

## **Corporate Policy Committee**

**20 March 2025**

### **Strategic Risk Assurance Report Quarter 3 2024/25**

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**Report of: Janet Witkowski – Acting Governance, Compliance and  
Monitoring Officer**

**Report Reference No: CPC/56/24-25**

**Ward(s) Affected: All**

**For Decision or Scrutiny: Scrutiny**

### **Purpose of Report**

- 1 One of the responsibilities of the Corporate Policy Committee is to have a co-ordinating role across all other committees and exercise a corporate view of outcomes, performance, budget monitoring and risk management. Reporting on the Strategic Risk Register supports effective risk management, is central to good governance and supports the efficient delivery of the council's corporate plan objectives.

### **Executive Summary**

- 2 This report provides an update on the activity of the council's Strategic Risk Register for Quarter 3 2024/25; October to December 2024. This report also includes the equivalent level risk registers for the Council's wholly owned companies; Orbitas, Tatton Park Enterprises and ANSA. The Council's Strategic Risk Register is set out in detail in Appendix A, and the equivalent risk registers of the Council's Wholly Owned Companies are included in the Part 2 appendices of this report (Appendix B).

## **RECOMMENDATIONS**

The Corporate Policy Committee is recommended to:

- Note the position of the Council's Strategic Risk Register and those of the wholly owned companies for Quarter 3 2024/25, in respect of the content, description, scoring and risk management activity outlined.

### **Background**

- 3 Risks included on the Strategic Risk Register are those which materially threaten the organisation's ability to achieve its strategic goals, in this case our corporate objectives in the Cheshire East Plan. This could be in the form of an individual threat to a specific objective, or the compound effect of a threat across several areas.
- 4 Items on the Strategic Risk Register are "owned" by members of the Corporate Leadership Team (CLT) and are reviewed on a quarterly basis. Co-ordination and administration of the Strategic Risk Register and the Risk Management Framework is undertaken by the Head of Audit, Risk and Assurance.
- 5 The content of the Strategic Risk Register has been updated in preparing this assurance report for the Corporate Policy Committee. Members of the Corporate Leadership Team have assessed their risks as at the end of Quarter 3 2024/25.
- 6 Revisions to the register are made on an on-going basis to ensure that the scope and detail of the individual risks, and the overall coverage of the register is reflective of the current threats to the organisation achieving its strategic objectives and maintaining business as usual service delivery. When items are removed from the Strategic Risk Register, they continue to be considered at operational levels and can be escalated back for inclusion based on the risk owner's judgement and assessment as at that time.
- 7 Full details of the Council's individual strategic risks are provided in Appendix A. The content of this covering report relates to the key changes in risks from Quarter 2 to Quarter 3.

### **Summary of Quarter 3 Changes**

- 8 A comprehensive review of the Council's strategic risks is scheduled to take place in a workshop in April; due to extensive commitments for CLT members at the start of 2025, it hasn't been possible to undertake this any earlier. The Q3 update is therefore presented on the existing content of the register.

- 9 The strategic register contains 20 risks with the directorate split shown in Table 1 below:

**Table 1 – Strategic Risks by Directorate**

Directorate	Number of Risks	Average Net Score	Highest Net Score
Adult	2	11	12
Children's	5	12	16
CE Office	6	9	12
Place	4	12	16
Resources	3	12	16

