service to residents at an appropriate cost, or to follow legal decision-making protocols, can result in increased regulatory scrutiny and reputational damage. Possible outcomes of which may be, public censure, financial penalties or direct central government intervention.

Detailed causes: The volume and complexity of the council's services and objectives, coupled with finite resources and differing stakeholder views, make the application of the Corporate Plan into 'good' decision-making, a challenge. Interpretation of 'good' decision-making may be inconsistent throughout the organisation without a holistic approach to guidance, reporting, oversight and challenge. Without comprehensive vertical reporting and challenge, senior management cannot effectively implement a robust level of accountability and drive positive change in their areas of responsibility.



Interdependencies (risks): Financial Resilience, Reputation, Capacity and demand, Political uncertainty

Comments this quarter: Consequences updated to include poor use of public funds and reputational damage, causes reworded for greater clarity. Control added for the officer adjustments before an election as per the Recommended Code of Practice for Local Authority Publicity. Constitutional updates this period have focused on routine administrative amendments, action moved to the control section, as has decision-making reporting for committee meetings. Action added for a review of shared service governance arrangements due two issues that have developed this quarter. The publication of the joint targeted area inspection (JTAI) on Cheshire East Safeguarding Children's Partnership's response to children at risk of criminal exploitation. Also, the Annual Governance Statement 21/22 includes the review of ASDV governance arrangements as a significant governance issue, recognising the need for the Council's arrangements to be reviewed and updated in light of updated CIPFA guidance and a number of related public interest reports.

Two potential issues in relation to the upon coming local election are being monitored and managed, proposed changes to legislation in relation to voter ID and the close proximity to the coronation of the monarch. With due note to the above, the overall position on this risk remains unchanged. Issues remain but are being identified and addressed in a practical manner.

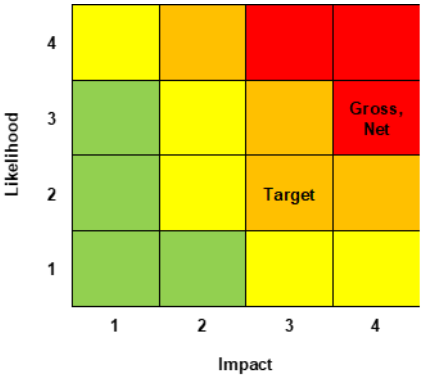
Actions (Monitoring):

Review of shared service governance arrangements with specific actions to be identified

Key Mitigating Controls:

- Council's Constitution covers decision making processes, including finance and contract procedure rules. Following the change to Committee system, mechanisms are in place to capture learning form the use of the committee system from Members (Constitution Working Group)
- Constitution is a publicly available document; guidance on the use of the decision-making processes is provided by enabling services including Legal, Finance, Democratic Services, and Audit and Risk. Constitutional updates are overseen (recommended and administrated) by the Director of Governance and Compliance (also the Monitoring Officer) in response to regulatory changes and Full Council decisions.
- Administration of local elections and monitoring of behaviour in the period of heightened sensitivity beforehand. During which time, appropriate adjustments are made to the publishing or reporting of controversial issues or anything that seeks to influence voters.
- Reports to Committees are developed and reviewed by senior officers and enabler sign off, briefings are arranged with Committee Members to address any further knowledge requirements ahead of the relevant meeting. All decisions are formally recorded in meeting minutes and administrated in line with delegated authorities as per the constitution.
- Schemes of delegation; local and financial are in place to provide clarity on responsibilities ensure separation of duties is in place where required, and minimise the risk of management override
- Assurance mechanisms on the organisations' compliance with its decision-making processes are provided through the external audit (Statement of Accounts) and the work of the internal audit team. There are other external inspections, such as Ofsted, which may examine elements of our decision-making processes through their work, although this I not usually the primary focus

• The organisation publishes an Annual Governance Statement identifying significant governance issues which have occurred, any known areas which may cause issues if not managed effectively and updates on issues previously identified
Lead Service Committee: Corporate Policy Committee

Risk Name: Political Uncertainty	**Risk Owner:** Chief Executive
Risk Ref: SR8B	**Risk Manager:** Director of Governance and Compliance (Monitoring Officer)
Risk Description: Failure to anticipate and manage local and national political uncertainty The Corporate Plan guides the council's decision-making, it informs what is considered a 'good' outcome and areas of priority. Political changes may result in stakeholders no longer being aligned with that current plan. Central government policy decisions can materially impact the council in many ways, while other risks might draw out specific changes and capture their direct impact, this risk brings together the total effect of political uncertainty for consideration. Detailed consequences: Unplanned changes in priorities or the introduction of new goals are likely to result in a budgetary overspend or previously agreed targets not to be met. A high level of uncertainty can create confusion, increased administrative overhead or delay planned initiatives. Changes in funding or the cancellation of infrastructure projects can undermine both the Corporate Plan and the MTFS. Detailed causes: The ever-changing social and economic situation in the UK and globally can result in swift changes in political views, leadership, public sentiment or regulatory requirements. National macroeconomic factors, such as GDP, interest and exchange rates, are key drivers of uncertainty.	
Interdependencies (risks): Reputation, Council Funding, Governance & Decision-Making	
Comments this quarter: Consequences, causes and controls updated, actions were in place and being repeated, so moved to controls section. No material change to the council and its operations. Uncertainty has increased and remains is high, no change to the rating. As at the end of Q2 a new Prime Minister has just be elected which is expected to bring about a degree of change, challenge and future clarity on policy. Current issues that are potentially disruptive is the level of uncertainty in central government policy and national financial instability. Notable, developing or slow burn issues are levelling up, ICS, social care, HS2, Great British Railways and devolution.	
Actions (Monitoring):	
System for briefing and information exchange on white papers, levelling up, ICS and devolution solutions	
Preparation Elections 2023 and delivery of Corporate Plan Reprioritisation/new plan after elections.	
Key Mitigating Controls: • Engagement with national government, consultations and requests for feedback • Application for and funding agreement processes, governance process for ad hoc grants • Engagement with political administration of CEBC • Engagement with group leaders of CEBC parties • Training and briefing to CEBC members • Service Committee support and briefings for members and senior officers • Corporate Plan and MTFS regular and ad hoc (post material changes) review process, including contingency planning	
Lead Service Committee: Corporate Policy Committee	

