Ref	Risk	Q1 Net	Q2 Net	Q3 Net	Q4 Net	Travel	Target
SR01A	Increased Demand for Adult's Services	16	16	16	12	↓	9
SR01C	Increased Demand for Children's Services	12	16	16	16	↔	12
SR02	NHS Funding	16	16	16	16	↔	12
SR03	Failure of Financial Management and Control	9	6	9	9	↔	9
SR04	Information Security and Cyber Threat	12	12	12	12	↔	12
SR05	Business Continuity	9	9	9	9	↔	9
SR06	Organisational Capacity and Demand	12	12	12	12	↔	12
SR07	Failure of Council Funding	12	16	16	16	↔	12
SR08A	Governance and Decision Making	9	9	9	9	↔	4
SR08B	Political Uncertainty	12	12	12	12	↔	6
SR09	Capital Projects - Place	6	6	8	8	↔	8
SR10	HS2 Infrastructure Investment	16	16	12	12	↔	6
SR11	Pandemic Virus	9	9	9	6	↓	6
SR12	Fragility and failure in the Social Care Market	16	16	12	9	↓	9
SR13	Reputation	9	9	9	12	↑	9
SR14	Climate Change (CEC Carbon Neutral 2025)	9	9	9	9	↔	6
SR15	Failure of the Local Economy	9	12	12	12	↔	12
SR17	Local Planning Authority Modernisation Plan	-	6	9	9	↔	6
SR18	Delivery of the JTAI Improvement Plan	-	16	16	16	↔	6

Likelihood

4 (>75%)			SR04	SR01C, SR02, SR07, SR18
3 (40-74%)			SR03, SR05, SR08A, SR12, SR14, SR17	SR01A, SR06, SR08B, SR10, SR13, SR15
2 (10-39%)			SR11	SR09
1 (<10%)				
	1 (Minor)	2 (Tolerable)	3 (Serious)	4 (Major)

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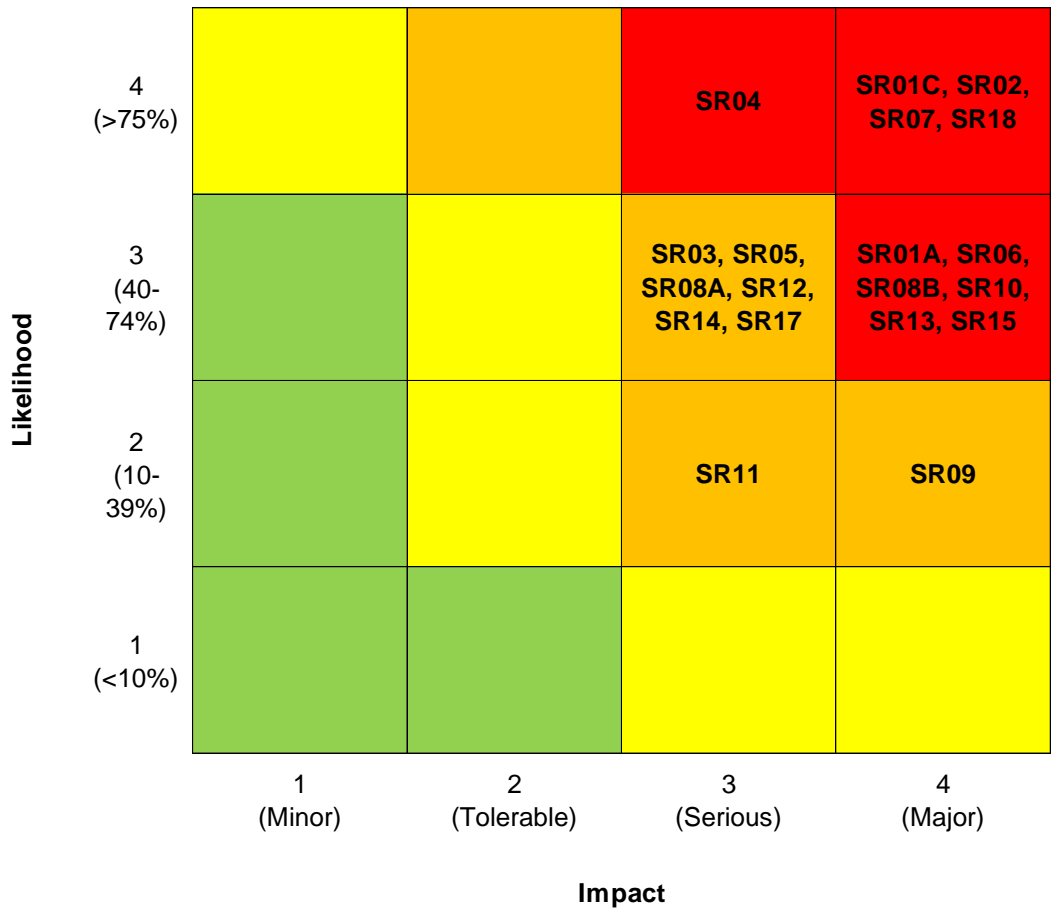
Colour	Description
Red	Critical Risks - Only acceptable in the short to medium-term, requires immediate action implementing and close monitoring
Orange	Material Risks - Areas of concern, but due to capacity and or uncontrollable external factors, these can be accepted. Expectation is that these must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

Greater weighting is given to impact over likelihood because we are more worried about a 10-39% chance of a serious event, than a 40-70% chance of a tolerable one
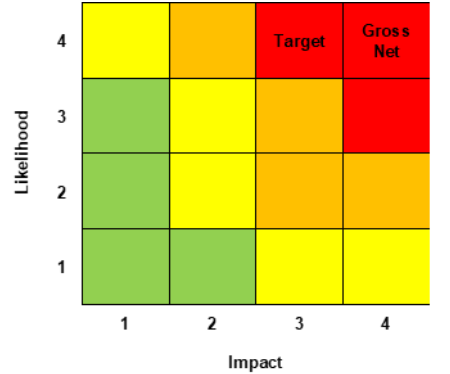
Risk Name: Increased Demand for Adult Services	**Risk Owner:** Executive Director of Adults, Health, and Integration
Risk Ref: SR01A	**Risk Manager:** Executive Director of Adults, Health, and Integration

Risk Description: An increase in demand for adult social services that cannot be met within the existing budget

Since the COVID-19 pandemic the demand for adult social care has increased in both volume and complexity. There is currently a historically high demand for services from young adults right through to the elderly. This has been caused by an overall decrease in national adult health and wellbeing. Detailed consequences: A failure in one area of social care, either internal or external to the council, has knock-on effects and increases pressure on other services. This can cause an on-going downwards trend in adult health and wellbeing. In addition, the council may fail in its duty of care and its objective of supporting its most vulnerable individuals. Specific failures that have been seen are a reduction in preventative measure and early intervention, which ultimately increase demand. Increased pressure on practitioners causes stress related issues and reduces the appeal of working in the sector.

Detailed causes: Due to the additional wellbeing pressures placed on residents, council staff, third-party providers and the NHS, the volume and complexity of demand for adult services has increased materially. As have political factors such as changes in legislation and resettlement agreements. Due to several different socio-economic factors recruitment and retention of staff is difficult resulting in increased use of agency staff.

Interdependencies (risks): NHS Funding, Failure of Council Funding, Fragility in the social care market, Failure of the local economy, Organisational capacity and demand

Comments this quarter: Likelihood reduced from 4 to 3 due to a stabilising of referrals into the service, slowing down the rate of demand for the majority of areas this is due to the work around prevention that is implemented at the front door so signposting individuals into community and voluntary services and away from traditional social care services. However, we continue to experience higher demand for Mental Health Act Assessments and referrals for safeguarding investigations. We are undertaking work to better understand demand and trends for these complex referrals into the services.