- 10 Table 2 shows the position of the Strategic Risk Register after the Quarter 3 assessments: with the gross, net and target score for each risk. The table is organised by highest to lowest net risk for Q3.
- 11 Table 3 shows the position of the Strategic Risk Register in terms of net scores, based on the Q3 assessments, and showing any direction of travel against the net scores of the previous quarter.
- 12 The heat map below the tables (Chart 1) shows the concentration of critical and material rated risks. All strategic risks continue to sit in the top righthand of the quadrant of the matrix.
- 13 As requested by Corporate Policy Committee the strategic risk registers of the Council's Wholly Owned Companies are included in this report. Full details are included in the Part 2 paper, Appendix B. From the next report and going forwards, Orbitas will not be included in Part 2 because the organisation is being brought back inhouse. Orbitas' risks will be captured in the Environmental Services operational register.
- 14 There are no additions to the Strategic Risk Register following the quarter 3 review, with one change in net ratings, and one removal. SR08, Ability to Achieve Organisation Change risk's net likelihood was reduced as the transformation plan is progressing in line with the expected timescales. The net likelihood was reduced from a 3 to a 2, bring the overall rating equal to the target score. The change makes the risk the lowest rated within the strategic risk register.
- 15 SR10, Failure to Manage the Consequences of Policy Uncertainty, has been removed from the register; the net likelihood aspect of this risk has significantly reduced following the introduction and progression of the Council's Transformation Plan, progress against the Corporate Peer Challenge actions, and following the closure of "Oflog", those additional reporting requirements are no longer required by central government.

The council can be more confident in its ability to identify and respond to national policy or legislative changes in line with the Cheshire East Plan 24-25, and the Cheshire East Corporate Plan 25-29. This reduces the overall net rating to 4, equivalent to the target score. Specific issues relating to individual policy/legislation changes will be raised as required.

- 16 The net position on scoring of other risks remains the same from Quarter 2. Recruitment activity to roles in the corporate leadership team and wider leadership team began during Q3 and is ongoing, with the first appointments now being made. The impact of the transformation work streams is yet to be seen filtering through to the risk ratings. Financial pressure remains the primary driver of the high levels of risk that the Council is operating under.

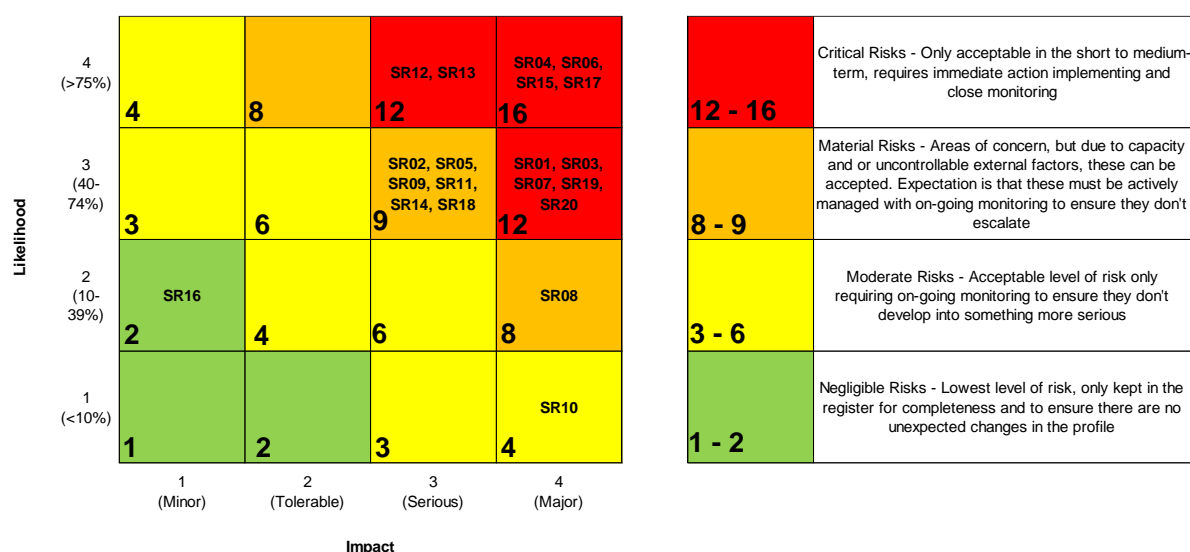
**Table 2 – Strategic Risk Register, highest net score to lowest**

