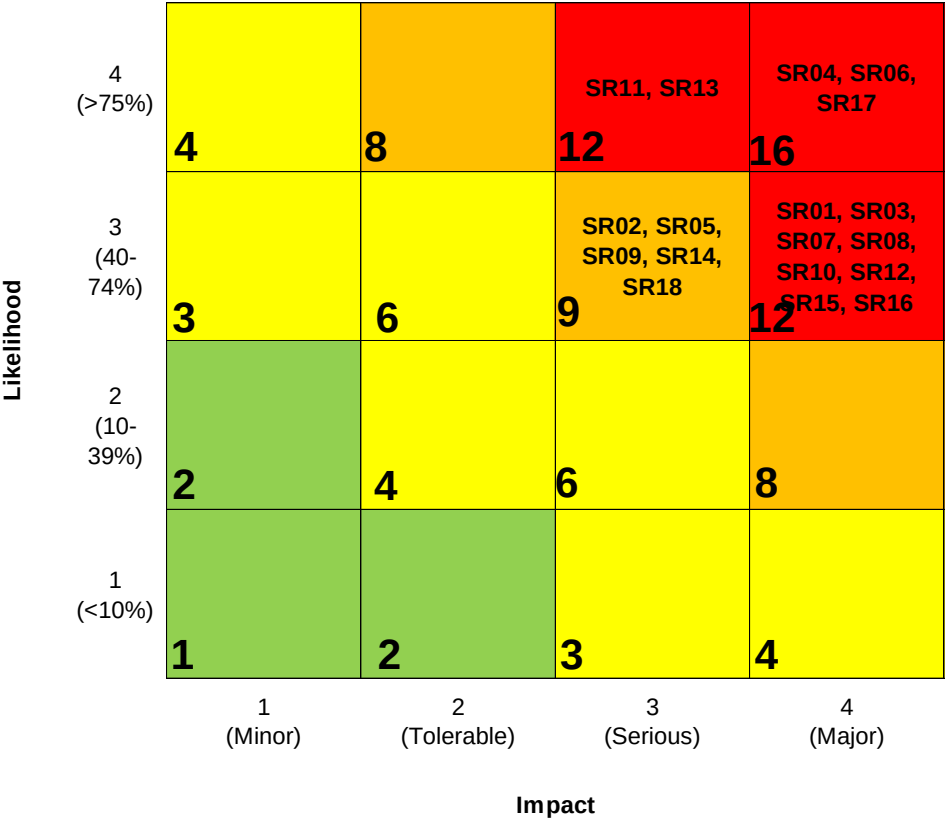


Strategic Risk Summary – Changes in Net Scores Q4 2023/24

Ref	Risk	Q3 Net	Q4 Net	Travel	Target
SR01	Increased Demand for Adult's Services	12	12	↔	9
SR02	Fragility and failure in the Social Care Market	9	9	↔	9
SR03	Complexity and Demand for Children's Services	12	12	↔	12
SR04	Dedicated School Grant Deficit	16	16	↔	16
SR05	Failure to Protect Vulnerable Children	-	9	NEW	6
SR06	Failure to Achieve the MTFs	16	16	↔	9
SR07	Leadership Capacity	12	12	↔	9
SR08	Ability to Achieve Organisation Change	12	12	↔	8
SR09	Recruitment & Retention	9	9	↔	9
SR10	Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks	12	12	↔	8
SR11	Failure to Adhere to Agreed Governance Processes	9	9	↔	6
SR12	Stakeholder Expectation & Communication	12	12	↔	9
SR13	Information Security and Cyber Threat	12	12	↔	12
SR14	Business Continuity	9	9	↔	6
SR15	Capital Projects - Place	8	12	↑	8
SR16	Failure of the Local Economy	12	12	↔	12
SR17	CEC Carbon Neutral Status	12	16	↑	16
SR18	Local Planning Authority Modernisation Plan	9	9	↔	6

Strategic Risks Heat Map Q4 2023/24

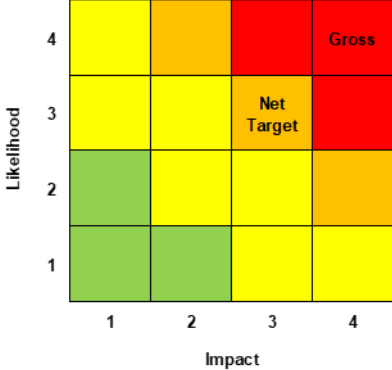


12 - 16	Critical Risks - Only acceptable in the short to medium-term, requires immediate action implementing and close monitoring
8 - 9	Material Risks - Areas of concern, but due to capacity and or uncontrollable external factors, these can be accepted. Expectation is that these must be actively managed with on-going monitoring to ensure they don't escalate
3 - 6	Moderate Risks - Acceptable level of risk only requiring on-going monitoring to ensure they don't develop into something more serious
1 - 2	Negligible Risks - Lowest level of risk, only kept in the register for completeness and to ensure there are no unexpected changes in the profile

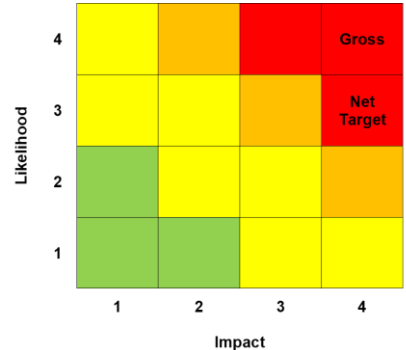
Individual Risk Details – Q4 2023/24

Risk Name: Increased Demand for Adult Services		Risk Owner: Executive Director of Adults, Health, and Integration
Risk Ref: SR01	Date updated: 9 th April 2024	Risk Manager: Director of Adult Social Care Operations
Risk Description: An increase in demand for adult social services that cannot be met within the existing budget. 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 and other socio-economic factors. There has been an increase in responsibility and duties being transferred to LA i.e. RCRP. 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. The increase in demand and complexity for services has not been recognised with increased established staffing, resulting in use of Agency Staff to fill the void.		
Interdependencies (risks): Failure of Council Funding, Fragility in the social care market, Failure of the local economy, Organisational capacity and demand		Lead Service Committee: Adults and Health Committee
Key Mitigating Controls (Existing): • Delivery of market engagement events, keeping providers / people informed of preventative change resulting from the People Live Well, for Longer Transformation Programme. • Contracts and Quality Monitoring Policy Framework, monitoring the user outcomes that partners are delivering. This helps to inform the managed decommissioning of services, in an effort to reduce service disruption. Maintaining a provider risk register with the Care Quality Commission to ensure market oversight. A standard set of fit for the future contracts, designed to ensure quality outcomes for users and ensure provider's business models remain sustainable as demand changes. • Monthly quality monitoring partnership forum that reports to relevant DMTs and the Safeguarding Board. Attendees include the Police, Safeguarding, Care Quality Commission, ASC operations, Legal, CCG's and ASC lead commissioner. • People Helping People programme, working collaboratively with partners and local volunteers to channel community-based support, reducing demand on adult social care. The sourcing/brokerage team support the co-ordination of these services, helping vulnerable people to access non-council support where appropriate. • Direct payment scheme, allowing users identify and manage their own care support. • The preventative policy framework standardises the approach to prevention across adult social care "front door. When appropriate, directing users to approved community solutions, which can provide non-traditional benefits to those individuals and help maintain their independence.		

• Annual financial and resource planning by ASC services, considering expected demand, funding, the local social care market and other socio-economic trends. • Regular service/team meetings to disseminate information and discuss operational issues. • Involvement 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. • Collaborative working with other services, such Public Health, where objectives align and communication is required to delivery value for money. Utilisation of Public Health JSNA and wider regional data sets inform future planning. The joint commissioning management monthly working group seeks to ensure ASC is working effectively and efficiently with other Children and Family services. • Engagement with the Integrated Care Partnership, including health partners. • Regular ASC reporting to CLT and Adult and Health Committee on performance, expenditure/budget and demand. On-going management of services, based on performance, expenditure/budget and demand management information. Trend analysis used to help predict future demand. • Engagement with service users, collaboration with Healthwatch and other independent organisations to help drive service improvements and cost savings. • Business continuity assessments and resiliency preparation, both internally and with key partners. • Implementing recommendations of independent review. All care plans presented to Senior Leasers board for authorisation of spend. • Tighter controls on hospital discharge will impact relationship with ICB colleagues. • 3 times weekly Quality, Performance and Authorisation Board to review every request for care, since the start of this regime over 2000 cases have been reviewed to ensure that the package of care is effective and efficient. • Weekly Extended leadership meeting to review budget, spend and activity.	
Actions (Monitoring):	Target Date for Completion:
Implementation of Impower Consulting review (Weekly CEBERT meetings)	Q4 2023/24
Comments this quarter: Increased efforts from our First Point of Contact teams has seen the number of referrals going on to full assessment remain static demonstrating our work towards 'prevent, reduce, delay' having a positive impact on demand. However, the referrals progressing to assessment continue to evidence higher complexity and need. The demand and complexity of young people moving from children Services is resulting on increases pressure on the Preparing for Adulthood team and the increase in financial pressure on the services. There is no change to the risk rating or description. Continued efforts from the 3 times weekly Quality, Performance and Authorisation Board is attempting to reduce spend where possible. Fee increases from providers continues to be the biggest pressure on the services.	
Timescale for managing risk to an acceptable level: The outcomes from the work commissioned with Impower is being actioned via HLBC, we are monitoring all support and care plans and calls for services on a 3x per week basis, Director is monitoring approx 150 cases per week. Demand is constant especially for those who are 90+ yrs, and for those with dementia. Cost of individual care packages remains very high with an increasing number £2000 per week.	