Actions (Monitoring):

ASC/ Commissioning and Communities, together with Public Health one Directorate continuing to work jointly to respond to challenges pertaining to prevention, health inequalities and our workforce (Monthly Budget, performance and finance meetings)

ASC/Commissioning and Communities developed a Standard Set of Fit for the Future Contracts – that set out specific measurable outcomes pertaining to each service area in driving prevention and key performance indicators that test the providers ability to retain a viable and sustainable business in responding to a population of changing need – higher levels of resident satisfaction and improved control (Quarterly contract meetings)

Continue to monitor and review preventative and support service activity (Monthly Budget, performance and finance meetings)

Continue to develop improved monitoring of people's outcomes (Quality file audit checks monthly)

Improved utilisation of public health JSNA and wider regional data sets informing future commissioning plans (Monthly SMT meetings)

Develop engagement with community groups and 3rd sector (Monthly SMT meetings)

Strengthen liquid logic and contract solutions to better map trend and demand (Power BI reporting and monthly performance data analysis)

To monitor and review thresholds and gatekeeping processes (Trend Analysis from performance reports reviewed monthly)

Review and strengthen partnership working with wider agencies (Directorate management team)

Restructured teams to ensure better integration with key partners (Directorate management team)

Continue to engage with leaders across teams – informing and influencing change (Directorate management team)

Continue with Connecting Leaders – through strong forward thinking visible leadership (Directorate management team)

Continued engagement with people who access services and the involvement of Healthwatch and independent advocacy (Directorate management team)

Proactive engagement with the new Integrated Care Partnership, including health partners (Directorate management team)

Ongoing response measures to COVID 19 pandemic (Directorate management team)

Maintaining Business Continuity across inhouse and external providers (Review and updated BCP quarterly)

Key Mitigating Controls:

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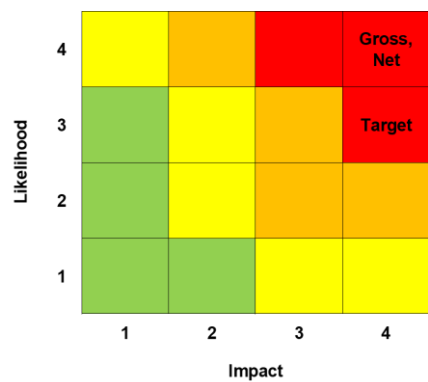- Consider the implementation of waiting lists to control demand and rising costs.

Lead Service Committee: Adults and Health Committee
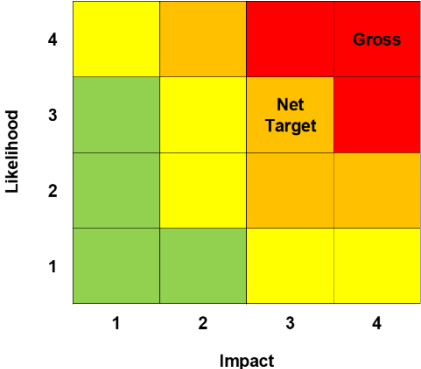
Risk Name: Increased Demand for Children's Services	**Risk Owner:** Executive Director of Children's Services
Risk Ref: SR01C	**Risk Manager:** Children's Services Directorate Management Team

| **Risk Description:** That Cheshire East's local social, economic and demographic factors, including the impact of the pandemic, lead to an increase in the level of need and demand for children's services, resulting in the capacity of the council's systems relevant to these areas being unable to continue to respond/ absorb the pressures presented. This risk would mean that we would not achieve the council's desired outcomes for children and young people.

The service has received growth through the MTFS to help address the pressures but the challenge to deliver to budget will remain present in 2023/24. 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. | |

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

This risk is also affected by the risk to the council's financial resilience and lack of certainty about future funding, as increased funding may be required to enable services to meet increased demand. It is also affected by the UK economy, as rising inflation increases costs for providers, which results in increased costs of placements or services such as transport.

There are also inter-relationships with the strategic risk on organisational capacity, as we need sufficient capacity to support recruitment and retention activity within children's services. Any capacity issues within support to this activity impacts children's services' ability to ensure our workforce can meet demand for services.

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

Comments this quarter: The service has received growth through the MTFS to help address the inflationary and demand pressures but the challenge to deliver to budget will remain present in 2023/24.

All indications are that demand, complexity and cost will continue to increase and therefore the directorate and the service committee must take action to address the financial challenges for 2023/24 and beyond. The directorate needs to save £3.5m within 2023/24 as part of the MTFS. 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, along with other projects to streamline services and reduce costs, such as a review of commissioned services and the development of family hubs.

Actions (Monitoring):

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 Big Board arrangements)

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)

Delivery of the delivering better value implementation plan (Children's services senior leadership team)

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

Implement Family Hubs – improving access and reach of services, supporting earlier intervention, and improving partnership working (Family Hub Steering group)

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

Key Mitigating Controls:

- The service has received £8m of growth through the MTFS to help address the pressures. This includes growth for children's social care, school transport, Educational Psychology and SEND services in response to the demand in these areas. However, the growth provided does not cover the whole pressure, so significant action is required to deliver savings to live within the budget. All indications are that demand, complexity and cost will continue to increase and therefore it is vital that the directorate and the service committee takes decisive action to address the financial challenges for 2023/24 and beyond. The directorate needs to save £3.5m within 2023/24 as part of the MTFS. 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, along with other projects to streamline services and reduce costs, such as a review of commissioned services and the development of family hubs.
- 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 on a monthly basis by services. The children's services quarterly scorecard is reviewed at the Children and Families Committee and the Corporate Safeguarding Accountabilities meeting attended by the chief executive and lead member for children and families. The Corporate Safeguarding Accountabilities meeting includes discussion of workforce pressures and risks.
- We have a range of support available to families through early help and prevention services, including council, partner, voluntary, community, faith sector and commissioned services. These services support families and help prevent needs from escalating and requiring higher level intervention. We are continuing to develop our service offer through developing our partnership working and joint commissioning.
- The Cheshire East Safeguarding Children's Partnership and the 0-25 SEND Partnership Board meet on a regular basis and are sighted on changes to demand for services so there can be a partnership approach to meeting children and young people's needs.
- 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 and the number of cared for children continues to increase, and to a large extent is being driven by the increase in unaccompanied asylum seeking children (UASC) that we are accommodating, with these young people accounting for 28% of the individuals entering care in the last 6 months. We will continue to review our approach, and look to identify options for children to live within their family networks as we believe this is the best outcome for them.
- A robust governance structure is established for SEND. A strategy is in place to manage increasing demand and reinforce SEN support in settings. There is significant investment in local SEND provision to meets children's needs more locally but also reduce dependency on high-cost independent school placements.
- 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. The high needs 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.
- 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 2022/23 to support the most vulnerable households across the county with food, utilities, housing costs, and other essentials. The Household Support Fund programme released over 135,000 payments to over 12,500 individuals in need across Cheshire East, receiving over 95% approval from feedback collected from the community.

Lead Service Committee: Children and Families Committee

Risk Name: NHS Funding	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR02	**Risk Manager:** Director of Commissioning

Risk Description: An NHS funding deficit reduces their health service delivery and places additional strain on the council's provision of adult social care

The ability to meet the council's target of residents living well for longer can only be achieved by an effective and comprehensive joint programme of health and social care services.

Detailed consequences: Additional pressure on social care may be realised in diverse and unexpected ways due to the complex and volume of interactions between the two services. Their symbiotic relationship means that one partner under or over performing has a corresponding effect on the other. An effective relationship would see reductions in health inequality and reduce the requirement for long-term care.

Potential causes: A funding deficit would be cause by a mismatch in resource and demand. The relatively poor levels of national public health and wellbeing following the pandemic and limited expectations for economic growth are potential drivers of a mismatch. Ultimately however NHS funding is a political decision, currently an area of uncertainty.

Industrial Action within the Health System is a growing cause for concern and will impact on the level of risk for Health partners.

Interdependencies (risks): Increased Demand for Adult's Services, Increased Demand for Children's Services, Failure of Council Funding, Pandemic Virus

Comments this quarter: Health Systems and Council Systems remain under severe financial pressure, staffing shortages within the Health system resulting in additional strain on the wider system and budgets. Jointly shared risks together with additional funding into BCF to fund community beds reducing slightly the risk to the council. Ongoing Industrial Action within the Health System is a cause for some concern.