<b>Ref</b>	<b>Risk</b>	<b>Q3 Gross</b>	<b>Q3 Net</b>	<b>Q3 Target</b>
SR04	Dedicated School Grant Deficit	16	16	16
SR17	CEC Carbon Neutral Status	16	16	16
SR15	Capital Projects – Place	16	16	12
SR06	Failure to Achieve the MTFS	16	16	9
SR03	Complexity and Demand for Children's Services	16	12	12
SR13	Information Security and Cyber Threat	16	12	12
SR19	Delivery of the ILAC Improvement Plan	16	12	12
SR01	Increased Demand for Adult's Services	16	12	9
SR07	Leadership Capacity	16	12	9
SR12	Stakeholder Expectation & Communication	16	12	9
SR20	SEND Inspection	16	12	8
SR02	Fragility and failure in the Social Care Market	16	9	9
SR09	Recruitment & Retention	16	9	9
SR05	Failure to Protect Vulnerable Children	16	9	6
SR11	Failure to Adhere to Agreed Governance Processes	16	9	6
SR14	Business Continuity	12	9	6
SR18	Local Planning Authority Modernisation Plan	16	9	6
SR08	Ability to Achieve Organisational Change	16	8	8
SR10	Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks	12	4	4

**Table 3 – Strategic Risks Direction of Travel**

Ref	Risk	Q4 Net	Q1 Net	Q2 Net	Q3 Net	Direction of Travel (Q2 to Q3)
SR01	Increased Demand for Adult's Services	12	12	12	12	↔
SR02	Fragility and failure in the Social Care Market	9	9	9	9	↔
SR03	Complexity and Demand for Children's Services	12	12	12	12	↔
SR04	Dedicated School Grant Deficit	16	16	16	16	↔
SR05	Failure to Protect Vulnerable Children	9	9	9	9	↔
SR06	Failure to Achieve the MTFS	16	16	16	16	↔
SR07	Leadership Capacity	12	12	12	12	↔
SR08	Ability to Achieve Organisation Change	12	12	12	8	↓
SR09	Recruitment & Retention	9	9	9	9	↔
SR10	Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks	12	12	12	4	↓
SR11	Failure to Adhere to Agreed Governance Processes	9	9	9	9	↔
SR12	Stakeholder Expectation & Communication	12	12	12	12	↔
SR13	Information Security and Cyber Threat	12	12	12	12	↔
SR14	Business Continuity	9	9	9	9	↔
SR15	Capital Projects - Place	12	16	16	16	↔
SR17	CEC Carbon Neutral Status	16	16	16	16	↔
SR18	Local Planning Authority Modernisation Plan	9	9	9	9	↔
SR19	Delivery of the ILAC Improvement Plan	-	12	12	12	↔
SR20	SEND Inspection	-	12	12	12	↔

## Chart 1 – Strategic Risks Heat Map



## Risks Updates by Service Committee

### Adults and Health Committee

- 17 **Increased Demand for Adults Services:** As predicted the reduction of agency staff within the service has resulted in increased waiting times for assessments, this reduction has been seen in the services provided during the quarter. All waiting lists are monitored weekly to manage the risks, we are implementing a process of 'waiting well' to mitigate deterioration in health and wellbeing of individuals and their carers.
- 18 We have also recruited two additional workers to undertake assessments for discharges from out of area hospitals which are rising due to the specialist nature of some hospital trusts.
- 19 Providers of services continue to push for increased fees, however we have started to implement the care cubed model to scrutinise care costs; we are working through the analysis of the initial tranche of providers who have been through this process we have identified some providers where their fees will be adjusted to take account of the care cubed work.
- 20 We are seeing a rise in demand from self-funded residents where their funds have reduced to a level that makes them eligible for funded social care and this demand is expected to increase. We have now initiated a project for future self-funders to request an assessment and information and support from a dedicated worker to explore options and to maximise their funds, enabling individuals to make informed decisions regarding their future care needs and services to meet needs, and to ensure that they have adequate funds to cover their wishes.