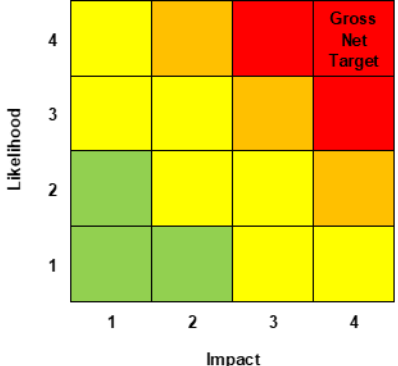
Risk Name: Fragility and Failure in the Social Care Market		Risk Owner: Executive Director of Adults, Health and Integration
Risk Ref: SR02	Date updated: 5 th April 2024	Risk Manager: Director of Commissioning
Risk Description: A failure of the local social care market. Increases in the volume and complexity in demand and financial pressures have caused 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. If the Council is unable to increase fees for providers it will impact on the sustainability of some care providers and result in some packages of care being handed back to the Council or notices served on care home residents. This could lead to a need to increase the use of care providers who have not been through a formal tendering process which in some cases could result in higher costs and/or poorer quality. While due diligence is undertaken for these providers, some providers do not fully co-operate with this process. It will also bring challenges in managing budgets in 2024/25. Detailed causes: the major risk going forward is the financial impacts on providers resulting from the 9.8% uplift in National Living Wage from April 2024 and high rates of inflation. The current financial position of the local authority precludes it from uplifting care fees for all care contracts in 2024/25.		
Interdependencies (risks): Failure to Achieve the MTFs, Business Continuity, Failure of the Local Economy		Lead Service Committee: Adults and Health Committee
Key Mitigating Controls: - Contracts and Quality Monitoring Policy Framework, monitoring the user outcomes that partners are delivering. This helps to inform the managed decommissioning of services, in an effort to reduce service disruption. Maintaining a provider risk register with the Care Quality Commissioning to ensure market oversight. A standard set of fit for the future contracts, designed to ensure quality outcomes for users and ensure provider's business models remain sustainable as demand changes. - Increasing the robustness of due diligence on care providers who have not been through a formal tendering process. - Comprehensive cost of care exercise to be undertaken with all care providers to ensure that care packages are sustainable and available resources are distributed fairly. - Delivery of market engagement events, keeping providers / people informed of preventative change resulting from the People Live Well, for Longer Transformation Programme. - The preventative policy framework standardises the approach to prevention across adult social care "front door. When appropriate, directing users to approved community solutions, which can provide non-traditional benefits to those individuals and help maintain their independence. - Annual financial and resource planning by ASC services, considering expected demand, funding, the local social care market, and other socio-economic trends. Development and publication of the Market Sustainability Plan. Completion and submission of the Cheshire East Market Availability and Capacity Plan to DHSC. - Involvement 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. - Update of the joint Market Position Statement with ICS to ensure that care providers receive timely information about commissioning intentions. - Regular ASC reporting to CLT and Adult and Health Committee on performance, expenditure/budget and demand. On-going management of services, based on performance, expenditure/budget and demand management information. Trend analysis used to help predict future demand.		

- Engagement with service users, collaboration with Healthwatch and other independent organisations to help drive service improvements and cost savings. - Business continuity assessments and resiliency preparation, both internally and with key partners. - 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. Providers have access to recruiting staff from abroad if there isn't a sufficient supply available locally. Development of a Workforce Strategy for the external care workforce. - Investigation and investment into new health and care technologies. Use of new technologies to be driven by considering performance, capacity, and value for more against more traditional methods. - A Joint CEC/ICB Market Oversight Group meets daily to ensure that the Council is obtaining best value for care home placements and making best use of block booked care home beds. - A Transfer of Care Hub has been set up in both hospitals with key staff from CEC and Hospital Trusts co-located to improve joint working and ease pressures on hospital discharge. - Commissioners undertake Market Engagement activities with Care at home Providers to Coproduce new models of care. Joint working with 'Skills for Care' to encourage individuals to take up employment within the care sector. 'Hidden Carer's' initiative launched through Carer's Hub to help identify and support carers not known to the system. - Low level support for the British Red Cross who respond to crisis situations in the community. - A tool called Care Cubed has been commissioned to assess the actual cost of delivering care for individual care providers and benchmark against market prices.	
Actions (Monitoring):	Target Date for Completion:
Develop engagement with community groups and 3rd sector (VCFSE Project Group, monthly and Commissioning SMT, weekly)	December 2023
Commissioning of Care Cubes (Monthly DMT)	March 2024
Comments this quarter: No change to the risk at this time. As predicted in Q3 we are seeing an increase in the number of providers requesting uplifts as a result of the increase in National Living Wage. However, it is too early to assess the impact on the market and whether packages of care will be handed back. Fees have been uplifted for packages of care on the Complex framework to £18.52 per hour and there has been a substantial uplift in the rate paid for waking nights equivalent to £18.52 per hour. The Council has also purchased a fee analysis tool called Care Cubed which will provide greater insight into the true cost of delivering care to inform negotiations with individual care providers. This will start to be rolled out in Q1 2024/25.	
Timescale for managing risk to an acceptable level: N/A (Net score is equal to target). To a certain extent the risk is outside the Council's control as there is a reduced pool of people who wish to work in Social Care.	

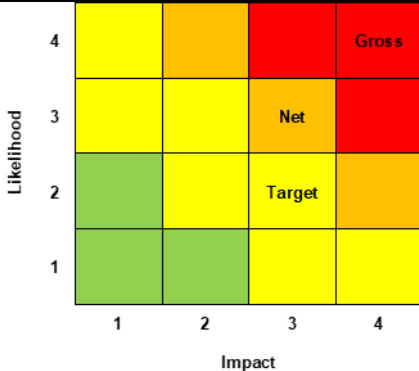
Risk Name: Complexity and Demand for Children's Services		Risk Owner: Executive Director of Children's Services
Risk Ref: SR03	Date updated: 16 th April 2024	Risk Manager: Children's Services Directorate Leadership Team
Risk Description: That Cheshire East's local social, economic and demographic factors, including the impact of the pandemic, lead to an increase in the level and/or complexity of need and demand for children's services, which the council cannot meet effectively. This risk would mean that we would not achieve the council's desired outcomes for children and young people as set out in the council's Corporate Plan. The service received growth through the MTFS to help address the pressures but the challenge to deliver to budget and achieve the required savings remains present. Significant action is still required to deliver savings to live within the budget as all indications are that demand, complexity and cost will continue to increase.		 The risk matrix shows a 4x4 grid of risk levels. The y-axis is labeled 'Likelihood' with values 1, 2, 3, 4. The x-axis is labeled 'Impact' with values 1, 2, 3, 4. The cells are color-coded: Green (Low), Yellow (Medium), Orange (High), and Red (Very High). The current risk is at (4,4) in the Red zone. Labels 'Gross' and 'Net Target' are in the (4,4) and (4,3) cells respectively.
Interdependencies (risks): Increased Demand for Adult Services, Insufficient and Non-Compliance with Financial Processes, Organisation Capacity and Demand, Failure to Achieve the MTFS, Failure of the Local Economy		Lead Service Committee: Children and Families Committee
Key Mitigating Controls: - The service has received growth through the MTFS in 2023/24 to help address the pressures. This includes growth for children's social care in response to the demand. Additional growth to address budget pressures within services has been agreed in the MTFS for 2024/25, including £10.8m to address placement costs for children. - Extensive activity is taking place to manage and reduce costs. A fundamental review and realignment exercise for children's services will be carried out to future-proof services to deliver differently for less as part of our integrated children's services 4-year strategy. - 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 by services. - 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. - Our approach is to ensure only the right children come into care; this is right for children and young people and will also reduce demand to Children's Social Care services, however this is a challenging landscape. Increased demand for placements has increased costs. We will continue to look to identify options for children to live within their family networks where this is the best outcome for them. We have been successful in gaining DfE funding for innovation and supporting family networks which will increase opportunities for children to remain living in their families. - We are continuing to support children and young people who are most vulnerable through the Household Support Fund and the Holiday Activity Fund. Vouchers worth £4m were distributed on behalf of the Department of Work and Pensions over 2023/24 to support the most vulnerable households across the county with food, utilities, housing costs, and other essentials. - A workforce strategy has been developed for children's social care to support recruitment and retention as we know the quality and stability of our workforce is critical in offering strong support and enduring relationships to children and their families. - We have implemented Family Hubs, bringing council, health and community services together – improving access and reach of services, supporting earlier intervention, and improving partnership working. Over the past 12 months the council has opened five family hubs across the borough, including a SEND Centre of Excellence, as well as a new digital offer so families can also access advice and information online.		