Risk Name: Capital Projects - Place	**Risk Owner:** Executive Director of Place
Risk Ref: SR9	**Risk Manager:** Place Directors and Business Managers as relevant to

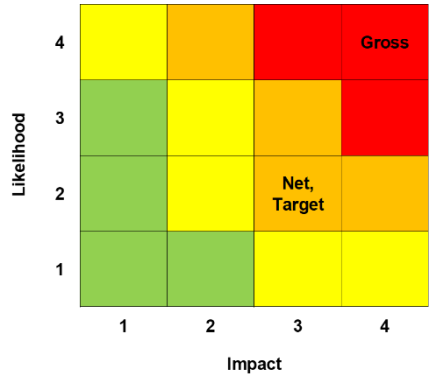
Risk Description: Failure to deliver major capital projects.

The council delivers a broad range of capital projects in support of the aims and objectives of its Corporate Plan. The range of projects includes transport infrastructure, town centre regeneration, refurbishment and improvement of existing council assets such as schools and leisure centres, and renewable energy generation.

Without a robust system for managing the capital programme and individual projects, the stated objectives may not be delivered. Projects could also fail to deliver to the time, cost and quality parameters set out in business cases. This could have significant financial and reputational implications for the Council.

The scale and complexity of the overall capital programme is challenging. Appropriate governance and controls are important to ensure resources and funding are prioritized effectively, and where required agree adjustments to the time, cost and quality parameters set out in the business case. Where appropriate, members are updated on significant changes to agreed objectives through briefings to the relevant committee.

The broad range of partners and stakeholders for individual projects and interdependencies between projects are also significant challenges that require effective management.



Interdependencies (risks): Climate change, Infrastructure Investment, Economy, Council Funding

Comments this quarter: The existing controls for effective governance and management of major capital projects remain in place. Each major capital scheme has its own project or programme governance in place. Additional governance mechanisms include Assets Board and Place Board providing oversight on thematic programmes. The review of the inflationary impact on capital projects has been completed. Additional funding has been agreed for some projects, funded from allocations within the Capital Programme for Exceptional Inflation and Strategic Projects, subject to appropriate approval procedures.

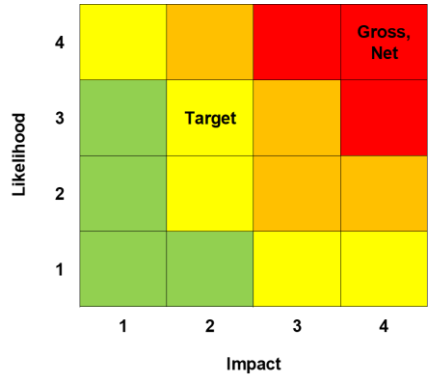
Actions (Monitoring):

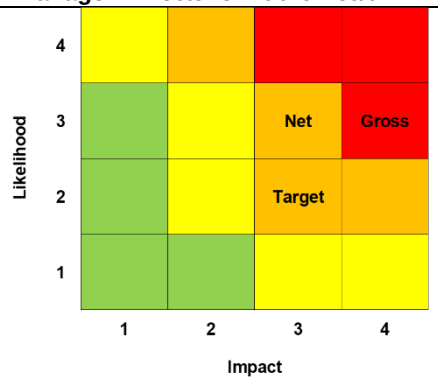
A new module within the Unit4 ERP system will improve financial monitoring to provide more regular information on actual and forecast spend

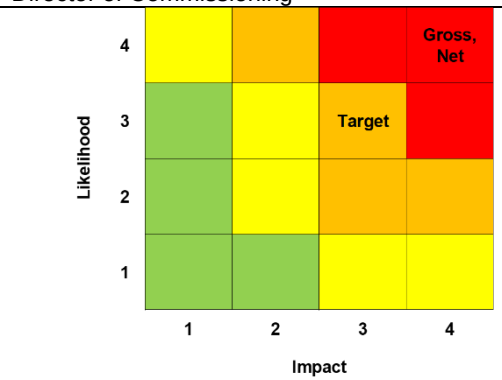
Key Mitigating Controls:

- The Capital Strategy and overall Capital Programme is presented annually as part of the Medium-Term Financial Strategy at full Council.
- New projects and schemes are subject to the approval of detailed business cases in accordance with the Finance Procedure Rules
- The Assets Board provides strategic oversight of the Council's land and property assets including recommendations and reports on acquisition, disposal and development.
- The Capital Programme Board undertakes detailed appraisals of projects and business cases; undertakes gateway reviews and risk management reviews of major capital projects; and receives post project completion reports to assess benefit realisation and lessons learnt.
- Appropriate and proportionate governance has been established to oversee project delivery, including risk registers. This includes project boards to manage individual projects and thematic programme boards to provide additional strategic oversight and manage interdependencies, e.g. Carbon Neutral Programme Board, Leisure Investment programme Board, Place Board. This governance considers and makes practical decisions on the prioritisation of resources and funding including, where appropriate adjustments to agreed time, cost and quality parameters.
- The Place Board provides strategic oversight of all the major Crewe-centric and Macclesfield-centric projects, including HS2 and strategic housing sites, to ensure individual projects are fully aligned to the overarching vision and delivery plan for each town.
- Financial monitoring undertaken quarterly, with summary data reported to Finance Sub-Committee and appropriate service committee twice a year
- High level progress updates are reported to the appropriate service committee twice a year. More detailed progress reports on individual projects or programmes are provided on a periodic basis.
- Regular 121s between Executive Director and Directors which includes updates on major projects