- 21 Scrutiny of cases continues at 3 x weekly Quality, Performance and Authorisation Boards. We are very aware of the risks of falling on the wrong side of the legislative framework where the council could be subject to legal challenge and therefore we review our decision making process to avoid this arising.
- 22 The demand in terms of the numbers of residents requiring a service continues to be stable however the rise in the complexity of cases is seen in the scale of the assessment process and the financial costs of challenging cases.
- 23 We continue to meet weekly to discuss risks and budget pressures. The deficit within the Cheshire and Mersey ICB will increase pressure on the council to pick up funding for previously funded health patients and this will require robust challenge and discussion. We are currently in discussion with our NHS partners over a number of cases on which we disagree. It is possible that there will be an additional financial burden placed on adult social care in the upcoming financial year.
- 24 **Fragility and failure in the Social Care Market:** There is currently only one care home that has been rated as inadequate by CQC across the Borough; Riseley House. Due to the delay in timely inspections being carried out by CQC, a risk-based review has been completed which has supported incremental admissions into the home following the provider successfully being onboarded to the Council's Accommodation with Care Framework.
- 25 Priestly Fields and St Catherine's Care Homes currently have placement embargos in place at this time due to the emerging quality risks that have been referred into the Local Authority Quality Assurance and Safeguarding Team. These homes continue to be comprehensively monitored and reviewed through our Contract and Quality governance oversight meeting, so system partners are aware of any risks and issues.
- 26 The quality assurance officers will continue to provide enhanced oversight of these homes and report any concerns to safeguarding. Emmie Dixon Care Home have indicated they are encountering financial challenges due to 3 vacant voids within the home. This situation is currently presenting financial sustainability challenges within the organisation. The provider is looking to safely rationalise expenditure across the home and commissioners have enhanced their oversight of the provider. Ongoing work continues with operational staff to try and fill the voids with compatible people. The current care at home waiting list remains at seven people which equates to 90 hours per week. An operating process is in place that ensures operational



colleagues continue to RAG rate individuals placed on the waiting list for care at home.

- 27 The increases in April 2025 to the National Minimum Wage alongside an increase in the Employers National Rate to 15%, and a reduction in the Employers National Insurance threshold will present an impact to the externally commissioned care providers. A fee's uplift options appraisal paper is comprehensively being developed to ensure we fully consider the implications relating to provider fees, market sustainability and operational risk management.

## **Children and Families Committee**

- 28 **Complexity and Demand for Children's Services:** No change to the net rating, it remains 12, a material risk but equal to the target score. Further growth is proposed within the MTFS for 2025/26, including £4.6m to support placement costs, and £2.7m to ensure the staffing establishment for children's services is fully funded. A base build of children's services will take place in April 2025 to ensure there are the right services in place to meet children's needs.
- 29 Internal and partnership assessment activity was undertaken to understand entries to care. This has identified the need to strengthen early help and prevention. This work has been presented to the Safeguarding Partnership and work is taking place to review collectively and identify actions required. In the interim a new court team has been devised to reduce the competing demands on social workers and improve timeliness and quality of interventions for when children do come into our care. A new partnership early help strategy has been developed and is currently open for consultation.
- 30 **Dedicated Schools Grant (DSG) Deficit:** The latest forecast for 2024-25 (based on actual expenditure April to November 24) shows a forecast deficit reserve position of £115.8 million, representing a total of £25.1 million reduced deficit compared with the original DSG management plan forecast (submitted to the DfE via the Safety Valve programme) and a £4.3 million reduced deficit compared with the reprofiled DSG management plan.
- 31 This lower deficit figure mainly relates to expenditure for placements in non-maintained special schools and independent special schools. The DSG management plan includes an increase in costs of 3.4% on all placements, therefore increasing the average cost. The actual expenditure suggests that not all placement costs have increased, therefore reducing the average cost of placements compared to the DSG management plan.