Appendix A – Q4 2023/24 Strategic Risk Register Detail

Actions (Monitoring):	Target Date for Completion:
A fundamental review and realignment exercise for children's services will be carried out to future-proof services to deliver differently for less as part of our integrated children's services 4-year strategy (Progress will be monitored through the MTFS arrangements)	March 2027
Expanding our in-house residential provision to offer more local and cost-effective homes for children and young people (Children's social care senior leadership team to monitor progress)	June 2024
Develop and deliver a new improvement plan to respond to the Ofsted ILACS inspection findings (Progress on the improvement plan will be monitored on a monthly basis by the independently chaired Improvement and Impact Board)	June 2024
Develop a Corporate Parents Working Group to drive improved outcomes	May 2024
Comments this quarter: No change to the net rating, it remains 12, a material risk, equal to the target score. Cheshire East Council received an Ofsted inspection of Children's Services during February and March 2024. We are currently developing a new improvement plan to respond to the findings from the inspection. The delivery and impact of this will be evaluated through an independently chaired monthly Improvement and Impact Board. Additional growth to address budget pressures within services has been agreed in the MTFS for 2024/25, including £10.8m to address placement costs for children. We have implemented Family Hubs, bringing council, health and community services together – improving access and reach of services, supporting earlier intervention, and improving partnership working. Over the past 12 months the council has opened five family hubs across the borough, including a SEND Centre of Excellence, as well as a new digital offer so families can also access advice and information online. Timescale for managing risk to an acceptable level: March 2026. The integrated children's services strategy is a 4-year plan. We aim to see an incremental reduction in the risk as we implement our strategy with aim to be at a low level of risk by 2026.	

Risk Name: Dedicated School Grant Deficit		Risk Owner: Executive Director of Children's Services
Risk Ref: SR04	Date updated: 29 th April 2024	Risk Manager: Children's Services Directorate Leadership Team
Risk Description: That the deficit held in the dedicated schools grant (DSG) continues to rise and/or is not recoverable. The DSG reserve deficit is forecast to be £89.6m based on a grant of £56.1m at the end of 2023/24. The final outturn position for 2023/2024 is currently being finalised as part of the closure of accounts for 2023/24. The mitigated cumulative forecast reserve deficit identified through the Safety Valve programme is £285m. This is in part as a result of the growth in the number of pupils with an education, health and care plan greatly exceeding the funding and insufficient local placement options. This is a national issue and local authorities are required to hold a negative reserve for this purpose which is in place until March 2026. This position is unaffordable and unsustainable. The arrangements beyond March 2026 are not confirmed by the Department for Levelling Up, Housing and Communities (DLUHC). This risk continues to be a feature of ongoing liaison with the Department for Education and the DLUHC. Without significant changes to funding the DSG reserve deficit is not recoverable. Significant action is required to deliver savings to live within the budget as all indications are that demand, complexity and cost will continue to increase.		
Interdependencies (risks): Increased Demand for Adult Services, Insufficient and Non-Compliance with Financial Processes, Organisation Capacity and Demand, Failure to Achieve the MTFS, Failure of the Local Economy		Lead Service Committee: Children and Families Committee
Key Mitigating Controls: - On 7 September 2023, we accepted an invitation from the Department for Education to start negotiations to join their Safety Valve programme, which would provide more help from the government to balance our budget. The aim of the Safety Valve programme is to agree a package of reform to improve the performance of local authorities' high needs systems and ensure this is delivered in a sustainable way, for the benefit of children and young people, whilst bringing DSG deficits under control. We submitted detailed plans to the government in January 2024. In March 2024 Ministers advised that they are currently unable to enter into an agreement with Cheshire East as Cheshire East's Safety Valve submission included an ask of the Department which is significantly above the level which the Department could reasonably afford in comparison to other agreements. Ministers recognise that the DSG deficit as forecasted poses a substantial risk to Cheshire East, and propose to work with us over the coming months, alongside colleagues from DLUHC, to seek an appropriate solution. - The DSG management plan is 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. A revised DSG management plan for 2024/25 to 2030/31 was approved by the Children and Families Committee on 29 April 2024. The committee also received an update on the Safety Valve submission. - The council has updated the SEN sufficiency statement for 2023/24 to 2025/26, and the SEND strategy, which were received and agreed alongside the DSG management plan for 2023/24 to 2027/28 by the Children and Families Committee in September 2023. The SEN sufficiency statement sets out the additional provision needed over the next three years. The SEND strategy has been refreshed to include priority actions relating to the mitigations with the revisited DSG management plan 2024-2031. - The service has received growth through the MTFS in 2023/24 to help address the pressures. This includes growth for school transport, Educational Psychology and SEND services in response to the demand in these areas. Additional growth has been agreed in the MTFS budget for 2024/25, including £0.5m to support transformation for SEND, and £0.9m for school transport, reflecting increased demand and increasing costs of fuel and contracts. - There is significant capital investment in local SEND provision to meets children's needs more locally but also reduce dependency on high-cost independent school placements. - We are embedding a graduated approach and inclusion across all schools and settings and strengthening SEN support.		

- We participated in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND. This identified two priority areas of cultural change that will make the biggest difference on managing demand – inclusive practice and transition. Cheshire East has been awarded £1 million to support the delivery of this transformational change. These areas have been incorporated within our SEND Strategy. - A fundamental review and realignment exercise for children's services will be carried out to future-proof services to deliver differently for less as part of our integrated children's services 4-year strategy. - 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.	
Actions (Monitoring):	Target Date for Completion:
A fundamental review and realignment exercise for children's services will be carried out to future-proof services to deliver differently for less as part of our integrated children's services 4-year strategy. (Progress will be monitored through the MTFS arrangements)	March 2027
Delivery of the delivering better value implementation plan (Children's services senior leadership team)	March 2025
Continue to increase SEND provision in Cheshire East (Reviewed quarterly)	September 2024
Embed the graduated approach and inclusion across all schools and settings and strengthen SEN support (Reviewed quarterly)	September 2025
Implement the Safety Valve plan (Quarterly by the DfE if accepted onto the programme. If not accepted the plan will be monitored internally through a CEX lead board with member involvement).	March 2031
Comments this quarter: Cheshire East submitted detailed plans to the Government on 12 January 2024 as part of the department for education's (DfE) Safety Valve programme. The plans set out how the council proposed to reform services for children and young people with special educational needs and disabilities (SEND) and achieve a balanced and sustainable dedicated schools grant budget. The Safety Valve programme is in place to provide additional support, including financial support, to councils as they work to reform support and services for children with SEND, to improve sustainability and affordability. In March 2024 Ministers advised that they are currently unable to enter into an agreement with Cheshire East as Cheshire East's Safety Valve submission included an ask of the Department which is significantly above the level which the Department could reasonably afford in comparison to other agreements. Ministers recognise that the DSG deficit as forecasted poses a substantial risk to Cheshire East, and propose to work with us over the coming months, alongside colleagues from DLUHC, to seek an appropriate solution. The DSG management plan is 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. A revised DSG management plan for 2024/25 to 2030/31 was approved by the Children and Families Committee on 29 April 2024. The committee also received an update on the Safety Valve submission. With significant and challenging mitigations we are now forecasting an in year balanced position by year 7. Additional growth has been agreed in the MTFS budget for 2024/25, including £0.5m to support transformation for SEND, and £0.9m for school transport, reflecting increased demand and increasing costs of fuel and contracts.	
Timescale for managing risk to an acceptable level: March 2025. We aim to see an incremental reduction in the risk as we implement our plan. By the end of March 2025, we aim for the risk to be reduced to a score of 12, then to see this continue to reduce over the following years with aim to be at an acceptable level of risk by 2026.	