Lead Service Committee: Economy and Growth, Environment and Communities, Highways and Transport

Risk Name: HS2 Infrastructure Investment	**Risk Owner:** Executive Director of Place
Risk Ref: SR10	**Risk Manager:** Director of Highways and Transport
Risk Description: HS2 is a government led scheme, impacting Cheshire East Borough. HS2 services will call at Crewe station when Phase 2a opens between 2029 and 2033 with 2 HS2 trains per hour. Plans for Phase 2b include the Crewe North Connection that could enable up to 5/7 HS2 trains per hour calling at Crewe, in each direction. However, the business case for Phase 2b does not include any additional services, from the 2 HS2 trains per hour, calling at Crewe when Phase 2b opens between 2035 and 2040. Government's proposals for Crewe hub station fall far below those of other HS2 hubs and don't reflect its role as a rail super-hub and the first HS2 hub in the North. Current proposals are unlikely to unlock the regeneration, growth and levelling up potential for Crewe from the investment in HS2. Securing the required investment for the Crewe station is critical to the Council in delivering its Crewe hub vision, maximise cost and programme efficiencies and minimise disruption to rail passengers and local communities. The government is in control of the HS2 programme and its delivery timescales. Delays to the scheme have been announced as part of the Integrated Rail Plan, published in November 2021. Such delays, and the risk of further delays to HS2 Phase 2b, leads to uncertainty on the delivery and viability of the Council's wider ambitions for the Crewe hub. The Council has been developing its vision and plans for the Crewe hub alongside partners for several years, at significant cost to the Council, lack of firm commitments about timing, infrastructure and HS2 train services means there are uncertainties on the programme delivery and scope puts increasing risk on these costs being abortive	
Interdependencies (risks): Economy and World Events, Organisational Capacity and demand, Council funding, Capital Projects	
Comments this quarter: Risk description updated to better define the risk, no change to the rating, actions updated.	
Actions (Monitoring):	
Tactical lobbying to Government, gaining support from local politician, MPs and neighbouring authorities (Business Case and Investment Integration Programme Board)	
Seeking necessary Crewe hub investments via petitioning of the Phase 2b hybrid bill (HS2 and Crewe Superhub Programme Board and Place Board)	
Decoupling investments from HS2 programme and seek funding from existing government funds	
Key Mitigating Controls: • This risk will be reviewed by the Place Board (chaired by the Executive Director of Place) and the Business Case and Investment Integration Board (chaired by the Director of Finance) on a monthly basis and the chairs inform CLT accordingly. • Day to day management of the actions in place to reduce the risk is a combination of the BCII: Business Case and Investment Integration, the Programme Director and the Programme Manager. The controls above will be used to monitor the risk. • There have been no control failures to date. In fact, the controls in place today are probably stronger than at any point in achieving the objective. This is commensurate to the closing window of opportunity and the increase in work required by the Council to turn the outputs of the consultants Business Case work. Future issues may arise if the dedicated resource currently requested is not quickly put in place to release the efficiencies of working a close dedicated team brings. • Ultimately, while the Council can control the technical evidence, business case formation and the technical level negotiation with Government Departments, the risk may be impacted on by changes Government policy and prevailing global economic factors. • Value engineering of design and development of projects and Early Contractor Involvement where appropriate. • Bringing forward elements of the vision through existing funding sources such as Levelling Up Fund • Liaison with the contracting industry to identify the most efficient design solutions. • Constant review and effective management arrangements of capital projects and programme budgets. • Managing outward facing expectations on the scheme • Ongoing cost review based on latest construction inflation forecasts	
Lead Service Committee: Highways and Transport, Environment and Communities, Economy and Growth	

Risk Name: Pandemic Virus	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR11	**Risk Manager:** Director of Public Health
Risk Description: Ongoing risk of genetic shift resulting in rapidly spreading strain of influenza and other diseases previously unseen in humans for which there may be multiple Variants and no guaranteed preventative treatment available. In addition to the human health risks pandemic illnesses poses a risk to healthcare capacity and CEC business continuity. (Cause) The world-wide spread of COVID-19 in the early part of 2020 and the ongoing spread of the virus within the population, and the measures being introduced or in place to try to contain that spread and manage the impact of the virus, (threat) have a negative impact upon the health and wellbeing of the Cheshire East population, place significant pressures upon the health and care system and its workforce, threaten the viability of local business and further exacerbate the financial pressures faced by health and care organisations and the Council, (impact) resulting in serious illness and in some cases death, unmet health and care needs, interruption to education, economic down turn and business failure and a widening financial gap in health and care organisations.	
Interdependencies (risks): Fragility in the social care market, Business continuity, Financial resilience	
Comments this quarter: This threat persists into winter 2022/23 with significant pressures being placed on NHS organisations within Cheshire East and consequent follow on pressures to adult social care. The medium to long term impacts of this pandemic will impact on our services and delivery.	
Actions (Monitoring):	
Initiating flu vaccination programme for all staff and communications supporting need for public vaccinations (reviewed monthly)	
Development of regional 'business as usual' approach for Cheshire and Merseyside (reviewed quarterly)	
Horizon scanning to understand long-term management of Covid-19, including the development of a Covid-19 'Early Warning System' and wastewater monitoring project with UKHSA (reviewed monthly)	
Key Mitigating Controls: • Limited National Government advisory measures. Published guidance and advice is now only available in limited sectors. The primary universal guidance is now outlined in the HM Government 'Living with Covid-19' plan but all mandatory Legislation and restrictions have now been removed in the UK • National Vaccine roll out • Cheshire East Emergency Planning activity, reduced frequency - Local Outbreak Engagement Board, Health Protection Board, Operational meetings, Track and Trace Huddle • Advice and guidance to schools, businesses and residents • Track and Trace Team activity, proactive in supporting targeted individuals/communities/businesses as well as initiating a mobile health and wellbeing offer to improve individual health and resilience. TTCE Programme maintained until October 2022 • Cheshire East organisational activity, managed return to the workplace, hybrid working option, public health advice, targeted LFT home testing for staff • Vaccination tracing to target individuals not vaccinated to promote uptake • Supporting NHS roll out of COVID 19 vaccination programme, established and operating including mobile offer. Spring programmes being supported by the public health and communities teams. • Initiating flu vaccination programme for all staff and communications supporting need for public vaccinations	
Lead Service Committee: Adults and Health Committee	