- 32 The total number of EHCPs recorded align with the DSG management plan target figure for January 2025 representing a reduced growth of EHCPs of 8% (previous year the growth was 13.6%).
- 33 Needs assessment requests have reduced compared with calendar year 2023 by approx. 11%, however in the first term of the academic year 2024/25 there has been an increase of 23% compared with the first term of academic year 2023/24.
- 34 We have seen an increase in needs assessment requests in relation to children and young people experiencing concerns around mental health and anxiety; within the applications we have seen an increased number with concerns in regards of barriers to accessing school full time and in some instance unable to attend school at all. Many of these children and young people do not yet have any diagnosis but are on ASC or ADHD pathways following referrals being undertaken. As a response to this we are currently looking to work with colleagues across the partnership including health to review the needs and themes to look at how we can support our children, families and schools/settings moving forwards.
- 35 To support parents/carers the Transition Team are now developing a dedicated webpage for each key phase of transition providing tailored guidance and resources. In collaboration with parent carer forum and other parent support groups we have identified common themes and concerns around transition. Additionally, we are attending parent support groups and encouraging coffee mornings within our settings to ensure parents feel informed and supported.
- 36 The DfE have announced the DSG allocations for 2025/26. All local authorities will receive at least 7% additional income in their allocation of High Needs DSG. This is 4% higher than anticipated in the DSG management plan, representing approx. £2.3m additional funding.
- 37 **Failure to Protect Vulnerable Children:** The existing controls and actions have been revised to reflect the current oversight and structure in line with the updated Multi Agency Safeguarding Arrangements (MASA). The timescale for reducing the net score has been move, in line with the action target dates, to December 2025.
- 38 The partnership is implementing the updated governance structure and arrangements as approved within the MASA. This includes an updated Quality Assurance framework and a proposed timetable for independent scrutiny. An independent scrutineer has been commissioned to consider contextual safeguarding, an audit to determine whether we are meeting our objectives, the structure within the service and provide support and recommendations on future improvements.

- 39 **Delivery of the ILAC Improvement Plan:** New governance arrangements have been agreed and put in place to support robust oversight of progress against the improvement plan. This includes an oversight group to provide scrutiny and challenge around the progress of the plan, which is underpinned by five workstreams to oversee delivery and impact. Our front-line staff have also been invited to inform our service developments and contribute to the workstreams to ensure accountability from front line practice, through to the senior leadership team. Co-production against appropriate actions has also been progressed to involve Children and their families.
- 40 The plan has been reviewed and strengthened under these arrangements identifying independencies and ensuring timescales are realistic and achievable. We have also agreed how we will quality assure that actions have had the intended impact. Work to progress those completed over 6 months are now being tested.
- 41 Cheshire East Council is expecting a monitoring visit from Ofsted in February 2025. Preparation activity has taken place to ensure we accurately understand ourselves and we are addressing our areas for improvement, including a partnership group to progress the peer review of the front door to children's social care.
- 42 Safeguarding Partnership arrangements have now been established to facilitate a more effective partnership and new structure approved. The Safeguarding Board has now been refreshed as part of those new arrangements and the remaining structure changes will be in place by April.
- 43 **SEND Inspection:** Work to embed the new 0-25 SEND Partnership governance arrangements has continued, with initial meetings of the new SEND Transformation Action Group (TAG) taking place along with a refresh of the 0-25 SEND and AP Partnership Board membership.
- 44 The Strategic Lead for SEND has worked with various services (both within the local authority and partner agencies, such as the Integrated Care Board) to refresh our SEND self-evaluation information, as part of producing the Children's Services SEF ahead of the upcoming north-west peer review. Work has also continued on the collation of required inspection evidence for a SEND inspection and has included several focused, service-specific meetings to look at evidence around areas such as alternative provision and health.

## **Corporate Policy Committee**

- 45 **Failure to achieve the MTFs:** No change to the risk ratings. The Council's Third Financial Review (FR3) shows a forecast £18.3m

overspend for the current financial year. This was reported to Finance Sub-Committee on 9 January and is also to be reported to service committees through the January cycle of meetings. Whilst an improvement on the Second Financial Review by £1.8m, the forecast overspend remains a significant financial challenge for the Council. Finance Sub-Committee approved the utilisation of the £17.6m conditional Exceptional Financial Support to balance the forecast overspend at the year-end, in order to protect and minimise the use of reserves (and also to plan for its financing in the next update of the MTFS). With use of reserves to cover the residual gap, and also funding in-year Transformation spending, forecast revenue reserves at 31 March 2025 were reported as £9.2m.