Actions (Monitoring):

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

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

Joint Operational group to monitor hospital discharge flow and the use of 'step down' beds in the community funded via BCF (Weekly)

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

Lead Service Committee: Adults and Health Committee
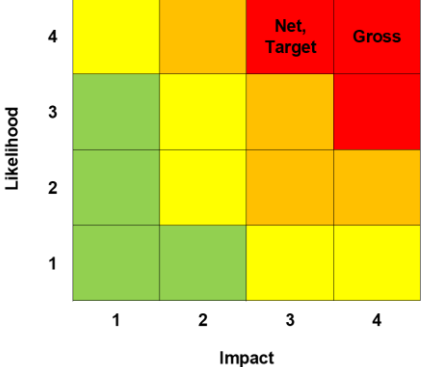
Risk Name: Failure of Financial Management and Control	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR03	**Risk Manager:** Director of Finance and Customer Services (s151 Officer)

Risk Description: The risk relating to the effective planning, recording, allocation, review and transacting of income and expenditure, relative to approved budgets.

Consequences: Misuse of public funds and a failure to ensure good value for money would result in poorer services for residents and local infrastructure; ultimately reducing the health and prosperity of the borough and its residents; and leading to financial difficulties for the Council regarding sufficiency of reserves, and a reduced ability to effectively plan, manage and deliver robust, balanced and sustainable budgeting in the future.

Causes: This risk is particularly operational in nature; failure to develop and follow comprehensive and effective internal controls and sound budget management practices would result in the risk materialising.

Interdependencies (risks): Economy, External Funding

Comments this quarter: Outturn for 2022/23 showed that expenditure exceeded income levels, though to a level anticipated in the Council's in-year reporting and reflected in the latest MTFS approved in February 2023. Whilst balancing the position did require utilisation of £5.2m from the MTFS Reserve, the required transfer from the General Fund Balance was £0.8m, being some £1.7m less than planned for.

This is a helpful position, but the risks to financial management – from exceptional inflation and rising demand for services; and levels of funding from or enabled by Government – remain. As described below in the Q3 review and in the Actions noted above, there is a planned approach to the tracking and reporting of activities relating to delivery of the changes approved in the MTFS; that process has commenced, and further comment will be provided at Q1 2023/24.

Actions (Monitoring):

Training and briefing to Councillors (Delivered, via Committee Work Programmes. Future need and timing of subsequent Member training to be reviewed after Council May 2023. To include a report on the CIPFA review of the role of audit/ governance committees)

Education and training on Finance and Contract Procedure Rules for officers and Members (Via Committee Work Programmes)

Action Plan on adherence to FM Code (Via Finance & Customer Services Departmental Plan. Action Plan to be developed by Head of Finance and newly appointed Finance Manager, by March 2023, for progression through 2023/24)

Each Directorate required to develop an action plan to balance their net spending to budgets, following the first in-year forecasts of financial pressure relating to 2022/23 (Financial forecasts prepared and reviewed within Services on an ongoing basis. Formal reporting of forecasts to Committees in 3 Financial Reviews during the year)

Budget management regime to be implemented for 2023/24 to track activities relating to delivery of approved budget changes (Tracking of delivery activities, and frequent reporting to CLT, to facilitate 'early warning system' ahead of formal financial reporting, enabling greater service business management control)

Key Mitigating Controls:
- Financial planning arrangements include preparation by the finance team, in liaison with senior operational managers, of detailed financial forecasts, based on the best available information and including prudent assumptions based on professional judgement and external advice
- Use of quality financial systems, with appropriate training and subsequent audit of their effectiveness to provide management and control of the Council's finances
- Balanced budget to put into effect the council's service plans for the forthcoming year, matched by available funding and including a risk assessment of the adequacy of general reserves
- MTFS sets out how the Council will deliver the Council's corporate plan including identification of budget gaps
- Use of a 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
- Sources of specialist advice and guidance
- Budget monitoring, comparing actual performance against approved budget, is undertaken throughout the financial year and reported to service committees.
- Outturn reporting and audit of statements supports in-year monitoring and future year planning

- Risk-based approach to the use of reserves, identifying appropriate reserve levels and ensuring that reserves are not depleted without first identifying a strategy to restore them to risk-assessed levels during the MTFS period.
- Where a residual deficit is forecast, a number of actions will be explored including:
  - use of any service or non-specific underspends to offset pressures elsewhere within the budget
  - accessing external funding ensuring compliance with any funding conditions
  - use of reserves
  - use of general balances
- Treasury management strategy to manage the council's cash flows, including an investment strategy focused on the security of principal sums and a borrowing strategy to manage interest payable and other charges
- A capital strategy that prioritises capital investment programmes, identifies the financial impact of investment in schemes and limits the amount of unsupported borrowing to be taken
- Education and training for Officers and Councillor, includes Finance and Contract Procedure rules
- Engagement with government departments related to financial models and consultation

Lead Service Committee: Corporate Policy Committee
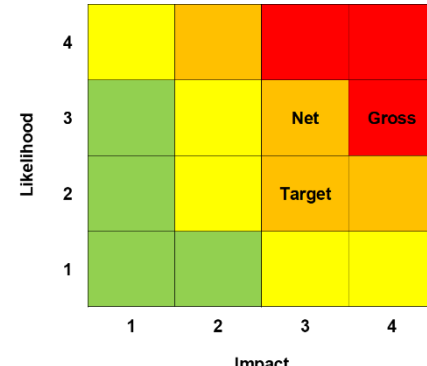
Risk Name: Information Security and Cyber Threat	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR04	**Risk Manager:** Head of Information Communication Technology and CIO

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

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

Comments this quarter: The Council's Data Classification product has been updated to utilise the investment in Microsoft licensing.

A number of key systems have been upgraded to use Single Sign-On which will support the principle and strategic direction of zero trust.
A report into the global cyber-attacks in 2022 by Check Point Research (CPR) notes a 38% increase compared to 2021. Education, government and healthcare organisations were the most targeted.

CPR's report says that criminal groups instigating the attacks are now smaller and more agile and are using business collaboration tools and the rapid shift to online working and learning to provide opportunities for exploitation. A number of sharing sessions have occurred with the Council, the Wider Leadership team and the Manager Sharing and Supporting sessions.

Even though that there are mitigation activities within the organisation which can limit the exposure of risk and minimise likelihood, with the rise of sophistication of attacks it is felt that the Net Risk should remain constant.

Actions (Monitoring):

Enable Data Quality consistency across multiple service areas (IADM will embed and centralise Addressing data against national data quality standards, which feeds business applications e.g., Master Data Management which will standardise the format and structure of corporate data fields which are prevalent across the Authority relating to Resident, Employee, Address and Business Records. Phase 1 MDM scheduled live date end of June 2023.)

Key Mitigating Controls:
- The CIO is an advocate of and reports on Information Risk to the Corporate Leadership Team and the Audit and Governance Committee and makes the Annual Statement of Internal Control of Information Risk.
- The Council has a number of Information and Data Security policies which are published on the Centranet and help to protect from the Council from inappropriate and unauthorised access and communicates what to do in the case of an incident. Policies; Information Security Policy Overview, ICT Access Policy, ICT Communications and Operations Policy, ICT Computer, Telephone and Desk Use Policy, ICT Email and Messaging Policy, ICT Flexible and Mobile Device Policy, ICT Incident management Policy, ICT Infrastructure Policy, ICT Internet Policy, ICT Legal Responsibilities for Data Policy, ICT Personnel Standards for Information Security, ICT Protection Policy, ICT Removable Media Policy and ICT Software Policy. Policies review and guidance materials updated to strengthen advice to staff on how to manage various information types
- Progress on Information Risk and Information Security is monitored through the Information Security Steering Committee (ISSC), Strategic Information Governance Group (SIGG) and the Virtual IGG Task and Finish Group.
- The Council has an Incident Reporting process which has been communicated to staff, all incidents are scored and assessed by IGG to ensure that the breaches are minimised, and future breaches are reduced.
- The Council complies with the Public Services Network PSN Code of Connection, NHS Data Security and Protection Toolkit, DWP's MOU and NHS Digital controls, work continues with the consolidation and enhancement of elements of the security estate to meet the ever-developing threat profiles. This includes third party IT hardware and software tests

undertaken by accredited security vendors, these validate that the network and hardware are secure and robust, if any vulnerabilities are found then a mitigation plan is drawn up and actioned.