Risk Name: Failure to protect vulnerable children		Risk Owner: Executive Director of Children's Services	
Risk Ref: SR05	Date updated: 8 th May 2024	Risk Manager: Quality and Impact Board	
Risk Description: The risk, that as a part of the local safeguarding children's partnership, Cheshire East Council's children's services are unable to fulfil their responsibilities relating to the protection of vulnerable children at risk of criminal exploitation and child sexual abuse. To do this Cheshire East seeks to be an effective and collaborative partner in the partnership. Ofsted are responsible for conducting inspections into the quality of children's social care provided by Cheshire East and as the local authority responsible Cheshire East is continually looking to meet those expectations in an ever-changing and challenging environment.			
Interdependencies (risks): Increased Demand for Adult Services, Complexity and Demand for Children's Services		Lead Service Committee: Children and Families Committee	
Key Mitigating Controls: • The Quarterly Quality and Impact board has oversight of the Multi Agency Safeguarding Arrangements. There are 3 Statutory Partners; Health, Local Authority and Police. The Statutory Partners form the Cheshire East Safeguarding Children's Partnership. Working Together 2023 outlines the responsibility of the Statutory Partners to involve other agencies. • 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. • Ofsted regularly inspect the Local Authority and the partnership arrangements. • The partnership ensures awareness within all agencies by proving regular training focused on exploitation. The training facilitates communication, increased knowledge and understanding and working together. • We have an Exploitation Strategy, practice guidance, and training for frontline practitioners. This all ensures there is a clear partnership approach to supporting children and young people at risk of exploitation. • There is a shared understanding of the children and young people who are at risk of exploitation across the partnership. • There are regular multi agency audit of practice are completed for children at risk of exploitation to evaluate the impact of changes on quality of practice. • Committee will have oversight through the annual report and any inspection reports. • Quarterly reports are developed through the Learning and Improvement sub group and the CS/SOC Strategic group to provide the direct line of sight from practitioners to Executive members. • Voice of the child case study is presented at every Executive Board. This demonstrates the impact that services and intervention are making for the child.			
Actions (Monitoring):		Target Date for Completion	
CS SOC Impact report to be presented to the Quality and Impact board (Quality and Impact Board)		June 2024	
Consider the outcome of ILACS inspection (Quality and Impact Board)		June 2024	

Comments this quarter: This risk previously related to the JTAI improvement plan where a number of recommendations were made and required to protect children at risk of exploitation. As previously reported, all actions were met through the improvement plan which had DfE oversight throughout. The scope of the risk has transitioned to taking an ongoing view of how well the council is protecting its vulnerable children.

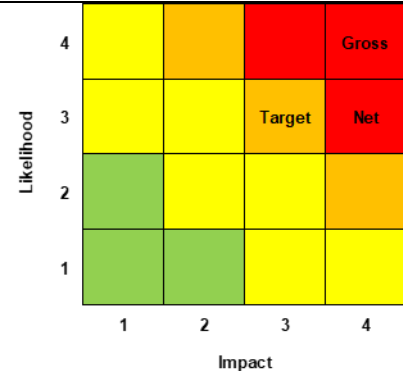
Contextual Safeguarding has remained a partnership priority throughout 2023/2024. There is audit activity underway and an impact report is being developed to understand the progress made against the exploitation strategy. Any recommendations will be actioned across the partnership.

As this update covers the period of January to March 2024, it is noted that the outcome of the ILACS Ofsted inspection is expected in May. The gross, net and target scores have been set to reflect the new scope of the risk and as the outcome of the above actions are awaited.

Timescale for managing risk to an acceptable level: TBC in the Q1 update.

Risk Name: Failure to Achieve the MTFS		Risk Owner: Director of Finance and Customer Services (s151 Officer)																																		
Risk Ref: SR06	Date updated: 10 th May 2024	Risk Manager: Head of Finance																																		
Risk Description: Failure to achieve approved changes and manage net spending within the MTFS agreed by Council within the expected timescales will undermine the Council's ability to manage its budget effectively in the current and future years. Potential impacts: Failure to achieve the agreed annual budget will reduce the Councils reserves and may endanger its medium-term financial stability, ultimately leading to reduction in the services it can provide to its residents, due to having to issue a Section 114 Notice. Poor management of specific grant funding can also result in the Council having to repay those monies. Drivers of likelihood: Key drivers of this risk are a lack of effective strategic and/ or operational management, and a lack of ability and/ or authority to implement change, along with global and national events adversely affecting levels of inflation and prices.		<table><tr><td rowspan="4">Likelihood</td><td>4</td><td></td><td></td><td></td><td>Gross Net</td></tr><tr><td>3</td><td></td><td></td><td>Target</td><td></td></tr><tr><td>2</td><td></td><td></td><td></td><td></td></tr><tr><td>1</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td></tr><tr><td></td><td></td><td colspan="4">Impact</td></tr></table>		Likelihood	4				Gross Net	3			Target		2					1							1	2	3	4			Impact			
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Interdependencies (risks): all		Lead Service Committee: Corporate Policy Committee																																		
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 - Use of a standard 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 with the Constitution - Sources of specialist advice and guidance - Budget monitoring, comparing actual performance against approved budget, is undertaken throughout the financial year and presented to service committees, in the form of forward-looking forecast outturn reports - 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 in a financial year, a number of actions will be explored including:- - use of any service or non-specific underspend 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 • Engagement with government departments related to financial models and consultation • Education and training for officers and Members, including financial management in local government, the CIPFA FM Code, and Finance and Contract Procedure rules • Reporting of status and action plan on CIPFA FM Code • Budget management regime implemented early in 2023/24 to track activities relating to delivery of approved budget changes • Spending management regime implemented in October 2023, to control and reduce spending on staffing and supplies and services; review fees and charges to customers; and approaches to charging costs to capital projects and using capital receipts	
Actions (Monitoring):	Target Date for Completion:
Ongoing reporting of spending management effectiveness and latest forecasts to CEBERT (Weekly reporting and review by CEBERT/ CLT)	March 2024
Directly or via professional or political networks, liaise with Government departments on the severity of the many financial issues (Reporting to CLT, and to Members in the MTFS update)	February 2024
Preparation and approval of the 2024/25 annual budget (Quarterly Financial Reviews)	February 2024
Comments this quarter: No change to the risk ratings. At the time of writing, provisional outturn figures for 2023/24 show a slightly smaller overspend than was forecast in the Third Financial Review, overall, with a greater adverse variance in Adult Social Care spending being more than offset by favourable variances across other Services. The outturn position is being analysed, particularly to understand the effects of one-off 'windfall' events/ savings, as distinct from any further cost pressures (or reductions) which will continue to have an effect in the 2024/25 year, and so vary our forecasts going forward. The smaller overspend, whilst helpful, provides little comfort, as all things being equal the prospects for the future remain very challenging. The Council has received notification from Government of the potential to utilise 'Exceptional Financial Support' – of up to £11.6m relating to 2023/24 items, and up to £6m in respect of 2024/25 – but as expected this is only in the form of capitalisation direction (which will cost us to deploy, in the form of premium interest rates). The Transformation Programme noted as required in the MTFS is underway, with consultants being appointed recently; work has commenced and in the coming weeks they will help us develop a plan to shape our transformation and improvement journey. This plan must be submitted to DLUHC by 27 August as part of the criteria for final approval of Exceptional Financial Support. Our plan needs to present a version of Cheshire East Council that spends £100m less over the next four years.	
Timescale for managing risk to an acceptable level: March 2024	