Risk Name: Fragility and Failure in the Social Care Market	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR12	**Risk Manager:** Director of Adult Social Care, Director of Commissioning
Risk Description: A failure of the local social care market The impact of the COVID-19 pandemic has exposed weaknesses in the national social care market which have yet to be resolved. Detailed consequences: The council is unable to deliver a robust adult social care package without the use of third-party providers, without these outsourced services the overall social adult care package would fail, and the council would not be able to achieve its objective of people living well and for longer. Detailed causes: The adult social care sector continues to experience financial strain, staffing costs are a high proportion of their overall expenditure while recruitment and retention remain a challenge. Traditionally the market suffers from small margins and has suffered from systemic challenges for years, which were further exposed by the COVID-19 pandemic. The impacts of inflation and the fair cost of care regulations have yet to be fully realised, although it is clear that additional costs will be passed on to the council.	

Interdependencies (risks): NHS Funding Pressure, Financial resilience, Business Continuity, Pandemic Virus

Comments this quarter: No change to the risk, still at the highest possible rating. We are seeing the impacts of inflation impacting on our Care budget, fee increases are having a major impact on our ability to manage the budget and this is having a further destabilising effect on the market. Providers report staffing shortages and difficulties maintaining stable structures. Some providers are now recruiting workers from abroad and this is beginning to have some limited benefit in areas of Care at Home

Actions (Monitoring):

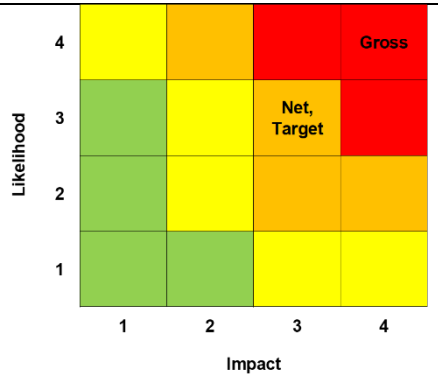
- Identify short term funding to support care providers to maintain sufficiently qualified workforce to meet need and reduce pressure on hospitals (Weekly via Market Oversight meetings)
- Establish a CEC crisis response team who can be called on at short notice to deliver care (Weekly via Market Oversight meetings)
- Expand the existing British Red Cross service to respond to crisis situations in the community by providing low level support over a 7-day period (Weekly via Market Oversight meetings)
- Undertake a review of care fees for all sectors of the market (Weekly meetings with contractor, findings reported to Health and Adult Committee)
- ASC/ Commissioning continues to respond to significant challenges pertaining to the acceleration of prevention (Twice weekly ASC meetings)
- ASC/Commissioning and Communities have a Standard Set of Fit for the Future Contracts – that set out specific measurable outcomes pertaining to each service area in driving prevention and key performance indicators that will test the providers ability to retain a viable and sustainable business in responding to a population of changing need – higher levels of resident satisfaction and improved control (Quarterly contract management meetings)
- Continue to monitor and review preventative and support service activity (Twice weekly ASC meetings)
- Improved utilisation of public health JSNA and wider regional data sets informing future commissioning plans (Monthly JSNA steering group)
- Develop engagement with community groups and 3rd sector (Twice weekly ASC meetings)
- Liquid logic and contrOCC solutions to better map trend and demand (Twice weekly ASC meetings)
- To monitor and review thresholds and gatekeeping processes (Twice weekly ASC meetings)
- Review and strengthen partnership working with wider agencies (Monthly Quality Monitoring Partnership Forum)
- Data intelligence is used to understand where and what kind of service demand needs are in order to commission appropriately and effectively (Monthly Care at Home Commissioning meetings)
- Continue to engage with leaders across teams – informing and influencing change (Twice weekly ASC meetings)
- Continued engagement with people who access services and the involvement of Healthwatch and independent advocacy (Twice weekly ASC meetings)
- Joint working with 'skills for care' to encourage individuals to take up employment within the care sector (Weekly via Market Oversight meetings)
- Ongoing support for care providers to assist in their response to the COVID-19 outbreak (Fortnightly Mutual Aid calls with providers)
- 'Hidden Carer's' initiative launched through Carer's Hub to help identify and support carers not known to the system (Weekly via Market Oversight meetings)

Key Mitigating Controls:

- ASC/Commissioning comply with the Care Act 2014, in holding a provider risk register whereby we monitor and review risk pertaining to specific providers as part of our role working with Care Quality Commissioning pertaining to Market oversight