- The Council has an Information Asset Register which is reviewed on an annual basis and has been published on the open data portal.
- There is also an Information Assurance Data Management (IADM) programme of activity to increase awareness and maturity of information assurance and governance across the Council. The programme is tasked with guiding the organisation to manage its information in a compliant and efficient way.
- Data Classification has been rolled out to the organisation; this allows the categorisation of information so that appropriate controls can be employed to protect the information.
- The Council provides security and compliance e-learning modules (which are mandatory for all employees) on the Learning Lounge. This includes several modules of Data handling, Cyber Security, and Information Assurance. There are also a number of 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 has a Data Protection Officer who assists in ensuring compliance with GDPR and to specify the procedures to be adopted.
- The Council's ICT Services have a strategic direction to move to a "Cloud First" principle, whilst this enables an evergreen environment which is always up to date, additional controls are needed to prevent compromise or inappropriate use and access. This includes contract compliance and monitoring to ensure ongoing protection of information. 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 looking to move to Zero Trust architecture, this is a direct result of increased threats posed to the working infrastructure. This shift is in line with the latest thinking and guidelines issued by the NCSC.
- In support of this a high-level business case 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.

Lead Service Committee: Corporate Policy Committee

Risk Name: Business Continuity	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR05	**Risk Manager:** Head of Audit & Risk

Risk Description: Failure to maintain business continuity after an unusual or unexpected, disruptive event or events. The risk that, some or all, of the council's services, projects or initiatives are unable to resume operations within the expected timeframes after a disruption. A disruptive event, or multiple events, may occur either in isolation, or across the whole organisation.

Detailed consequences: The council has a number of safeguarding obligations to its residents, a failure could result in it being unable to fulfil those obligations, and as such not protect them from mental or physical harm. Failures may also cause an unacceptable loss of local services.

Detailed causes: The unavailability of staff, ICT systems, equipment or a suitable working environment are the most common causes of a material failure. Many different social, economic, environmental or public health factors can drive these causes to manifest themselves. Underlying this may also be a failure to reasonably allocate resources to eliminate single points of failure in these areas.

Interdependencies (risks): Information Security and Cyber Threat, Pandemic Virus, Fragility in the Social Care Market, Council Funding, Organisational Capacity & Demand

Comments this quarter:
Existing BC plan content has been consolidated and made available and accessible following completion of the software contract in the quarter, The format of the plans will be developed as we completed exercises, co-ordinated between Emergency Planning and Risk & BC with services.

Actions (Monitoring):

Assessment of BC software with ongoing organisational needs

Work with Emergency Planning to hold regular scenario testing

Review and refresh of the Business Continuity Framework (2-year review cycle)

Development of training materials on Learning Lounge to support staff training and awareness (2-year review cycle)

Introduce moderation of BC plans across a working group for internal challenge and support

Co-ordinate refresh of BC plans with specific focus on ICT systems (One off action)

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

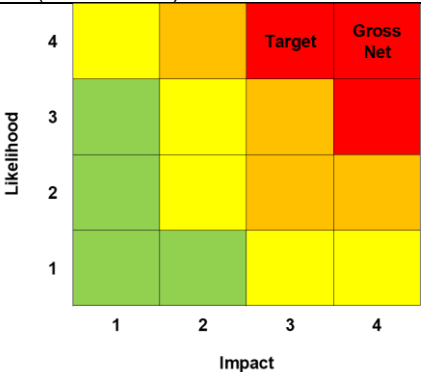**Lead Service Committee:** Corporate Policy Committee

Risk Name: Organisational Capacity and Demand	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR06	**Risk Manager:** Head of HR

| **Risk Description:** National and local demographics alongside external factors (including COVID and EU Exit) has led to increasing and changing demands on services. This, combined with ongoing financial pressures, an ageing workforce, staff turnover and skills shortages in key areas of the workforce, has resulted in insufficient capacity and an inability to retain or attract staff in some areas. This results in a detrimental impact upon the physical, emotional, and mental wellbeing of staff, and impacts negatively on the Council's ability to deliver all of its intended objectives and outcomes.

More recently increases to the cost of living also present risks to the resilience and wellbeing of our workforce and therefore the capacity to respond to demand. |

(Risk matrix: Likelihood (y-axis 1–4) vs Impact (x-axis 1–4). "Gross" plotted at Impact 4, Likelihood 4 (red); "Net, Target" plotted at Impact 4, Likelihood 3 (red).)

Interdependencies (risks): Business Continuity, Pandemic Virus, Increased demand for Adults Services, Increased demand for Children's Services, Financial Resilience

Comments this quarter: No changes to the rating, the labour market nationally remains challenging, and the cost-of-living crisis continues to impact on staff financially and in terms of their wellbeing and resilience. This has not improved and will be impeded further by ongoing price increases and a reduction in government support. Increased uptake/use of the Employee Assistance Programme, following a series of publicity and comms to the workforce and specific sessions with managers. This work will continue and will be key to providing ongoing health and wellbeing support to the CEC workforce.

Work on recruitment and retention continues to improve the efficiency of the recruitment process and enhance the employee offer to potential recruits. This is supported by a range of initiatives to also support the retention of the workforce. An increase to the value of the Cycle to Work scheme has been implemented to encourage staff to buy cycles which in turn supports CEC's carbon neutral ambitions by encouraging active travel. An audit continues to review the overall cost and usage of the agency contract. The MARS scheme has been re-run, with 44 staff set to leave CEC by the end of June. Some service areas will be re-designed and re-structured to minimise the impact on the workforce.

Actions (Monitoring):

Implementation of Council wide Workforce Strategy and Directorate /Service Workforce Plans (3-year strategy then rolling coverage and review)

Recruitment and Retention Programme and Steering Group (Work of the programme overseen by Steering Group)

Delivery of EAP services for staff (On-going review of deliverable services, take up/staff interaction measured on a quarterly basis)

Focused apprenticeship levy funding to support high priority areas (Alongside the apprenticeship action plan)

Support for senior managers in the redesign and restructures of services to meet the MTFS targets including MARS to minimise the impact on the workforce

Focused support to services to reduce reliance on and use of agency staff (Ongoing review of delivery, cost, and outside influences such as permanent recruitment solutions that impact on usage)

Fortnightly organisation wide wellbeing update for all staff. Promotion of the government funded initiative Able Futures (On going delivery and review, monitoring take up)

Key Mitigating Controls:
- In terms of demand, work planning in advance has been improved. Significant increases in work pressures are being raised in advance, so that additional resource can be sourced for commissioned work. Improved HR data is being used to identify potential issues and service workforce plans developed to mitigate. The apprenticeship levy, talent management and succession planning frameworks are under development to help mitigate.
- Work on a recruitment and retention programme progresses at pace to put in place any additional measures available to attract and retain staff to those areas that have identified gaps. This is alongside consideration being given to identifying controls and support that can be provided to retain existing staff.
- Ongoing work continues to reduce reliance on agency staff and transition to a more stable permanent workforce base with reduced costs.
- A range of comprehensive measures are in place to support staff wellbeing and resilience and additional measures to offset cost of living pressures have been put in place. The introduction of additional wellbeing and staff benefits is being explored as the national cost of living crisis develops.
- Labour market pressures still exist. Locally, there are pressures in the care, social worker, planning and ICT sectors. . Authorities are competing for the same staff and offering higher salaries and other benefits which can impact on staff retention.
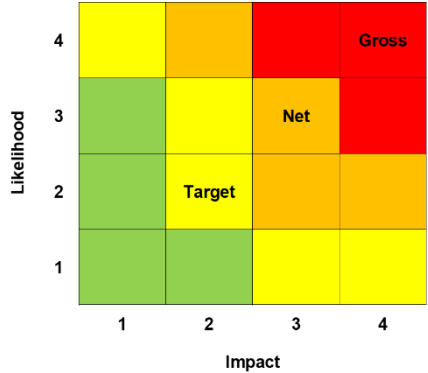
- Agency staff are not always available to fill the roles. Additional work programmes and recruitment campaigns are also in place for areas such as Care4CE and social work. Redeployment of staff is being considered where services are struggling to fill vacancies and agency staff are not available.
- The council is moving to agile working, which may help to attract a wider pool of candidates.
- The Head of HR considers that the measures reduce the likelihood but not the impact.