Risk Name: Leadership Capacity		Risk Owner: Chief Executive	
Risk Ref: SR07		Risk Manager: Head of HR	
Date updated: 24 th April 2024			
Risk Description: There are a number of vacancies and temporary acting up arrangements in place across CEC’s leadership team are not functioning. These limit its capacity and prevents the team from operating as effectively as possible. Without the right capacity across the leadership team, the organisation is unable to flex and be respond to its challenges. Potential impacts: The impact may be a failure to achieve priorities, which is ever more critical in light of current financial challenges as well as the Council’s requirement to deliver a large-scale transformation programme. It could also be the case that priorities are delivered at higher cost than could otherwise be achieved. Without maintaining value for money throughout the organisation, overall amount of effectiveness is reduced. Drivers of likelihood: Reputational risk from Section 114 notice and impact on recruitment and retention. Failure to recruit and retain individuals for senior management positions. Failure to complete DMA exercise and implement a revised structure, Failure implement management development for the leadership team. Failure to communicate and motivate the wider workforce.			
Interdependencies (risks): All other strategic and operational risks.		Lead Service Committee: Corporate Policy Committee	
Key Mitigating Controls: • Council Constitution and decision-making structure, including the Committee system and defined terms of reference. • Corporate Plan and Annual Service Business Plans. • Support from Governance functions. • Leadership team recruitment processes, including skills and experience requirements. • Leadership team performance management processes. • Organisation structure and internal reporting. • Workforce Strategy			
Actions (Monitoring):		Target Date for Completion:	
Undertake Decision Making Accountability (DMA) exercise from Heads of Service level to develop a revised organisational structure and implement new structure (Introduction of new populated structure)		TBC	
Leadership development programme for CLT and WLC (Evaluation of programme once completed and sessions delivered)		30/06/2024	
Interim arrangements for key posts (Interim recruitment exercise to a number of key posts)		31/05/2024	
Comments this quarter: Director of Finance and Customer Services resigned from the organisation in January 2024 and will leave in May 2024. A recruitment exercise for an interim has been carried out successfully and an interim will take up post on 29 April 2024. The LGA has undertaken a DMA exercise to examine current senior management roles to help ensure a stable senior management structure is in place. This will provide recommendations for a revised organisational structure which is effective at making decisions, with clear accountabilities and roles, and that are efficient in their use of management resources. This will be actioned in the next quarter. A series of development sessions for CLT and WLC has been developed, with the first of these sessions being held on 12th April. Additional sessions for CLT and WLC will continue through the next quarter. Recruitment to a number of key senior interim roles has also begun and includes the director of Policy and change and the Executive Director Corporate Services.			
Timescale for managing risk to an acceptable level: June 2024			

Risk Name: Ability to Achieve Organisation Change		Risk Owner: Chief Executive
Risk Ref: SR08	Date updated: 8 th May 2024	Risk Manager: Director of Transformation
Risk Description: The risk that the council is unable to achieve organisational change due to a lack of resources and capacity to focus on transformation as people focus on the delivery of business as usual. Recently received advice from government commissioners advised that organisational change capacity is a key ingredient to support the council in delivering transformation to achieve medium to long term change that will support achievement of savings and also, in the event of a section 114 notice being issued, organisational change capacity is also essential to deliver necessary actions arising from interventions. Potential impacts: The council is required to deliver transformation activity at pace in order to balance the budget and avoid section 114. If a section 114 notice is issued and commissioners intervene, the council bears their costs. These costs are estimated at up to £200K per commissioner and there are usually 2-6 commissioners, for a period of up to 5 years. Therefore it is more prudent to ensure that there is capacity for organisational transformation to avoid more significant costs and reputational damage. Drivers of likelihood: A focus on delivery of frontline and statutory services and a de-prioritisation of corporate, enabling functions. A lack of clear governance and oversight of delivery of transformation. No clearly identified medium- and long-term transformation programme. Failure to recruit and retain individuals for senior management positions. Failure to identify and implement required change initiatives effectively and in a timely fashion. Failure to oversee efficient and effective operations, including dealing with poor performing individuals and to communicate and motivate the wider workforce.		
Interdependencies (risks): Recruitment and Retention, Failure to Achieve the MTFS		Lead Service Committee: Corporate Policy Committee
Key Mitigating Controls: - A “doing things differently” initial list of change proposals has been collated and is being discussed with members. - A weekly CEBERT meeting is in place with Senior Level Membership to review the activities required to meet budget savings targets. - A Bright Ideas scheme is in operation to enable the workforce to contribute their ideas for transformation. - A new Corporate Plan has been consulted on to clarify the vision and priorities for Cheshire East. - Appointment of a Delivery Partner to provide additional capacity and to produce the council transformation plan. - Formation and weekly meetings of the transformation board - Establishment of a core project team to support the next phase of transformation.		
Actions (Monitoring):		Target Date for Completion:
Strategic CLT discussion planned on structure necessary to achieve transformation.		September 2024
Planned to replace Director of Policy and Change, with a Transformation Director, initially on secondment basis		May 2024
Medium to Long Term Transformation Plan to be developed.		August 2024
Comments this quarter: No change to the risk rating at this time. Focus on the initial steps need to transform the council including: - Confirmation of exceptional financial support, subject to a transformation plan being established. - Transformation Approach for the council approved by Corporate Policy Committee - Established of 4 management boards including the transformation boards which meets weekly. - Procurement, appointment and start on site of the council's transformation partner. - Various engagement sessions with the wider leadership community of the council around the scale and pace of the required change.		
Timescale for managing risk to an acceptable level: August 2024		

Risk Name: Recruitment and Retention		Risk Owner: Director of Finance & Customer Services																																		
Risk Ref: SR09		Date updated: 24 th April 2024																																		
Risk Manager: Head of HR																																				
Risk Description: Recruitment and retention of skilled and motivated staff is required to allow the organisation to deliver its Corporate Plan and its transformation programme. Achievement of the plan and programme requires operational changes which allow the council to adapt and improve. Impact of the risk occurring: High staff turnover and, or skills shortages, insufficient capacity within services. Failure to achieve annual budget and deliver the council's transformation programme and a detrimental impact upon the physical, emotional, and mental wellbeing of staff. Drivers of failure: National and local demographics alongside external factors led to increasing and changing demands on services. 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. Outcome of Ofsted inspections as well as current financial challenges.		<table><tr><td rowspan="4">Likelihood</td><td>4</td><td></td><td></td><td></td><td>Gross</td></tr><tr><td>3</td><td></td><td></td><td>Net Target</td><td></td></tr><tr><td>2</td><td></td><td></td><td></td><td></td></tr><tr><td>1</td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td></tr><tr><td></td><td></td><td colspan="4">Impact</td></tr></table>		Likelihood	4				Gross	3			Net Target		2					1							1	2	3	4			Impact			
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Interdependencies (risks): Business Continuity, Increased demand for Adults Services, Complexity and Demand for Children's Services		Lead Service Committee: Corporate Policy Committee																																		
Key Mitigating Controls:																																				
• Workforce planning is in place via the Council's Workforce Strategy. This is a 4-year strategy with on-going review. Service Workforce Plans are also undertaken on a bi-annual basis to review and support workforce planning on a service-by-service level. • Benchmarking exercises and workforce metrics are used to identify potential issues and service workforce plans developed as above to mitigate. Work on the refinement of a workforce assessment for the Council has been completed and a monthly workforce dashboard available to identify potential issues. Focused apprenticeship levy funding, specific succession planning and talent management initiatives are used to support high priority areas. This is supported by the introduction of a manager dashboard on Learning Lounge that will help the identification of training and skills gaps. • HR Dashboards are provided to managers which offer up to date information on key HR Metrics so that managers can monitor performance. • A workforce assessment is also available, including further metrics at a service level. This data is updated twice a year to inform workforce planning. • Recruitment and retention programme has also delivered attendance at a programme of local and regional recruitment fairs, an end-to-end review of the recruitment process, improved recruitment advertising, an employee offer brochure, a review, and the planned implementation of additional employee benefits, a social work academy in Children's Services and the development of additional career pathways. The introduction of employee profile videos on social media and on Cheshire East Council's website to enhance the Council's profile have also been introduced. Further work will be undertaken to streamline the recruitment process to ensure improved efficiency and a better user experience. • Review of the provision of agency staff, including an audit of spending, to reduce reliance and transition to a more stable permanent workforce base with reduced costs has also been undertaken. The Council will implement the provisions of the Government proposal on capping the pay rates for agency social workers and have also engaged with the proposals for capping agency pay rates for Children's Social Workers as part of the Greater Manchester Pledge. • Analysis of exit interview and questionnaire data with the relevant Executive Director to support the retention of staff. • Wellbeing and engagement support, including delivery of EAP services, the introduction of 'In the Know' sessions for all staff, a revitalised recognition scheme, monthly organisation wide wellbeing updates for all staff, and the promotion of the government funded initiative Able Futures. • Senior manager support in the redesign and restructure of services to meet MTFS targets, including MARS to minimise the impact on the workforce. A workforce planning toolkit is now in place to support services in identifying skills gaps and identify actions to address any identified gaps.																																				
Actions (Monitoring):		Target Date for Completion:																																		