- ASC/Commissioning have in place a robust Care Act compliant – Contracts and Quality Monitoring Policy Framework – that makes clear – how quality is monitored in a person-centred way with a vast range of partners, when to activate a suspension protocol working with care quality commission and when/ how we are decommissioning services – keeping people at the centre of decision making regarding any service disruption or period of market failure
- ASC/Commissioning operate a monthly quality monitoring partnership forum that includes Police, Safeguarding, Care Quality Commission, ASC operations, Legal, CCG's and ASC lead commissioner – in the ongoing monitoring of quality and reporting and alerting of risk escalation that can be effectively managed – reports into relevant DMT's and Safeguarding Board
- ASC/Commissioning have a care sourcing/brokerage team support service and a local area co-ordination services- supporting vulnerable people to access wider community/ third sector services and wider more universal offers – diverting people away from care where appropriate utilising People Healing People services
- ASC/Commissioning provider financial self-assessment accreditation tool – to assist with the monitoring and management of potential uplift and or additional funding. This will ensure that funding is robustly based on clear evidence, against demand / trends in market development and impact on provider/ council and people accessing the service. For providers at risk we are offering an open book accounting exercise to ascertain the level of risk within that service
- ASC/Quarterly staff engagement groups are developed through leadership forums so to keep people informed and abreast of change as we progress in order to respond to demand and growth in the sector
- ASC/Commissioning are influencing and working with Cheshire CCG pertaining to local ICS and ICP plans regarding the overall reduction in demand and systems redesign work supporting an improved community offer and redesigned front door
- ASC/Commissioning with communities are developing a robust and responsive policy framework (People Helping People) with a vast range of third sector providers – thus reducing demand on adult social care
- ASC/Commissioning working with partners across the North-West via ADASS to address the future market capacity and workforce issues.
- The Council is working with skills for care to see what support it can give to the market in terms of recruitment and retention and build knowledge.
- As part of the contract management and quality assurance processes we check each provider's Business Continuity plan for robustness and make recommendations for improvement if required
- The Council has commissioned a new offer for informal and formal carers to ensure the right level of support is received for them to maintain their caring duties
- An on-call rota has been established to address any issues that may arise at weekends such as external provider staffing shortages impacting on the ability to undertake care calls
- The Council has written to service users to advise of the current situation and to request their patience and understanding if there is some disruption to their usual routine of care calls
- Care providers are RAG rated according to the risk of business disruption and have been asked to RAG rate service users according to their level of need
- Weekly market oversight and risk management meetings have been established within the Contracts and Quality team to update the risk register and oversight report and escalate issues as appropriate

Lead Service Committee: Adults and Health Committee

Risk Name: Reputation	**Risk Owner:** Chief Executive
Risk Ref: SR13	**Risk Manager:** Head of Communications, Head of Customer Services, Research and Consultation Team Leader
Risk Description: That consideration is not given, and management action is not taken, to effectively manage the reputation of the Council, leading to a loss of public confidence, threatening the stability of the Council and our ability to meet the corporate priorities. The risk is managed primarily through the work in three different areas; Communication & Media, Customer Experience and Consultation.	

Interdependencies: The emergence of any issue highlighted as a strategic risk has the potential to represent a strategic risk to reputation

Comments this quarter:

Communication & Media: Corporate Policy Committee approved the draft Communications Strategy for Residents to go to public consultation ahead of consideration for approval and adoption at CPC in December 2022. During this period (Q2) we saw particular interest and activity in the following topics:

- HM Queen Elizabeth II
- Great British Railway HQ bid
- HS2
- South Macclesfield Development Area
- Homes for Ukraine scheme
- Crewe Town Centre regeneration
- Best4Business programme
- Middlewich petition
- Roadworks
- Public art projects
- Recruitment and retention

Customer Experience: First phase of technology to enhance the management, monitoring and analysis of customer contact implemented October 2022. Further phases including the delivery of live chat functionality and the management of e mails to be delivered Q3. Revised process for managing the quality of complaints and formal correspondence approved and to be trialled within Planning Service Q3. Ongoing embedding and monitoring of the Customer Charter. Successful leadership session delivered and plans for further sessions to wider audience underway.

Consultation: Instances of EIA being published without modification or amendment have been occurring. As a result, a review of the sign off process will be undertaken to ensure that this remains robust and reduces risk. WLT have undertaken Customer Experience training. Improving the Customer Experience is a focus of the Transformation Programme, to support this new customer satisfaction measures have been developed and are monitored and reported on a quarterly basis through performance monitoring arrangements

Actions (Monitoring):

Communication & Media:
Explore development of communication strategies to influence public awareness of and informedness about key universal services, inc: planning, highways, waste and recycling (Quarterly review)
Further development of the communications approach to supporting decision making under the ctte system (On-going reviews)
Review Media Relations Protocol (Annual review)
Align developing communications strategy to customer experience and digital strategies and approach to consultation and engagement (Quarterly review)
Continue to develop proactive direct comms to be issued via e-mail / SMS – we currently have 34,000 subscribers for ‘push’ notifications across a range of topics (On-going review)

Include customer contact centre enquiries, MES and MP correspondence in reputation monitoring (On-going review)
Undertake a survey of residents to understand how they want to get information about council services, policies etc. To inform communications strategy(ies) and plans (Bi-annual review)
Use performance management reports for council services and programmes to identify reputational opportunities and risks at an early stage (On-going review)
Customer Experience
Improve the monitoring and analysis of customer contact and complaints to identify and resolve issues at an early stage
Introduce enhanced policies and procedures to improve the quality of responses to complaints and formal correspondence
Implement technology to enable front line staff to monitor the full end to end customer journey
Develop a new operating model for customer service delivery across the Council
Develop a policy for how the Council uses and engages with customers via social media
Consultation
Develop and introduce a One Council approach to consultation and engagement
Share and promote the new EIA template and guidance
The pilot of the Cheshire East People's Panel

Key Mitigating Controls:

Communication & Media;

- Effective monitoring and reporting of organisational reputation and sentiment.
- Weekly reputation reporting to senior managers
- Monitoring of social and traditional media
- Communications and media function advised at an early stage of all future demand and emerging issues to enable effective planning
- Providing a 24/7 emergency communications on call function
- Communications strategies for key projects and issues developed agreed and reviewed with senior stakeholders and decision makers
- Positive proactive communication across multiple channels to celebrate the council's successes and achievements, building positive reputation.
- Comms programme planned and reviewed over short-term (daily) and long-term (monthly / annually)
- Review communications business continuity, priorities and emergency / crisis comms protocols and plans
- Media protocol and approvals process
- Media training programme for key spokespersons
- Senior member overview of COVID-specific communications activity through Local Outbreak Engagement Board
- Regular COVID-specific comms activity reporting and planning as part of CEMART
- Regular meetings with comms leads from public sector partner organisations to collaborate, share plans and intelligence
- Values and behaviours for officers and members are established and organisational culture is monitored and supported through a range of initiatives under the culture programme.
- Ensure that information about the Council, its services and how to access them is easily available in a range of formats for a wide range of audiences
- Monitor public sector press (e.g. MJ and LGC) and maintain and develop relationships with these media outlets to maximise opportunities for positive coverage.