- 46 The Transformation Programme is underway and its outcomes have helped to shape the development of the Council's updated MTFS for 2025-29, offering the prospect of significant improvements against the four-year funding gap previously identified in the MTFS approved in February 2024. However, the Council continues to recognise significant pressures, particularly in social care, and including reflecting the potential effects on our expenditure requirements from Government changes in employers' National Insurance, and the National Living Wage.
- 47 The shortfall in 2025/26 identified in the MTFS report to the 9 January 2025 Finance Sub-Committee was estimated at £25.3m. At Corporate Policy Committee on 6 February 2025, Members will be asked to consider approaches to balancing the budget and improving financial sustainability, including options for further Exceptional Financial Support, prior to making recommendations to Budget Council on 26 February 2025.
- 48 **Leadership Capacity:** The Interim Director of People and Customer Experience joined CEC in mid-December, as did the Interim Head of Customer Services. All key, interim posts are filled and are kept under review, the only posts not filled are "Head Of" roles. A recruitment campaign commenced with our partner, Starfish; because of the scale of the work involved the recruitment is being phased.
- 49 The first tranche will focus on recruiting to the Executive Director Resources & S151 Officer, Director of Public Health, Governance, Compliance and Monitoring Officer and the Assistant Chief Executive. This includes posts that require Full Council approval. Recruitment of additional posts will take place from February onwards. It is envisaged that a permanent complement of Chief and Deputy Chief Officers will be in place in later Summer 2025.

- 50 **Ability to Achieve Organisational Change:** A reduction in the net likelihood brings the overall net rating down to equal with the target, the transformation plan is progressing in line with prescribed timelines/activities and an exercise to map savings against MTFS proposals has been concluded. The Target Operating Model has been produced and detailed communication plan has been developed. A further staff engagement event took place with 500 staff attending over two sessions.
- 51 **Recruitment and Retention:** No change to the risk this quarter. Expectations are that the risk will be materially revised in Q4 based on the views of the incoming Interim Director of People and Customer Experience.
- 52 **Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks:** Uncertainty has been removed from the register; the net likelihood aspect of this risk has significantly reduced following the introduction and progression of the Council's Transformation Plan, progress against the Corporate Peer Challenge actions, and following the closure of "Oflog", those additional reporting requirements are no longer required by central government. The council can be more confident in its ability to identify and respond to national policy or legislative changes in line with the Cheshire East Plan 24-25, and the Cheshire East Corporate Plan 25-29. This reduces the overall net rating to 4, equivalent to the target score. Specific issues relating to individual policy/legislation changes will be raised as required.
- 53 **Failure to Adhere to Agreed Governance Processes:** A reduction of the net likelihood was considered but in recognition of the number and complexity of Joint Arrangements/Committees in place, it was determined that the net score remains unchanged. CEC has a number of on-going areas that require legal and democratic support to ensure that all decisions are made within the agreed processes.
- 54 The three main examples of this are the Gemini ICT project with Cheshire West & Chester, insourcing our wholly-owned companies, Orbitas and ANSA back in house and the devolution programme. CEC's legal function is required to ensure that all decision-making is lawful and in line with the constitution. To do this, it must be sighted on prospective decisions in advance by the WLC. Partner's governance arrangements may also differ from our own, adding additional complexity to decision making and the achievement of objectives in required timescales.
- 55 **Business Continuity:** The planned business continuity workshops were delivered in Q3, they were received well and raised a number of practical questions that can feed into plans and arrangements going forwards. Based on feedback from services, the development of a

SharePoint based app would not be expected to deliver the required flexibility. The existing format of plans will be reviewed and updated during Q4, after which services will be supported in reviewing and updating plans. There is no change in the risk scoring at this time.