Appendix A – Q4 2023/24 Strategic Risk Register Detail

Introduction of a range of additional employee benefits, enhancing the existing offer (Monthly review by HRMT/Ongoing briefing to CLT on progress and implementation).	June 2024
Continued work on the implementation of social work academies across Children's Services and Adults, Health & Integration (Quarterly review by HRMT/Review with Children's and Adults, Health and Integration).	March 2024
Use Pulse Survey results to gauge employee satisfaction (Reviewed by HRMT and shared with CLT).	June 2024
Complete a transformation skills audit (Reviewed by HRMT monthly)	June 2024
Comments this quarter: No change to the risk ratings at this time, the same market pressures exist, although work is now underway to secure a more stable senior management structure. A recruitment process review has also been completed in this quarter and a number of further key actions identified. A new recruitment process checklist has been developed and will be available to support all hiring managers with the recruitment process. Additional improvements will also be introduced in the next quarter. A consultation exercise as part of the office rationalisation programme has been completed, and identified the number of staff that will be most affected by work base changes. Ongoing support to staff to ensure a smooth transition to the new work place. Workplace charters will be developed to support future ways of working. Pulse staff survey workshops have been put in place to explore the feedback from staff in the survey carried out in November 2023. Directorate specific action plans have been developed to address directorate specific issues. A review of agency staff across the council has been completed with a reduction in the number of agency staff from 234 in quarter 3 to 196 at the end of quarter 4. Ongoing monitoring of agency staff is now overseen by CEBERT to ensure a more permanent stable resource is in place. Timescale for managing risk to an acceptable level: N/A	

Risk Name: Failure to manage the Consequences of Policy Uncertainty and National Policy Frameworks		Risk Owner: Director of Governance & Compliance (Monitoring Officer)
Risk Ref: SR10	Date updated: 19 th April 2024	Risk Manager: Director of Governance and Compliance (Monitoring Officer)
Risk Description: The risk that the council cannot adequately understand and react to national policy changes or effectively implement them. The scope of the risk covers all central and local government decisions which relate to the operations of local government. The Corporate Plan guides the council's decision-making, it informs what is considered a 'good' policy 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.		The risk matrix is a 4x4 grid. The vertical axis is labeled 'Likelihood' with values 1, 2, 3, 4. The horizontal axis is labeled 'Impact' with values 1, 2, 3, 4. The cells are color-coded: Green for (1,1), (1,2), (2,1), (2,2); Yellow for (1,3), (1,4), (2,3), (2,4), (3,1), (3,2), (3,3), (4,1), (4,2), (4,3); Orange for (3,4), (4,4); and Red for (4,4). The 'Gross Net' risk is in the Red cell (Likelihood 3, Impact 4). The 'Target' risk is in the Orange cell (Likelihood 2, Impact 4). The text 'TBC' is at the bottom right of the matrix.
Interdependencies (risks): Stakeholder Expectations and Communications, Failure to Achieve the MTFS, Failure to Adhere to Agreed Governance Processes		Lead Service Committee: Corporate Policy Committee
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 - Induction, on-going training and committee briefings for 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 - Preparation for elections and promoting engagement in democracy. - Forward planning for each committee's policy development and areas of political sensitivity - The development and delivery of the Corporate Plan - New member induction & training programme		
Actions (Monitoring):		Target Date for Completion
A review of the Committee briefing process to increase flexibility to draw out impact on residents more clearly		2024/2025
Delivery of DLUHC Productivity Plans (DLUHC)		July 2024
Oflog reporting (Oflog)		TBC
Comments this quarter: Details of the Oflog reporting are still to be confirmed, action will be updated once final detailed agreed. Preparations for the May elections have gone well, with no material issues to report. The additional voting reform administrative burden is be managed but is a new process and as such carries some additional risk. Productivity plan action updated, not an area of concern.		

There is uncertainty around the future shape of devolution within England due to the upcoming election and possible change in government. The election may also impact on progress of the transition plan, due to the pre-election period. However overall, no change to the risk at this time.
Timescale for managing risk to an acceptable level: Controls that mitigate this risk are based on the current landscape and timetable for local and national elections. The ability to manage this risk is not completely within the council's gift.

Risk Name: Failure to Adhere to Agreed Governance Processes		Risk Owner: Director of Governance and Compliance (Monitoring Officer)
Risk Ref: SR11	Date updated: 19 th April 2024	Risk Manager: Director of Governance and Compliance (Monitoring Officer)
Risk Description: The council is a complex public sector organisation with a broad range of objectives, some of which it is legally obligated to deliver, its goals for the borough are identified within its Corporate Plan. Formal reporting and decision-making within the council is, to a degree, prescribed by local authority regulation. The decision-making process at all levels, must comply with regulatory requirements while also delivering those stated goals. Detailed consequences: Robust governance requires clear aims and policy objectives and identified and delivered. Governance processes should facilitate the lawful delivery of those objectives and prevent the misapplication of resources in achieving other goals. Ultimately this 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. Examples of governance failures are: • Variations in interpretation and non-compliance with agreed process and internal controls. • Deviation from core objectives as result of prioritising presenting issues. • Failure to allocate limited resources in line with the requirements of agreed objectives. • Inadequate internal controls across the organisation or vertically with a directorate.		The risk matrix shows a 4x4 grid of risk levels. The y-axis is labeled 'Likelihood' with values 1, 2, 3, 4. The x-axis is labeled 'Impact' with values 1, 2, 3, 4. The cells are color-coded: Green for low risk (Likelihood 1-2, Impact 1-2), Yellow for medium risk (Likelihood 1-4, Impact 3), Orange for high risk (Likelihood 3-4, Impact 4), and Red for gross risk (Likelihood 3-4, Impact 4). The cells are labeled: 'Target' at (2,3), 'Net' at (3,3), and 'Gross' at (4,4).
Interdependencies (risks): Failure to Achieve the MTFs, Stakeholder Expectation & Communication, Leadership Capacity, Ability to Achieve Organisation Change, Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks Key Mitigating Controls: Council's Constitution covers decision making processes, including finance and contract procedure rules. The Constitution is reviewed and amended on an on-going basis to ensure legal compliance and operational continuity. Following the adoption of the Committee system, mechanisms were put in place to capture Member's feedback and are reported to the (Constitution Working Group). The number, nature and terms of references of the Committees are assessed on an on-going basis, with refinements being implemented via full council decision. 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, regional and national 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.		Lead Service Committee: Corporate Policy Committee

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 inappropriate 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. Internal Audit's assurance is achieved through the development and delivery of an annual plan and follow-up monitoring of agreed actions. There are other external inspections, such as Ofsted, which may examine elements of our decision-making processes through their work, although this is not usually the primary focus.

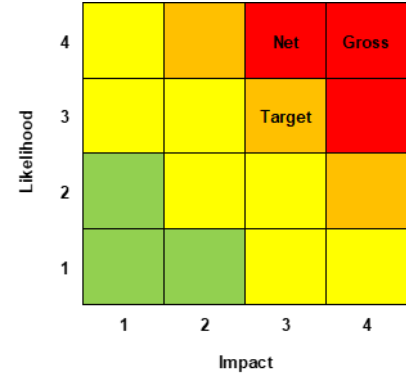
The organisation publishes an Annual Governance Statement identifying significant governance issues which have occurred, any known areas which may cause issues if not managed effectively and updates on issues previously identified.

Actions (Monitoring):	Target Date for Completion
Review of shared service governance arrangements with specific actions to be identified	2024/25

Comments this quarter: The risk has not changed in score or description during Q4. The process of identifying internal control issues continues, however it is acknowledged that the time take to resolve issues needs to be improved. Director of Finance and Customer Service (Section 151 Officer) left in May, the immediate risk mitigated by the appointment of the interim Chief Finance Officer, pending permanent recruitment. The introduction of the management Boards should help cross organisation working and reduce the risk of siloed decision making.

The LGA Corporate Peer Challenge took place at the end of March. Initial feedback has been provided, but formal reporting on this will take place by the end of July and an action plan and a response will be prepared by the end of August. If needed, the impact of the Corporate Peer Challenge findings will be reflected in the next update to the strategic risk register.

Timescale for managing risk to an acceptable level: TBC

Risk Name: Stakeholder Expectations and Communication		Risk Owner: Chief Executive
Risk Ref: SR12	Date updated: 29 th April 2024	Risk Manager: Head of Communications, Head of Business Change
Risk Description: The risk that the council does not understand the expectations of its stakeholders and that its communication and engagement with those stakeholders does not result in their understanding of the council's actions, nor appropriate involvement and influence. The council has an obligation to provide as high a level of service to its residents as its funding will allow. This requires not only considering both the short and long-term but also the expectations of all of its stakeholders. Potential impacts: A lack of understand and poor communication and/or failure to effectively engage with stakeholders will cause damage to the council's reputation, if this is severe enough it may result in poor performance, increased complaints, regulatory inspection, challenge from central government, low morale, increased staff turnover and make the borough a less desirable place to live and work in. Potential drivers: To a certain degree the council cannot fully control the view that its stakeholders form. At times it will have to make decisions that are unpopular, this can be due to the context of these decisions not being effectively communicated, understood or just being disregarded by stakeholders. Management of this risk should be considered on the basis of the objective regard for and interest in the council its policies and its services (measured via surveys, media coverage, customer relations activity, etc.) and an assessment of the quality of its engagement (both listening and telling).		
Interdependencies: Increased Demand for Adult's Services, Complexity and Demand for Children's Services, Failure to Achieve the MTFS		Lead Service Committee: Corporate Policy Committee
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), including review of council service plans, consultation and engagement programs. • Review communications business continuity, priorities and emergency / crisis comms protocols and plans. • Media relations protocol and approvals process. • Media training programme for key spokespersons. • 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. • 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.		