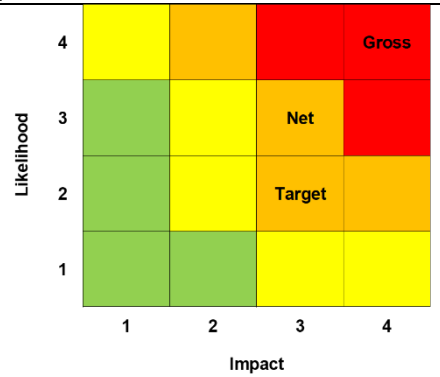
Customer Experience Existing Controls and Evidence;

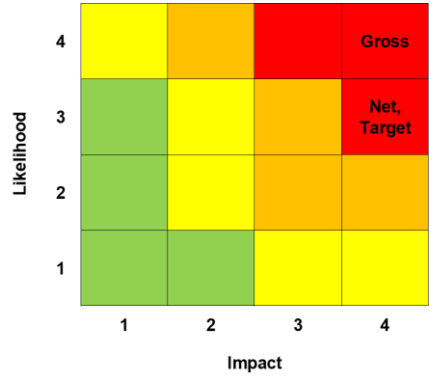
- Consistency in standards of service and behaviours through the Customer Charter
- Training for all staff and leaders to promote the importance of customer experience
- Key performance measures on customer satisfaction and experience monitored
- Random sampling and analysis of end to end customer journeys
- Customer satisfaction and effort assessed post contact
- Voice recording of all calls and ongoing performance management of Advisors
- Regular liaison with services to ensure ongoing accuracy of advice and information provided and to plan for initiatives likely to generate high customer demand
- Proactive identification of arising issues for customers and liaison with Communications Team to develop appropriate communications
- Continuous improvement team tasked with root cause analysis of issues and identifying service improvements

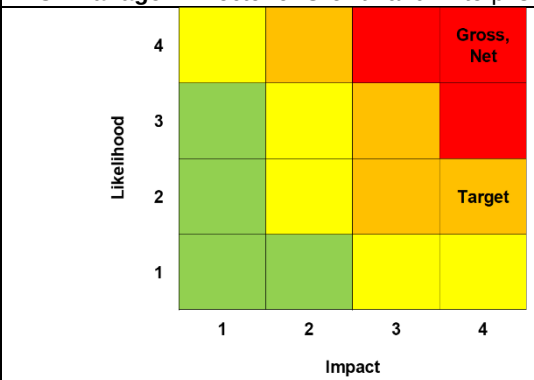
Consultation;

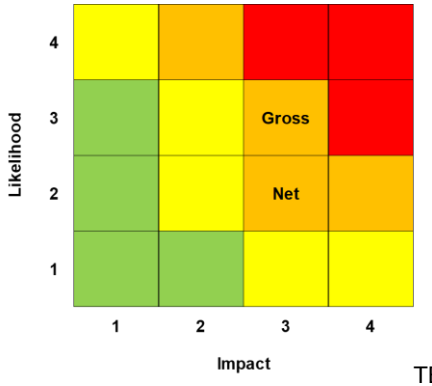
- Ensure that consultation is undertaken when any proposals are still at a formative stage
- Consultation must give sufficient reasons for any proposal or change to permit stakeholders to undertake intelligent consideration and response to the options
- Ensure consultation and engagement activity informs our evidence-based decision-making approach and that adequate time is given between the end of a consultation to allow for consideration of and where required, a response to, the output of a consultation or engagement

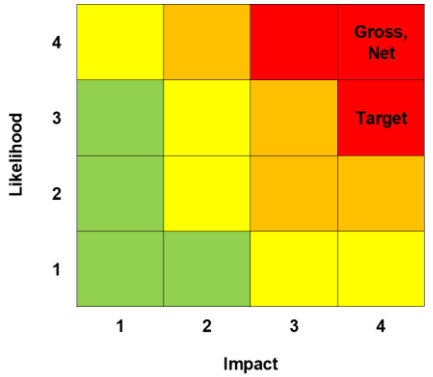
• Ensure that Equality Impact Assessments (EIA) are completed, appropriate for the purpose of use and that they are signed off before any consultation can begin • When communicating about decisions, make it clear HOW consultation and engagement activity, EIA and other intelligence has been conscientiously taken into account when finalising the decision • Evidence where are how output from consultation has been used to inform the decision-making process
Lead Service Committee: Corporate Policy Committee

Risk Name: Climate Change (CEC Carbon Neutral Status 2025)	**Risk Owner:** Executive Director of Place
Risk Ref: SR14	**Risk Manager:** Director of Environment & Neighbourhood Services, Head of Environmental Services
Risk Description: Failure to achieve Carbon Neutral status for the Council by the 2025 milestone target as a result of ineffective planning and delivery of actions, will result in non-delivery of a key priority in the Council's Corporate Plan. It will also contribute to climate change temperature rise and severe weather events which could have an impact on public health and safety. It could also have financial implications with increased need for adaptation of key infrastructure for severe weather events across the borough.	
Interdependencies (risks): Economy and World Events, Organisational Capacity and demand, Council funding, Capital Projects	
Comments this quarter: No material change to the risk in Q2, previously identified pressures remain a significant hurdle but existing controls and planned actions are being delivered as expected. No significant events to note since the last update.	
Actions (Monitoring):	
Secure land for tree planting and solar farm development for 2023/24 and 2024/25 planting seasons. (Final land agreements to be agreed with Assets and Rural Economy)	
Assess mitigation for risk of Fleet and Heat decarbonisation projects failing to meet targets. (Annual progress update presented to Economy & Growth committee)	
Key Mitigating Controls: • Risk is reviewed as part of the brighter futures transformation projects board, operational board and member steering group. • Carbon Neutral programme established with Programme Board reviewing progress and risks monthly • Member Advisory group overseeing its delivery • Annual update on progress reported to relevant committee • Climate change is a key consideration as part of our statutory planning duties as an authority and within the development of local planning policy • Planned natural offset set at 10% more than required to reduce risk of non-delivery in any one project area.	
Lead Service Committee: Environment and Communities	