Lead Service Committee: Corporate Policy Committee

Risk Name: Failure of Council Funding	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR07	**Risk Manager:** Director of Finance and Customer Services (s151 Officer)

Risk Description: The risk that the level of income is insufficient to support delivery of the Corporate Plan. This risk acknowledges that Council reserves are not intended, or sufficient, for the support of day-to-day operations for any meaningful period.

Consequences: Based on an extreme but plausible worst-case scenario of funding cuts, the Council's regulatory obligations would be maintained, although delivered by 'barebones' services. Other Council services/ functions may see similar resources reductions, or be closed altogether. A reduction in services would negatively affect the quality of life in the borough and the strength of the local economy. Regulatory breaches could also occur in relation to a number of different services, financial management being one of them. Some funding is specific to a service or outcome and cannot be redistributed; and without the designated funding a service could not be provided.

Causes: Significant reduction to local income generation or central government cuts would result in the worst-case scenario. The high levels of national debt, high inflation and weak national economy at the present time mean that the Council is highly likely to have to prioritise its spending in the short to medium-term.

Interdependencies (risks): Financial Management and Control

Comments this quarter: Outturn for 2022/23 showed that expenditure exceeded income levels, though to a level anticipated in the Council's in-year reporting and reflected in the latest MTFS approved in February 2023. Whilst balancing the position did require utilisation of £5.2m from the MTFS Reserve, the required transfer from the General Fund Balance was £0.8m, being some £1.7m less than planned for.

This is a helpful position, but the risks to financial management – from exceptional inflation and rising demand for services; and levels of funding from or enabled by Government – remain.
As described below in the Q3 review and in the Actions noted above, the budget for 2023/24 and MTFS 2023/24-2026/27 was approved by Council in February, based on the final settlement. It is still considered that grant allocations and 'flexibilities' afforded by government fall significantly short of the estimates of spending required (largely due to pay and cost inflation, and effects on demand for services), and long-term solutions continue to be needed, particularly in respect of social care (including the relationship with health services) and the funding of high needs children's services.

Actions (Monitoring):

Each Directorate is required to develop an action plan to balance their net spending to budgets, following the first in-year forecasts of financial pressure (Financial forecasts prepared and reviewed within Services on an ongoing basis. Formal reporting of forecasts to Committees in 3 Financial Reviews during the year)

Children's Directorate is participating in the DfE's delivering better value (DBV) programme to support the Council to achieve a more sustainable financial position in relation to SEND (Periodic review/ reporting as required by the DBV programme)

Preparation of the Medium Term Financial Strategy (MTFS) update for 2023-2027 to fully reflect latest understanding of 'spending powers' as per 2022 Autumn Statement and draft local government financial settlement; with plans and proposals made to reduce net spending plans accordingly and seek approval for a balanced, robust and sustainable budget (Approval of budget at Full council in February. Robust and frequent reporting of delivery of the budget changes approved, to Corporate Leadership Team and Members. Formal reporting of forecasts to Committees in Financial Reviews during the year)

Key Mitigating Controls:
- Financial planning arrangements include preparation by the Finance Team of detailed financial forecasts, based on the best available information and including prudent assumptions based on professional judgement and external advice and intelligence
- Balanced budget to put into effect the Council's service plans for the forthcoming year; matched by available funding and including a risk assessment of the adequacy of general reserves
- Monitoring of grant funding formula, and engagement with consultants, local government finance networks and central government representatives to enhance local forecasting and access to funding.

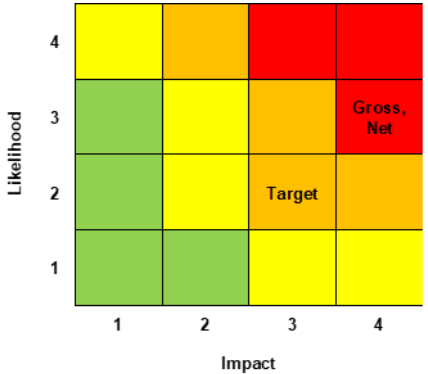**Lead Service Committee:** Corporate Policy Committee

Risk Name: Governance & Decision Making	**Risk Owner:** Executive Director of Corporate Services
Risk Ref: SR08A	**Risk Manager:** Director of Governance and Compliance

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

The council is a complex public sector organisation with a broad range of objectives, some of which it is legally obligated to deliver, others are identified within its Corporate Plan. Formal reporting and decision-making within the council is prescribed by local authority regulation. The decision-making process at all levels, must comply regulatory requirements while also delivering those stated objectives. The Council is a complex public sector organisation and interacts with other complex organisation such as Health, Police, emergency response, housing providers etc. Appropriate governance is required to ensure alignment of decisions which reflect the best interest of residents across the public sector and other partnerships.

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

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

Risk matrix (Likelihood vs Impact): Gross at Impact 4, Likelihood 4; Net at Impact 3, Likelihood 3; Target at Impact 2, Likelihood 2.

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

Comments this quarter: No material change to the risk at this time, actions updated. The public interest report on the council's culture and governance arrangements during 2014 – 2018 was circulated to full council 1st February. While it was highly critical of the historic events it did recognise the continuing improvements in governance undertaken. Work to improve consistency and minimum standards, with regards to governance arrangements, continues across all areas of the council.

As a result of economic pressures, services will be required to deliver reduced expenditure (in real terms), as per the latest Medium Term Financial Strategy (MTFS) which was approved by full council 22nd February. The scale of these reductions will impact the services that the council currently delivers, to implement changes service areas should undertake a robust decision-making process.

The Alternative Service Delivery Vehicle (ASDV) governance review, completed by a working group of the Finance Sub Committee, will be reported to that Committee in September.

Actions (Monitoring):

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

CIPFA review of Audit & Governance Committee (Annually by Audit & Governance Committee)

Corporate discussion document on systemic improvements and decision-making (Corporate services and statuary officers)

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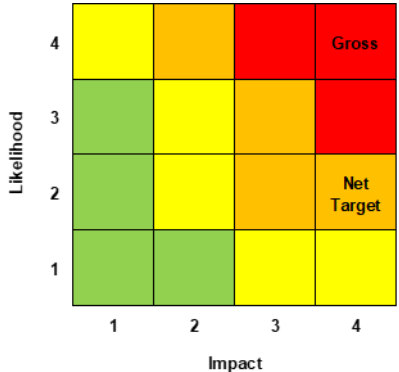
- Reports to Committees are developed and reviewed by senior officers and enabler sign off, briefings are arranged with Committee Members to address any further knowledge requirements ahead of the relevant meeting. All decisions are formally recorded in meeting minutes and administrated in line with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

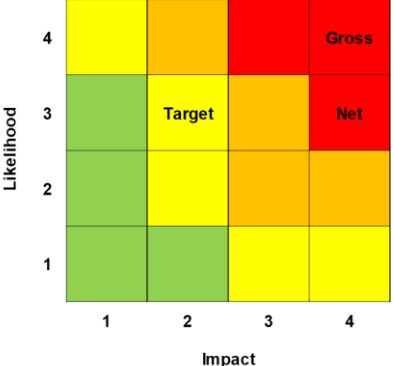**Lead Service Committee:** Corporate Policy Committee

Risk Name: Political Uncertainty	**Risk Owner:** Chief Executive
Risk Ref: SR08B	**Risk Manager:** Director of Governance and Compliance (Monitoring Officer)

Risk Description: Failure to anticipate and manage local and national political uncertainty

Global risks, economic, conflict etc impacting on central government policy approach and focus of local political objectives.