56 **Stakeholder Expectation & Communication:** In November 2024, as part of senior management restructure, a new service 'Engagement and Communications' has been created to bring together the consultation and communications functions, supporting actions in response to the LGA Corporate Peer Challenge Action Plan. Key developments impacting on stakeholder perception of the organisation in Q3 included:

- Devolution White Paper
- Council finances, provisional finance settlement and Exceptional Financial Support
- Implementation of parking review
- Food waste / three weekly collections proposals
- Highways maintenance
- HSE investigation
- Catering service in extra care housing
- Alternative rail proposals
- Armed Forces Covenant Gold award
- Longridge inquiry

57 Consultations during the period have included:

- Interim Housing Strategy
- Home repairs and adaptations policy
- Twilight meetings survey
- School admission arrangements
- Residual waste collections

58 During this period, the public and stakeholder engagement to inform budget setting started. This year, an alternative approach has been taken. In previous years, the council has asked residents for their views on a wide range of specific proposals for savings, growth and changes to services to balance the budget and deliver priorities. However, while uncertainties about funding and forecast demands for services remain and during the ongoing development of financial plans, the council is asking residents about what they think the council should prioritise when making its financial decisions, before proposals for a full balanced budget are put forward. This engagement activity continues into Q4 2024/25.

- 59     **Information Security and Cyber Threat:** No change to the risk rating. There is continued heightened risk currently through state sponsored attacks and increased ransomware activity. The NCSC have reported “Cyber-attacks are becoming more frequent and severe, posing a greater risk to British organizations and the public.” Of the incidents reported to the NCSC 89 were deemed nationally significant, including 12 critical incidents, a threefold increase compared to last year.
- 60     Identity Management/Data Quality; the employee directory within Unit4 and the Identity Management solution have been linked through the Master Data Management solution enabling the harmonisation of employee accounts, this will ensure that redundant accounts are deleted in a timely manner. Redundant and unused accounts are a weak element in any cyber security estate. This will ensure that data elements related to employees such as job titles and the organisation structure, will be accurate. Ensuring a useable Resource Directory is created and licensing details will be current.
- 61     Use of the Master Data Management solution safeguards the quality of key data elements across the entire organisation, while ensuring that data is not siloed and is shared where appropriate.
- 62     Data Security; several companies have been contacted that specialise in Security Operations to understand what level of support we could receive as part of a managed service to provide security and protection across a larger timeframe i.e. 24/7.
- 63     Information Management; the Enterprise Content Management project to move legacy file store onto SharePoint, is applying retention protocols to ensure that the information the organisation holds is current and compliant. This is increasingly important, not only for compliance purposes but also due to the potential increase in the use of AI.

## **Economy and Growth**

- 64     **Capital Projects – Place:** No change to risk; lobbying continues in relation to the Middlewich Eastern Bypass. The January Highways and Transport committee will consider a paper on the risks, programme and re-confirming delegations to enable a swift start on site should a positive decision be made by the end of Feb 2025. By the next update, it will be clear whether a further adjustment to the scheme spend and programme will be needed. The blight notice was withdrawn pending DfT decision but is likely to return if funding requests are not successful.

## Environment and Communities Committee

- 65     **CEC's Carbon Neutral Status:** During Q1 and Q2, the ongoing review of the Council's capital programme, which halted further spending on carbon-related projects. It presents a significant risk to the Council's commitment to becoming a carbon-neutral organisation by 2027. This pause in spending has prevented the ordering of the next phase of EV vehicles and the progression of the Council's second solar farm, which are key initiatives required to meet the target. As a result of these delays, the net and target scores remain at the highest possible rating.
- 66     Despite the delay, we have achieved significant milestones in previously authorised project spending. These include the completion of the Council's first solar farm, the installation of electric charging infrastructure for 23 vehicles, and the delivery of electric vehicles to street cleansing south and community wardens. Additionally, ongoing public sector decarbonization grant funding has supported the installation of air source heat pumps and roof-mounted solar panels on Council buildings. We have also made progress with this season's natural inset tree planting through the trees for climate fund.
- 67     **Local Planning Authority Modernisation:** ICT system now implemented for planning and land charges. Increased backlogs and delays were caused by the 'go live' processes and familiarisation of use. However, even after familiarisation questions remain over the functionality of the application processing which seems less efficient, particularly at the front-end. The web portal is also a source of concern as to its useability. The application backlog has been reduced to normal levels but will need careful monitoring with implementation of new system.
- 68     Recruitment to restructure is now ongoing. Update to S106 process and procedures are now largely complete following sharing of ward report sand commencement of quarterly update meetings with services. Tree Risk Management / Building Control Performance added to Improvement Board to ensure the new strategy and processes are effectively prioritised.