Risk Name: Failure of the Local Economy	**Risk Owner:** Executive Director of Place
Risk Ref: SR15	**Risk Manager:** Director of Growth and Enterprise
Risk Description: Failure of the local economy The risk that the local economy does not realise the expected level of growth due to an inability to attract, grow and retain commercial enterprises, residents and visitors. The borough has a strong local economy, an above average Gross Value Added (GVA), some areas of deprivation and is reliant on a number of different industries. Consequences: The failure of enterprises reduces the local money supply, reducing the standard of living for residents and council income. Secondary effects can include a reduction in public health and the loss of highly trained or skilled individuals. Consequences and causes, over the medium to long-term can have a symbiotic relationship, creating either an upward or downwards spiral. An example of this is shops closing in a town centre, then reduced footfall resulting in further closures. Causes: The local economy is significantly driven by changes in the national economy, taxation and other government policies. However the failure to maintain parity, or offer benefits above other boroughs, can lead to a relatively larger economic downturn. As noted above poverty and deprivation, like other issues, can be both a consequence and cause causing a snowball effect.	
Interdependencies (risks): Capital Projects, HS2 Infrastructure Investment, Pandemic Virus, Climate Change	
Comments this quarter: Scope of the risk refined with a focus on the local economy rather than the national. Risk appetite, controls and interdependencies updated. No actions as net score is equal to target, indicating that the risk is being managed as well as possible given the level of influence available. As noted in the risk description, central government policy and the national economy are the main drivers. Recent political uncertainty and poor national economic performance have driven an increase in both net and target score although headroom remains for a further increase.	
Actions (Monitoring):	
N/A	
Key Mitigating Controls: • Employment support • Business forum to engage and plan future support • Investment plans to support regeneration and development • Place marketing and inward investment • Central government support and business grants	
Lead Service Committee: Economy and Growth	

Risk Name: Integrated Care System (ICS) Integration	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR16	**Risk Manager:** Director of Growth and Enterprise
Risk Description: The failure to integrate communication and decision-making with the local ICS partnership The ICS develops strategies that improve public health, reduce health inequalities and ensure the health and care system across Cheshire and Merseyside is sustainable. Potential consequences: Without effective and timely communication to support decision-making all partners could struggle to deliver their services to the best of their ability. Public health and wellbeing would suffer in the Cheshire and Merseyside areas. Potential causes: Poor or incomplete governance arrangements and delayed transfer of care assessments impact on the efficiency of the council services.	
Interdependencies (risks): Increased demand for Adult's Services, Increased demand for Children's Services, Pandemic Virus	
Comments this quarter: New Governance arrangements and section 75 have been approved and are now in place, including the Cheshire East Health and Care Partnership Board, which has met in shadow format, and will meet fully in Nov 22. The joint appointment of the Director of Commissioning within the ICB as the Associate Director Transformation & Partnerships /Cheshire & Mersey ICB Cheshire East will have an impact on communications from the ICS to the LA. Although Communications between the ICS and local 'Places' including the ICB are still limited while structures are still under developments, with ongoing mapping of programme at C&M and Place level. Visits are due on the 27th Oct and 7th Nov from the ICS (including Graham Urwin) with the Cheshire East Place to understand more about the progress and level of 'maturity' of the Cheshire East 'Place'. Our local self-assessments against the indicate that we have progressed against most of the domains within the C&M Maturing Framework. This is due to the development of our local integrated Governance arrangements, partnership working and strategic developments.	
Actions (Monitoring):	
To continue to be a key player in the development of the integrated care system at a regional and local level (Via ICS review visits (bi-monthly) new Governance arrangements (Monthly), A&H Committee (bi-monthly), Health and Wellbeing Board (bi-monthly))	
The development of new local Integrated Governance arrangements (Via Health and Care Partnership Board (bi-monthly) Leadership Group (bi-weekly))	
Joint appointment of the Director of Commissioning as the Associate Director of Transformation and Partnerships (Via the Director of Place and Executive Director of Adults, Health and Integration)	
Key Mitigating Controls: • The Cheshire East Integrated Care Partnership has been in place since October 2020 and is developing implementation plans across a number of work streams designed to achieve quality improvement and financial efficiencies across the system • Progress on the ICP is reported to the Health and Wellbeing Board and Adults and Health Committee • Evidence of progress and reporting is available via Full Council and Adults and Health Committee • Self-Assessments have been undertaken against the C&M Maturing Framework, which provides evidence of progress towards health and care integration against four domains. Presentations on local integration progress have been delivered during regular review visits with the ICS o Governance reports and minutes for newly formed Governance arrangements for integration including: o Health and Care Partnership Board o Strategic Planning and Transformation Group o Operational Group o Enabler Workstreams o Programme Groups o Care Communities	
Lead Service Committee: Adults and Health Committee	