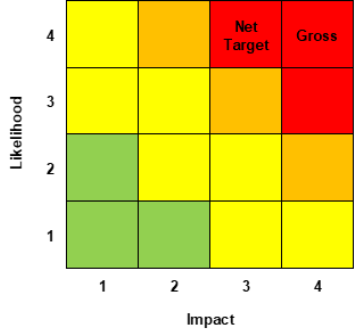
- Development and delivery of communication strategies to influence public awareness of and informedness about key universal services, inc: planning, highways, waste and recycling. - Communications handling requirement for each service committee meeting agreed with lead officer(s). - Quarterly 'Conversation with the Leader and Deputy Leader' videos. - Regular internal communications to members and officers. - Use performance management reports for council services and programmes to identify reputational opportunities and risks at an early stage. - Continue to develop proactive direct comms to be issued via e-mail / SMS – we currently have 54,000 subscribers for 'push' notifications across a range of topics.	
Consultation - Ensure that consultation is undertaken when proposals are still at a formative stage. - Design consultation which gives sufficient reasons for any proposal or change to permit stakeholders to undertake intelligent consideration and response to the options. - Consultation and engagement activity will be used as evidence when making decisions and adequate time will be given between the end of a consultation and a decision is made, to allow for consideration of and where required, a response to, the output of a consultation or engagement. - Equality Impact Assessments (EIA) are completed, appropriate for the purpose of use and that they are signed off before any consultation can begin. - Make it clear HOW consultation and engagement activity, EIA and other intelligence has been conscientiously taken into account when finalising the decision. - Use the equality impact assessment toolkit, guidance, and template to provide clarity around what the equality impact assessment is and how it should be used.	
Actions (Monitoring):	Target Date for Completion
Communication & Media	
Ensure alignment of annual communications programme and consultation and engagement programme (Quarterly)	30/04/2024 and then quarterly
Review annual business plans for communication requirements (Annually)	31/05/2024
Review of the Communications Strategy for Residents 2022-25 priorities in the context of financial position for 2024/5 and the new Cheshire East Plan, as It is being developed and once established. (Six monthly updates to CPC. Once revised Communications Strategy has been approved and adopted.)	Following update to the new Cheshire East plan
Provide communications support for implementation of MTFS proposals to ensure all stakeholders are well-informed about any changes to service and policy. (Annually)	Through 2024/25
Review use of social platforms and other digital communications and engagement channels in the context of changing technologies and cultures on those platforms. (Quarterly)	Q1 2024/25
Consultation:	
Delivery of Equality Impact assessment training to Equality champions (Annually)	2024/25
Undertake a residents survey linked to the Corporate Plan refresh (Biannually)	2025/26
Complete the service restructure to enable recruitment to vacant posts in the research and consultation team (TBC)	Q2 2024/25
Comments this quarter:	
Communication & Media: No change to the risk ratings at this time. Coverage and public/media interest in the council through Q4 included, - Budget setting and council tax - In-year financial position - Exceptional financial support - Poynton Pool planning application - New Chief Executive	

- Leisure Services review
- Garden waste subscriptions
- Parking review
- Potholes and road maintenance
- Planning enforcement
- Active travel schemes
- Springfield special school extension

Consultation: No change to the scores this period. Consultation activity has continued to feature as part of committee decisions and consultation reports are routinely referenced as part of the decision-making evidence. There are further opportunities to embed consultation practice into the decision-making process more consistently across the organisation and the varying decisions that committees determine. Work on this is progressing. This will help stakeholders to have greater clarity about how consultation can be, and is, used to inform decision-making.

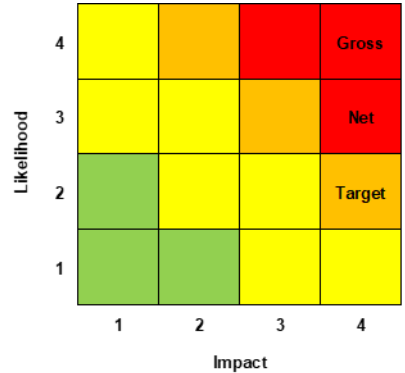
The council undertook extensive consultation and engagement activity to support the annual budget setting process. Consultation responses were used to influence and inform councillors' decision making when approving the Budget.

Timescale for managing risk to an acceptable level: Q2 2024/25

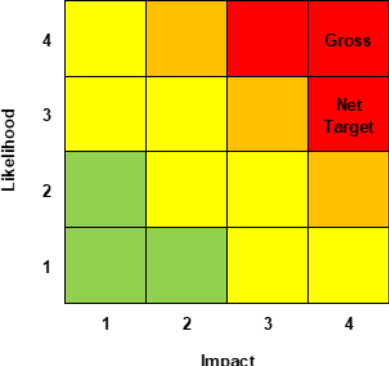
Risk Name: Information Security and Cyber Threat		Risk Owner: Head of Information Communication Technology and CIO
Risk Ref: SR13	Date Updated: 11 th April 2024	Risk Manager: ICT Programme Manager
Risk Description: (Cause) There is a risk that as the Council continues to move towards using new technology systems to reduce costs and fulfil communication, accessibility, and transaction requirements, (threat) it becomes increasingly vulnerable to a security breach, and, or loss of information, 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 loss of information, 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 Business Continuity and Stakeholder Expectations and Communication. 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.		Lead Service Committee: Corporate Policy Committee
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 IG Collaboration Group. - The Council has an Incident Reporting process which has been communicated to staff, all incidents are scored and assessed by SIGG 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 modules (which are mandatory for all employees) on the Learning Lounge. This includes several modules of Data handling, Cyber Security, and Information Assurance. Work has begun on a new cyber e-learning package developed by NCSC. There are also several best practice guides on the Councils Lighthouse on the best ways to use technology and to protect information. These modules and best practice guides are updated regularly to reflect changes in working practices and as a response to additional threats. - 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'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. To support the strategic direction and architecture principles all technical solutions are reviewed at the Technical Design Authority to ensure correct alignment. - In addition, the Council is moving 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 for Infrastructure Investment of which Security & Compliance is an element was submitted and subsequently approved. This additional funding will be used to develop the necessary tools to start the implementation.	
Actions (Monitoring):	Target Date for Completion:
Identity Management (Information Security Steering Committee (ISSC), Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
Application Management (Information Security Steering Committee (ISSC))	March 2025 (Multiyear project)
Data Security (Information Security Steering Committee (ISSC))	March 2025 (Multiyear project)
Data Quality (Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
Information Management (Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
Comments this quarter: There continues to be significant threats from state sponsored activity, particularly in this election year on Government both central and Local and the support service such as NHS. Several organisations have already fell victim causing substantial loss of services and data. Therefore, there is no change to the risk rating at this time. Identity Management – projects are continuing to ensure that identities are protected through increased monitoring and controls. Access from locations outside of the UK are automatically blocked reducing the attack surface. Application Management – work is ongoing to ensure that MFA and SSO is applied to applications that are cloud hosted. Data Security – continued enhancement of the existing security controls to ensure that the latest threats are mitigated and protected. Work is continuing to strengthen the resilience capabilities of data storage and protection. Work has progressed to refresh the Cyber Incident Response Plan and associated workbooks to ensure that the Council is best equipped should an incident occur. Data Quality – Continuation of the MDM projects across several data fields to ensure that the councils' solutions have the correct data embedded with them, updated seamlessly across multiple systems. This is a key area to support any future drive to AI. Information Management – continuation of projects to deliver and improve the maturity of information both through its storage and use of information. This will enable both greater protection for that information but also enable efficiencies through accurate management information and improved compliance through controlled retention and ease and speed of access to critical information. This is a key area to support any future drive to AI.	
Timescale for managing risk to an acceptable level: N/A	