## Highways and Transport Committee

- 69     The Highways and Transport Committee have no specific strategic risks at this time, but this remains under on-going review. There are a number of risks related to with the areas associated with the Committee's area of responsibility and forthcoming work programme which are managed at an operational level, and will be reflected on in the review of the wider strategic risk register during the next quarter.



## **Emerging Risks**

- 70 During Quarter 4, the Corporate Leadership Team, as strategic risk owners will be supported with a thorough review of the scope and nature of their risks by the risk function. The view will consider the Cheshire East Corporate Plan 2025-29 and the Council's obligations and responsibilities. Members of CLT will then be able to consider if any material changes to their risk items are required.

## **Consultation and Engagement**

- 71 Each risk included in on the Strategic Risk Register is "owned" by a member of the Council's Corporate Leadership Team. At each quarter, the risk detail is updated through managers in their areas of responsibility, and the updated register is reviewed collectively by the Corporate Leadership Team.

## **Reasons for Recommendations**

- 72 Risk management is central to facilitating good governance and the achievement of corporate objectives. As a publicly accountable body, the Council must demonstrate effective identification and management of the risks that threaten the achievement of its corporate objectives and the effectiveness of its operations.

## **Other Options Considered**

- 73 No alternative options considered; this is an assurance update report to support the Committee in meeting its responsibilities under its Terms of Reference.

## **Implications and Comments**

### **Monitoring Officer/Legal**

- 74 There are no direct legal implications arising from the recommendations of this report. This report provides assurance that the Council achieves its strategic aims and operates its business, under general principles of good governance, that it identifies risks which threaten its ability to be legally compliant and operates within the confines of the legislative framework.

### **Section 151 Officer/Finance**

- 75 There is no direct impact upon the MTFS from the recommendations of this update report. Costs relating to implementing risk treatment plans are included within service budgets. The need to provide financial security against the impact of risks is considered on a case-by-case

basis and either included within specific budgets within the MTFS or considered under the overall assessment of the required level of General Reserves as part of the Reserves Strategy. The risk to the Council of failing to achieve savings identified in the MTFS has been identified as an emerging risk.

## **Policy**

- 76 Cheshire East Council has adopted the Risk Management Framework approved by Cabinet in June 2020. Risk management is integral to the overall management of the authority and, therefore, considerations regarding key policy implications and their effective implementation are considered within departmental risk registers and as part of the risk management framework.

<b>An open and enabling organisation</b>	<b>A council which empowers and cares about people</b>	<b>A thriving and sustainable place</b>
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## **Equality, Diversity and Inclusion**

- 77 There are no direct implications arising from the recommendations of this update report.

## **Human Resources**

- 78 There are no direct implications arising from the recommendations of this update report.

## **Risk Management**

- 79 This report relates to overall risk management and provides the Corporate Policy Committee with awareness of the most significant risks facing the Council, where strategic risks are emerging and assuring the Committee on how these are being managed.

## **Rural Communities**

- 80 There are no direct implications arising from the recommendations of this update report.

## **Children and Young People including Cared for Children, care leavers and Children with special educational needs and disabilities (SEND)**

- 81 There are no direct implications arising from the recommendations of this update report.

## Public Health

- 82 There are no direct implications arising from the recommendations of this update report.

## Climate Change

- 83 There are no direct implications arising from the recommendations of this update report.

Access to Information	
Contact Officer:	Josie Griffiths, Head of Audit, Risk and Assurance josie.griffiths@cheshireeast.gov.uk
Appendices:	CPC Q3 Strategic Risk Register (Detailed) - Appendix A CPC Q3 Strategic Risk Assurance – Appendix B ANSA, Orbitas and Tatton Park Enterprises Ltd – <b>PART 2 NOT FOR PUBLICATION</b>
Background Papers:	CPC Q2 Strategic Risk Assurance Report 28 November 2024