Risk Name: Local Planning Authority Modernisation Plan	**Risk Owner:** Executive Director of Place
Risk Ref: SR17 (NEW)	**Risk Manager:** Director of Environmental and Neighbourhood Services
Risk Description: Following the completion and report of the Local Planning Authority Report, a modernisation plan is in place to achieve the transformation of the service. Failure to complete the actions of the modernisation plan will undermine the planned transformation of the service, perpetuating and potentially extending the issues identified and undermining the reputation of the organisation. Detailed consequences: Failure to achieve completion of the modernisation plan will undermine the performance of the Council in its Local Planning Authority role, result in non-compliance with statutory processes, and reputational damage to the Council. By not achieving the modernisation plan within agreed timescales, the potential for overspend increases. Detailed causes: Insufficiency of the relevant/necessary resource to ensure completion of actions in the required timescales (ICT, staff, and skills), failure to engage with internal and external stakeholders to affect necessary changes, lack of oversight from the Planning Transformation Board, lack of agreed change management process within the modernisation plan.	 TBC
Interdependencies (risks): Organisational Capacity and Demand, Reputation, Council Funding,	
Comments this quarter: TBC	
Actions (Monitoring):	
TBC	
Key Mitigating Controls: • Environment and Communities Report 31/10/2022; Local Planning Authority Review and Service Transformation Report and Modernisation Plan. • Planning Services Transformation Plan • Monitoring of progress against modernisation plan by Transformation Board and Environment and Communities Board • Internal Audit reports on Community Infrastructure Levy and Section 106 will inform the scope of a member/officer working group	
Lead Service Committee: Environment and Communities	

Risk Name: Delivery of the JTAI Improvement Plan	**Risk Owner:** Executive Director of Children's Services
Risk Ref: SR18 (NEW)	**Risk Manager:** Executive Director of Children's Services
Risk Description: That as a safeguarding children's partnership, Cheshire East Council's children's services, health, and police, do not achieve the improvements needed at the necessary pace to address the recommendations from the joint targeted area inspection (JTAI) of child exploitation, including child sexual exploitation. This would mean that we would not achieve the council's desired outcomes for children and young people at risk of exploitation. There is also a reputational risk of not delivering the required improvements, as this could result in an inadequate rating by Ofsted. An inadequate rating by Ofsted would have a significant impact on the council's reputation, ability to recruit and retain staff, and would increase costs in order to deliver improvement activity. Significant work is required to deliver these improvements which requires sufficient capacity and resources. High quality work to support children and young people is dependent on being able to achieve a stable and experienced workforce. Nationally and locally there are challenges recruiting and retaining staff within specific areas of children's services, which is resulting in higher than average workloads and some delays in delivering services. There is a risk that this could result in children experiencing delays in receiving support leading to escalation of need and increased risk of poorer outcomes - including risk of harm and risk to life, a lack of continuity of workers for children and young people, and increased costs to the council.	

Interdependencies (risks): This risk shares an interdependency with the risk relating to demand to children's services, and demand to adult social care and health services. If adult services or NHS services experience an increase in demand/ complexity this could impact on the quality of support delivered by children's services, as services rely on adults and health input to ensure children's needs are assessed and met. Increased demand to children's services will result in increased workloads which will impact on the ability to release staff for training or to deliver high quality and timely work. Improving the quality of support to children and young people requires all three statutory partners (local authority, health and police) to work together effectively to develop services at pace. All three agencies are dependent on each other to work together as a partnership and provide robust scrutiny and challenge on the outcomes achieved for children and young people.

Comments this quarter: This is a new risk following the joint targeted inspection of child exploitation in Cheshire East, and the publication of the inspection findings. A number of changes were made immediately following the inspection to ensure that children and young people at risk of exploitation were safe, and to improve processes to protect children and young people from harm. A comprehensive partnership improvement plan is now in place which addresses all of the recommendations from the inspection as detailed in the letter of findings. An Improvement Executive Board is in place to scrutinise progress against the plan and ensure that this is achieved at pace. Governance arrangements are currently being established to support effective delivery of the plan and scrutiny of its impact on outcomes for children and young people. There is strong partnership commitment to ensuring changes are achieved for children and young people.

Actions (Monitoring):

Establish robust governance structures to support the delivery and evaluation of the improvement plan (Improvement Group to review to ensure achieved by the completion date)

Independent scrutineer to conduct a review of the LSCP Executive and the sub-groups with recommendations on developments to enable the partnership to improve its effectiveness and impact for children and young people (Safeguarding Children's Partnership Executive to ensure achieved by the completion date)

Deliver the improvement plan and scrutinise impact on outcomes for children and young people at risk of exploitation (Monthly by the Improvement Executive Board)

Key Mitigating Controls:

- A partnership review was completed immediately following the inspection to ensure that all children and young people at risk of exploitation had the right plans in place to support them. No child/ young person was identified as being at immediate risk.
- We have a comprehensive partnership improvement plan in place to address the recommendations from the JTAI inspection.
- An independent scrutineer has been recruited to provide scrutiny to the partnership.
- Meetings of the Executive Group of the Safeguarding Children's Partnership have been increased to bi-monthly from quarterly to support increased pace of change.
- An Executive Board is in place which consists of the Chief Executive of the council, Chief Constable and Chief Nurse, which scrutinises partnership progress against the improvement plan.
- A strategic improvement group is in place which is focused on delivery of the improvement plan.
- All exploitation screening tools received by the front door are now reviewed within 24 hours and managed as a contact. This involves partnership information gathering, analysis by an experienced social worker and management approval of the most appropriate course of action. A decision will be made on the same day either to progress to a referral to children's social care and allocated to a social worker or into early help and prevention and allocated to an early help practitioner. Statutory intervention commences immediately including a visit to the child and the initiation of a child and family assessment, and specific risk mitigation now begins without delay.

• The integrated front door meeting now retrospectively reviews the immediate safety planning for all children at risk of exploitation who have been referred into either children's social care or early help in the previous 7 days. • Performance is monitored on a monthly basis by services. The children and families quarterly scorecard is reviewed at the Children and Families Committee and the Safeguarding Review Meeting attended by the chief executive and lead member for children and families. The Safeguarding Review Meeting includes discussion of workforce pressures and risks. • Audits of practice are completed quarterly to evaluate the quality of practice and the effectiveness of service improvements.
Lead Service Committee: Children and Families Committee