The Corporate Plan guides the council's decision-making, it informs what is considered a 'good' outcome and areas of priority. Political changes may result in stakeholders no longer being aligned with that current plan. Central government policy decisions can materially impact the council in many ways, while other risks might draw out specific changes and capture their direct impact, this risk brings together the total effect of political uncertainty for consideration.

Detailed consequences: Unplanned changes in priorities or the introduction of new goals are likely to result in a budgetary overspend or previously agreed targets not to be met. A high level of uncertainty can create confusion, increased administrative overhead or delay planned initiatives. Changes in funding or the cancellation of infrastructure projects can undermine both the Corporate Plan and the MTFS. Individual projects within the Corporate Plan can become subject to changes in local political activity

Detailed causes: The ever-changing social and economic situation in the UK and globally can result in swift changes in political views, leadership, public sentiment or regulatory requirements. National macroeconomic factors, such as GDP, interest and exchange rates, are key drivers of uncertainty. Rapid changes in public perception through social media or other routes can rapidly alter the political environment or priorities.

Risk matrix: Likelihood (vertical axis, 1-4) against Impact (horizontal axis, 1-4). "Gross, Net" positioned at Impact 4, Likelihood 3. "Target" positioned at Impact 3, Likelihood 2.

Interdependencies (risks): Reputation, Council Funding, Governance & Decision-Making

Comments this quarter: No material change to the risk at this time. The action to review the new committee briefing process will be implemented after the forthcoming local elections, their induction and on-going support is designed to support member decision making. Changes to the administration of the elections is progressing as planned.

During the period full council approved the latest iteration of it Medium Term Financial Strategy (MTFS), its focus being deliver of a balanced budget during the current economic pressures. However there remains the potential for political uncertainty to disrupt the realisation of the budgeted savings. Given the close proximity of the local elections, there may be delays in the implementation of specific changes.

Actions (Monitoring):

A review of the Committee briefing process against recognised best practice to identify any potential improvements that may be required

Preparations for the 2023 Elections to ensure political and public confidence in the democratic process (At regular meetings of the officer elections group)

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.

Lead Service Committee: Corporate Policy Committee
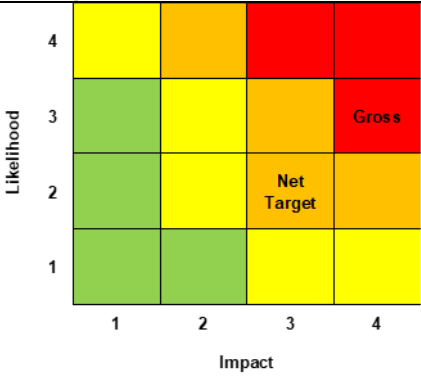
Risk Name: Capital Projects - Place	**Risk Owner:** Executive Director of Place
Risk Ref: SR09	**Risk Manager:** Place Directors and Business Managers as relevant to

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

Comments this quarter: The existing controls for effective governance and management of major capital investments, both at programme and individual project levels, as documented above remain in place, and are subject to regular review. Inflationary effects continue to be monitored, with input from the supply chain where appropriate, with any variances reported via the relevant programme board forum.

Actions (Monitoring):

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

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

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

Risk Name: HS2 Infrastructure Investment	**Risk Owner:** Executive Director of Place
Risk Ref: SR10	**Risk Manager:** Director of Highways and Transport

Risk Description: HS2 is a government led scheme, impacting Cheshire East Borough. HS2 services will call at Crewe station when Phase 2a opens between 2032 and 2036 with 2 HS2 trains per hour. Plans for Phase 2b include the Crewe North Connection that could enable up to 5/7 HS2 trains per hour calling at Crewe, in each direction. However, the business case for Phase 2b does not include any additional services, from the 2 HS2 trains per hour, calling at Crewe when Phase 2b opens between 2035 and 2040.

Government's proposals for Crewe hub station fall far below those of other HS2 hubs and don't reflect its role as a rail super-hub and the first HS2 hub in the North. Current proposals are unlikely to unlock the regeneration, growth and levelling up potential for Crewe from the investment in HS2. Securing the required investment for the Crewe station is critical to the Council in delivering its Crewe hub vision, maximise cost and programme efficiencies and minimise disruption to rail passengers and local communities.

The government is in control of the HS2 programme and its delivery timescales. Delays to the scheme were announced as part of the Integrated Rail Plan, published in November 2021. In March 2023, Government announced a further 2-year delay to the delivery of HS2 Phase 2a, between the West Midlands and Crewe, as a way to manage the affordability pressures resulting from the construction inflation pressures. Such delays, and the risk of further delays to HS2 Phase 2b, leads to uncertainty on the delivery and viability of the Council's wider ambitions for the Crewe hub. However, Government has reiterated its ambition to deliver the full western leg of HS2, including Phase 2a to Crewe and 2b on to Manchester.

The Council has been developing its vision and plans for the Crewe hub alongside partners for several years, at significant cost to the Council, lack of firm commitments about timing, infrastructure and HS2 train services means there are uncertainties on the programme delivery and scope puts increasing risk on these costs being abortive

Interdependencies (risks): Economy and World Events, Organisational Capacity and demand, Council funding, Capital Projects

Comments this quarter: On 9th March 2023, Government announced that the construction and opening of HS2 Phase 2a, between the West Midlands and Crewe, would be delayed by 2 years to manage the inflation pressures on the Phase 1 and Phase 2a schemes in construction.

The Council withdrew its petitions against the Phase 2b hybrid bill and AP1 on the 13th March 2023 after securing a package of assurances and commitments from both HS2 Ltd and Government. These included commitments to further investigation and design work on the Crewe Hub and commitment for Government to work more closely with the Council to unlock the regeneration potential of HS2 to the Town via a Crewe Hub Taskforce. Membership of the Taskforce will be of senior ranking officials to provide the necessary drive and leadership required to bring the Crewe hub vision to reality.

Actions (Monitoring):

Tactical lobbying to Government, gaining support from local politician, MPs and neighbouring authorities (Business Case and Investment Integration Programme Board)

Seeking necessary Crewe hub investments via petitioning of the Phase 2b hybrid bill (HS2 and Crewe Superhub Programme Board and Place Board. Retain option to petition further in House of Lords if study and Taskforce not delivering necessary outputs)

Decoupling investments from HS2 programme and seek funding from existing government funds (LUF Round 2 bids were unsuccessful – awaiting detailed feedback. Option to resubmit bids in Round 3)

Regular engagement with senior Government officials (Place Board)

Key Mitigating Controls:
- This risk will be reviewed by the Place Board (chaired by the Executive Director of Place) and the Business Case and Investment Integration Board (chaired by the Director of Finance) on a monthly basis and the chairs inform CLT accordingly.
- Day to day management of the actions in place to reduce the risk is a combination of the BCII: Business Case and Investment Integration, the Programme Director and the Programme Manager. The controls above will be used to monitor the risk.
- Monthly meetings between senior Council officers and senior cross-departmental Government Officials have been established to establish a shared vision for Crewe and identify opportunities to bring forward key station asks
- The Council secured the following commitments from Government through its petition against the Phase 2b hybrid bill;
  - To fund and commission a study to identify the interventions needed at Crewe station to support future passenger demand and unlock regeneration opportunities and to fund the necessary design work of such interventions

- o To establish a Crewe Hub Taskforce, made up of senior officials from the Council and from across central government departments, focused on maximising the regeneration opportunities from HS2 for Crewe. The taskforce will be governed under a more robust governance arrangement that the prior arrangements to drive forward the regeneration potential for Crewe.
- There have been no control failures to date. In fact, the controls in place today are probably stronger than at any point in achieving the objective. This is commensurate to the closing window of opportunity and the increase in work required by the Council to turn the outputs of the consultants Business Case work. Future issues may arise if the dedicated resource currently requested is not quickly put in place to release the efficiencies of working a close dedicated team brings.
- Ultimately, while the Council can control the technical evidence, business case formation and the technical level negotiation with Government Departments, the risk may be impacted on by changes Government policy and prevailing global economic factors.
- Value engineering of design and development of projects and Early Contractor Involvement where appropriate.
- Bringing forward elements of the vision through existing funding sources
- Liaison with the contracting industry to identify the most efficient design solutions.
- Constant review and effective management arrangements of capital projects and programme budgets.
- Managing outward facing expectations on the scheme
- Ongoing cost review based on latest construction inflation forecasts

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

Risk Name: Pandemic Virus	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR11	**Risk Manager:** Director of Public Health

Risk Description: Ongoing risk of genetic shift resulting in rapidly spreading strain of influenza and other diseases previously unseen in humans for which there may be multiple Variants and no guaranteed preventative treatment available. In addition to the human health risks pandemic illnesses poses a risk to healthcare capacity and CEC business continuity.