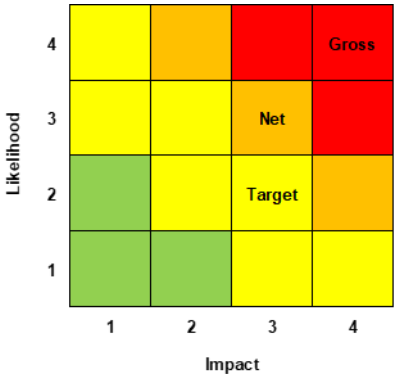
Risk Name: Business Continuity		Risk Owner: Director of Governance and Compliance (Monitoring Officer)
Risk Ref: SR14	Date updated: 2 nd February 2024	Risk Manager: Head of Audit & Risk
Risk Description: Failure to maintain business continuity after an unusual or unexpected, disruptive event or events. 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		Lead Service Committee: Corporate Policy Committee
Key Mitigating Controls: - BC Plans held for each service area – clear format, identifying critical and serious priority activities with recovery time objectives. - BC impact assessments undertaken across the organisation to understand challenges to service delivery ahead of known events, informing decision making and mitigation plans. - 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 - Ongoing liaison with Emergency Planning Shared Service		
Actions (Monitoring):		Target Date for Completion:
Review and refresh of the Business Continuity Framework (2-year review cycle)		May 2024
Development of SharePoint BC system (one off project)		Begins January 2024
Rollout and training for the SharePoint BC system (2-year review cycle)		Post SharePoint system development
Work with Emergency Planning on scenario exercises		Began March 2023 – on-going
Comments this quarter: No material change to the risk, time with a system analyst has been booked in for January to develop the scope for the BCP SharePoint App. Emergency Planning exercise planned for February based around a cyber security breach, the learnings from which will feed into the app development and inform further development of the organisation's business continuity approach.		
Timescale for managing risk to an acceptable level: Q4 2023/24		

Risk Name: Capital Projects - Place		Risk Owner: Executive Director of Place
Risk Ref: SR15	Date updated: 13 th May 2024	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. Impact: 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. Due to the nature of the projects and their large cost, delays can materially impact the ability to deliver future projects, thus negatively impacting the borough. Likelihood: 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		Lead Service Committee: Economy and Growth, Environment and Communities, Highways and Transport
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 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. - 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 key capital projects - Capital review of all Scheme included in the MTFS underway to consider affordability. Some schemes delivery may be impacted depending on the outcome.		

Actions (Monitoring):	Target Date for Completion:
A new module within the Unit4 ERP system will improve financial monitoring to provide more regular information on actual and forecast spend	Revenue module now in operation, capital module deployment ongoing – date TBC
Comments this quarter: Middlewich eastern Bypass has been delayed due to a delay in the decision from the Department for Transport (DfT), expressing concerns about value for money. More work is now required to evidence this and provide further value engineering; with the delay itself adding inflationary cost to the scheme. The value for money assessment is directly related to extreme construction inflation over the last two years. The A500 Dualling scheme has been agreed to be rescope following the cancellation of HS2 and the DfT have agreed to provide development funding to cover the cost of this.	
Timescale for managing risk to an acceptable level: Major capital projects by their nature are high risk. The controls are designed to proactively manage risks and mitigate their impact if a risk is realised. It is not realistic to expect the risk to be managed any lower.	

Risk Name: Failure of the Local Economy		Risk Owner: Executive Director of Place
Risk Ref: SR16	Date updated: 23 rd April 2024	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		Lead Service Committee: Economy and Growth
Key Mitigating Controls: - Cheshire East Business support hub has been launched. - Business forum to engage and plan future support. - Investment plans to support regeneration and development. - Place marketing and inward investment.		
Actions (Monitoring):		Target Date for Completion:
Launch of business support grants: (Quarterly returns to government) - Repurposing our high street grants from Crewe town centre - Decarbonisation grants for business - New employment space grant		March 2025
Comments this quarter: There is little change in the national economic position, the Office for National Statistics has reported marginal growth in GDP (0.1%) during February 2024 and has revised upwards growth levels in January 2024 to 0.3% from 0.2%. Locally, the cancellation of HS2 is still denting confidence of businesses.		
Timescale for managing risk to an acceptable level: N/A, net score is equal to target score.		

Risk Name: CEC Carbon Neutral Status		Risk Owner: Executive Director of Place
Risk Ref: SR17	Date updated: 24 th April 2024	Risk Manager: Head of Environmental Services
Risk Description: Failure to achieve Carbon Neutral status for the Council by the 2027 milestone target due to requirement to secure statutory consents, seek viable and affordable solutions and other external market forces outside the Councils control. Likelihood is based on a number of external factors, partnerships and key outcomes being delivered in a timely manner. Impact 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, Recruitment and Retention, Council funding, Capital Projects		Lead Service Committee: Environment and Communities
Key Mitigating Controls: • Risk is reviewed as part of the Brighter Futures Transformation Projects Board, operational board and member steering group • Carbon Neutral Program established with Program 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		
Actions (Monitoring):		Target Date for Completion:
Cheshire East Capital Spend Review (Awaiting outcome of the corporate capital review, progress paused on 2nd Solar farm, next phase of EV and next tree planting program until the review is complete)		1 st May 2024
Comments this quarter: The corporate plan objective to be a carbon neutral council by 2025 was amended to 2027 by the February Full Council budget decision. Although this provided additional time and spread the capital spend the business case still required significant progress this year to meet the 2027 target. The Council capital review has paused the previously authorised key capital projects of procurement of the second solar farm, progressing our largest proposal for tree planting for the next planting season and continuing the next phase of Electric Vehicle transition. Without approval to proceed in the next few weeks will risk the new 2027 target of the program.		
Timescale for managing risk to an acceptable level: TBC		

Risk Name: Local Planning Authority Modernisation Plan		Risk Owner: Executive Director of Place
Risk Ref: SR18	Date updated: 13 th May 2024	Risk Manager: Interim Director of Planning, Head of Planning
Risk Description: Following the completion of the 'Local Planning Authority Review and Service Transformation' report and presentation to Environment & Communities Committee on 31 October 2022 a Modernisation Plan has been developed to achieve the transformation of the service. This Plan will carry forward the recommendations made, document actions and monitor progress. The recommendations are many and varied but 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 additional budget pressure increases. Detailed causes: Insufficient resource to ensure completion of priority actions in the required timescales (staff and skills) while also 'doing the day job', Interim Service Review Lead/Planning Director limited contract duration, supplier resource to deliver new ICT system, failure to engage with internal and external stakeholders to affect necessary changes, lack of oversight from the Planning Transformation Board/Steering Group.		
Interdependencies (risks): Organisational Capacity and Demand, Reputation, Council Funding,		Lead Service Committee: Environment and Communities
Key Mitigating Controls: • Environment and Communities Report 31/10/2022; Local Planning Authority Review and Service Transformation Report and Modernisation Plan. • Monitoring of progress against Modernisation Plan by Transformation Board and Environment and Communities Committee. • Regular meetings of Interim Director of Planning and Head of Planning and team managers to review action logs and progress on key priorities. Steering Group established to review workstream and focus priorities feeding into Transformation Board. • Internal Audit reports on Community Infrastructure Levy and Section 106 will inform the scope of a member/officer working group. • IT System Project has its own Project Board attended by supplier. • Weekly monitoring of resources / recruitment during manager's meetings.		
Actions (Monitoring):		Target Date for Completion
IT System Project escalation due to breach of contract (Weekly team and fortnightly Project Board meetings or as needed)		Q1 2024/25
Staffing Restructure – JDQs awaiting evaluations (Regular meetings and updates)		Q1 2024/25
External support from Capita retained to assist with backlog. Backlog funding secured from DLUHC, intervention from senior officers on older applications (Continued monthly reporting on application backlog)		Q4 2023/24
Continued monitoring of resources – recruitment to critical posts ahead of restructure (Weekly manager meetings)		Q4 2023/24
Comments this quarter: No change to overall risk ratings but some progress is being made on key areas, the ICT project remains the main concern. Further escalation has taken place with supplier and implementation of the planning system is now scheduled for July 2024 and Land Charges soon after. Concern also remains that all elements of the system may not be delivered along with escalating costs, hence legal intervention to seek appropriate compensation against original contract. Significant staff input from Service required for testing and training over Q1.		

Restructure timetable is now set with formal staff consultation to begin in April 2024. Completion of structure (with exception of new appointments to vacancies) should be complete by June.

Backlog of applications has reduced but stalled due to staff sickness and vacancies. Additional Capita support is in place on back of DLUHC funding.

Validation checklists complete and awaiting adoption in May. S106 audit recommendations are on track for completion by Q1 24/25. Other key customer improvements currently being reviewed to ensure customer expectations can be met given resource issues and competing demands from above priorities.

Timescale for managing risk to an acceptable level: 3-12 months (depending on priority)