(Cause) There is always a potential that a pandemic will occur, due to the high level of mobility throughout the world, (threat) having a negative impact upon the health and wellbeing of the Cheshire East population, place significant pressures upon the health and care system and its workforce, threaten the viability of local business and further exacerbate the financial pressures faced by health and care organisations and the Council, (impact) resulting in serious illness and in some cases death, unmet health and care needs, interruption to education, economic down turn and business failure and a widening financial gap in health and care organisations.

(Risk matrix: Likelihood vs Impact, showing "Gross" at Likelihood 3 / Impact 4 (red), "Net Target" at Likelihood 2 / Impact 3 (orange))

Interdependencies (risks): Fragility in the social care market, Business continuity, Financial resilience

Comments this quarter: The national track and trace programmes have been ceased. A Spring COVID Vaccination Booster programme will be implemented in April 2023. It will target Cre Home residents, people aged over 75 years and immune-compromised individuals.

The UKHSA is currently monitoring the spread of the XBB and the CH1 variants and the number of cases within the UK as a potential source of a new wave of COVID. At present the level of the UK dominant strain (Omicron) is low. New guidance has been issued by the DHSC regarding the testing regimes for the health and social care sector. These have been circulated to provider agencies and appropriate Local Authority staff. Though the overall number of cases of COVID are much lower than the peaks of the pandemic

Actions (Monitoring):

Initiating flu vaccination programme for all staff and communications supporting need for public vaccinations (reviewed monthly)

Development of regional 'business as usual' approach for Cheshire and Merseyside (reviewed quarterly)

Horizon scanning to understand long-term management of Covid-19, including the development of a Covid-19 'Early Warning System' and wastewater monitoring project with UKHSA (reviewed monthly)

Key Mitigating Controls:
- Limited National Government advisory measures. Published guidance and advice is now only available in limited sectors. The primary universal guidance is now outlined in the HM Government 'Living with Covid-19' plan but all mandatory Legislation and restrictions have now been removed in the UK
- National Vaccine roll out. Percentage of residents receiving primary and booster doses. Spring Booster Campaign now under way. (Secondary assessment, percentage of residents receiving some vaccinations)
- Cheshire East Emergency Planning activity, reduced frequency or stood down - Local Outbreak Engagement Board, Health Protection Board, Operational meetings, Track and Trace Huddle
- Advice and guidance to schools, businesses and residents. Limited communications and engagement activity, support for businesses and care providers.
- Cheshire East organisational activity, managed return to the workplace, hybrid working option, public health advice, targeted LFT home testing for staff
- Supporting NHS roll out of COVID 19 vaccination programme, established and operating including mobile offer. Spring programmes being supported by the public health and communities teams. Programme Commenced 3/04/23
- Initiating flu vaccination programme for all staff and communications supporting need for public vaccinations. Established and operating

Lead Service Committee: Adults and Health Committee

Risk Name: Fragility and Failure in the Social Care Market	**Risk Owner:** Executive Director of Adults, Health and Integration
Risk Ref: SR12	**Risk Manager:** Director of Adult Social Care, Director of Commissioning

Risk Description: A failure of the local social care market

The impact of the COVID-19 pandemic has exposed weaknesses in the national social care market which have yet to be resolved.

Detailed consequences:
The council is unable to deliver a robust adult social care package without the use of third-party providers, without these outsourced services the overall social adult care package would fail and the council would not be able to achieve its objective of people living well and for longer.

Detailed causes:
The major risk going forward is the financial impacts on providers resulting from the 9.7% uplift in National Living Wage from April 2023, high rates of inflation and increased energy costs (some providers have seen a 400% increase on renewal of their energy contracts). While there is proposed growth within the MTFS for Adult Social Care this will not be sufficient to offer fee uplifts for all providers as well as funding growth in demand and complexity of need. It is likely that this 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. It will also bring challenges in managing budgets in 2023/24.

Risk matrix: Likelihood (vertical axis, 1–4) vs Impact (horizontal axis, 1–4). Gross marked at Impact 4, Likelihood 4 (red). Net Target marked at Impact 3, Likelihood 3 (red).

Interdependencies (risks): NHS Funding, Failure of Council Funding, Business Continuity, Pandemic Virus, Failure of the Local Economy

Comments this quarter: While the care market is still fragile, care markets continue to show signs of recovery, and stability particularly in domiciliary care. This is due to the development and publication of our Market Sustainability Plan which includes further investment within the Domiciliary Care Market and Complex Care for April 23 onwards. Further work continues in terms of the Commissioning of Domiciliary Care and Complex Care in partnership with the Market through the developments of Strategic Commissioning Plans.
However, the number of referrals for all types of care increased from 830 in Q3 to 1,011 in Q4. The number of care at home hand backs remains static at 28 (369.25 hours) in Q4 compared to 29 (362 hours) in Q3.

Due to the increase in referrals and short-term solutions waiting placements during March 23 we have seen a 47.5% increase in the number of people awaiting a care home bed. However, we have also seen a reduction in short terms placements of 9.9% during March 23. The Market Sustainability Plan (MPS) was published and submitted to the DHSC on the 27th March 23, Which includes a fee uplift for Care at Home and Complex Care.

Actions (Monitoring):

Comply with DHSC requirements to undertake and publish a cost of care and develop, submit and publish a Market Sustainability Plan (Reviewed by DHSC)

Continue to engage with care providers around market pressures and identify support required from short term and recurrent funding streams (ASC Operational meetings, Monthly Provider Forums)

Expand the existing British Red Cross service to respond to crisis situations in the community by providing low level support over a 7-day period (Weekly via Market Oversight meetings)

Undertake a review of care fees for all sectors of the market (Weekly meetings with contractor, findings reported to Health and Adult Committee. This has been completed in accordance with DHSC guidance)

ASC/ Commissioning continues to respond to significant challenges pertaining to the acceleration of prevention (Twice weekly ASC meetings)

ASC/Commissioning and Communities have a Standard Set of Fit for the Future Contracts – that set out specific measurable outcomes pertaining to each service area in driving prevention and key performance indicators that will test the providers ability to retain a viable and sustainable business in responding to a population of changing need – higher levels of resident satisfaction and improved control (Quarterly contract management meetings)

Continue to monitor and review preventative and support service activity (Twice weekly ASC meetings)

Improved utilisation of public health JSNA and wider regional data sets informing future commissioning plans (Monthly JSNA steering group)

Develop engagement with community groups and 3rd sector (Twice weekly ASC meetings)

Liquid logic and contrOCC solutions to better map trend and demand (Twice weekly ASC meetings)

To monitor and review thresholds and gatekeeping processes (Twice weekly ASC meetings)

Review and strengthen partnership working with wider agencies (Monthly Quality Monitoring Partnership Forum)

Data intelligence is used to understand where and what kind of service demand needs are in order to commission appropriately and effectively (Monthly Care at Home Commissioning meetings)

Continue to engage with leaders across teams – informing and influencing change (Twice weekly ASC meetings)
Continued engagement with people who access services and the involvement of Healthwatch and independent advocacy (Twice weekly ASC meetings)
Joint working with 'skills for care' to encourage individuals to take up employment within the care sector (Monthly Providers Forums)
'Hidden Carer's' initiative launched through Carer's Hub to help identify and support carers not known to the system (Weekly via Market Oversight meetings)

Key Mitigating Controls:
- ASC/Commissioning comply with the Care Act 2014, in holding a provider risk register whereby we monitor and review risk pertaining to specific providers as part of our role working with Care Quality Commissioning pertaining to Market oversight
- ASC/Commissioning have in place a robust Care Act compliant – Contracts and Quality Monitoring Policy Framework – that makes clear – how quality is monitored in a person-centred way with a vast range of partners, when to activate a suspension protocol working with care quality commission and when/ how we are decommissioning services – keeping people at the centre of decision making regarding any service disruption or period of market failure
- ASC/Commissioning operate a monthly quality monitoring partnership forum that includes Police, Safeguarding, Care Quality Commission, ASC operations, Legal, CCG's and ASC lead commissioner – in the ongoing monitoring of quality and reporting and alerting of risk escalation that can be effectively managed – reports into relevant DMT's and Safeguarding Board
- ASC/Commissioning have a care sourcing/brokerage team support service and a local area co-ordination services- supporting vulnerable people to access wider community/ third sector services and wider more universal offers – diverting people away from care where appropriate utilising People Healing People services
- ASC/Commissioning provider financial self-assessment accreditation tool – to assist with the monitoring and management of potential uplift and or additional funding. This will ensure that funding is robustly based on clear evidence, against demand / trends in market development and impact on provider/ council and people accessing the service. For providers at risk we are offering an open book accounting exercise to ascertain the level of risk within that service
- ASC/Quarterly staff engagement groups are developed through leadership forums so to keep people informed and abreast of change as we progress in order to respond to demand and growth in the sector
- ASC/Commissioning are influencing and working with Cheshire East Place pertaining to local ICS and ICP plans regarding the overall reduction in demand and systems redesign work supporting an improved community offer and redesigned front door
- ASC/Commissioning with communities are developing a robust and responsive policy framework (People Helping People) with a vast range of third sector providers – thus reducing demand on adult social care
- ASC/Commissioning working with partners across the North-West via ADASS to address the future market capacity and workforce issues.
- The Council is working with skills for care to see what support it can give to the market in terms of recruitment and retention and build knowledge.
- As part of the contract management and quality assurance processes we check each provider's Business Continuity plan for robustness and make recommendations for improvement if required
- The Council has commissioned a new offer for informal and formal carers to ensure the right level of support is received for them to maintain their caring duties
- Some providers are now recruiting workers from abroad and this is beginning to have some benefit in domiciliary care in some areas of the Borough
- Domiciliary care providers were awarded a 14% fee uplift in 2022/23 and have received financial incentives from hospital discharge monies to support care staff with fuel costs and overseas recruitment.
- Commissioners are in the process of purchasing a number of "care robots" to support with wellbeing as a prevention measure and to create capacity in the care market.
- 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
- Based on the Cost of Care exercise the Council published the Market Sustainability Plan (MSP) on the 27th March 23. The MSP includes a fee uplift for Care at Home and Complex Care providers, which aims to stabilise the market locally. Providers have been notified of this uplift via letter.
- Commissioners are currently undertaking Market Engagement activities with Care at home Providers to Coproduce a new model of care in partnership.

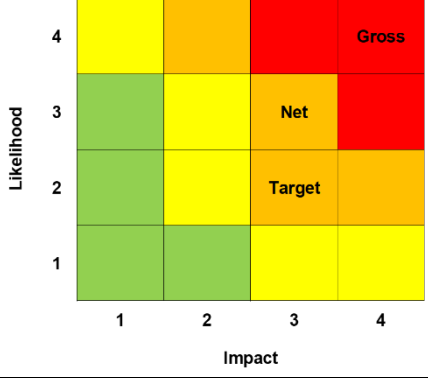**Lead Service Committee:** Adults and Health Committee

Risk Name: Reputation	Risk Owner: Chief Executive
Risk Ref: SR13	Risk Manager: Head of Communications, Head of Customer Services, Business Intelligence Manager (Corporate and Place)

Risk Description: That consideration is not given, and management action is not taken, to effectively manage the reputation of the Council, leading to a loss of public confidence, threatening the stability of the Council and our ability to meet the corporate priorities.

The risk is managed primarily through the work in three different areas; Communication & Media, Customer Experience and Consultation.

Current rating based on an expected increase in resident dissatisfaction due to budget cuts impacting services.

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

Comments this quarter:

Communication & Media:

Likelihood increased from a 3 to a 4, expected increase in resident dissatisfaction due to budget cuts impacting services. A revised media relations protocol was approved by Corporate Policy Committee at the 9 February meeting. During this period (Q4) we saw particular interest and activity in the following topics:

- Crewe regeneration
- Council funding and financial forecasts
- Elections 2023 and voter ID
- Public interest report publication
- Highways maintenance and winter preparations, inc severe weather alert, March 2023
- Green spaces for wellbeing initiative
- Carbon neutral initiatives
- South Macclesfield Development Area
- Poynton Pool flood mitigation plans
- Homes for Ukraine scheme
- Poynton Relief Road opening
- Armed Forces Covenant Silver Award
- GBR HQ announcement

Consultation:

Consultation: While during consultation on the proposed budget a number of concerns were raised. These were considered and ultimately the MTFS was agreed and adopted by Council in February 2023, due to the statutory requirement for the Council to have a balanced budget. Some of the proposals are subject to more detailed consultation and engagement activities. As the initiatives identified in the MTFS are implemented, there still remains the possibility of material public objection to specific changes. If these arise they will be responded to through the usual relevant democratic processes.

Customer Experience:

Further phases of technology to enhance the management, monitoring and analysis of customer contact progressing and due for implementation Q1 2023/24 including the delivery of live chat functionality and the management of e mails. New digital platform to improve on line contact and the Cheshire East Account now live with full migration from existing platform progressing. Trial of revised process for managing the quality of complaints and formal correspondence successfully completed and options to widen scope across full council under development. Customer Experience leadership sessions delivered to all Heads of Service, Directors and Executive Directors and next steps agreed.

Actions (Monitoring):

Communication & Media;

Review annual business plans for communication requirements (Annually)
Ensure alignment of annual communications programme and consultation and engagement programme (Quarterly)
Delivery of the Communications Strategy for Residents 2022-25 priorities (For period of strategy)
Provide communications support for implementation of MTFS proposals to ensure all stakeholders are well-informed about any changes to service and policy (Annually)
Undertake a survey of residents to understand how they want to get information about council services, policies etc. To inform communications strategy(ies) and plans (Bi-annual review)
Customer Experience;
Introduce enhanced policies and procedures to improve the quality of responses to complaints and formal correspondence
Continue to improve technology to support front line staff in monitoring the full end to end customer journey
Develop a new operating model for customer service delivery across the Council
Develop a policy for how the Council uses and engages with customers via social media
Consultation;
Develop and introduce a One Council approach to consultation and engagement (On-going)
Share and promote the new EIA template and guidance (On-going)
The pilot of the Cheshire East People's Panel (On-going)

Key Mitigating Controls:
Communication & Media;
- Effective monitoring and reporting of organisational reputation and sentiment.
- Weekly reputation reporting to senior managers
- Monitoring of social and traditional media
- Communications and media function advised at an early stage of all future demand and emerging issues to enable effective planning
- Providing a 24/7 emergency communications on call function
- Communications strategies for key projects and issues developed agreed and reviewed with senior stakeholders and decision makers
- Positive proactive communication across multiple channels to celebrate the council's successes and achievements, building positive reputation.
- Comms programme planned and reviewed over short-term (daily) and long-term (monthly / annually)
- Review communications business continuity, priorities and emergency / crisis comms protocols and plans
- Media 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 34,000 subscribers for 'push' notifications across a range of topics

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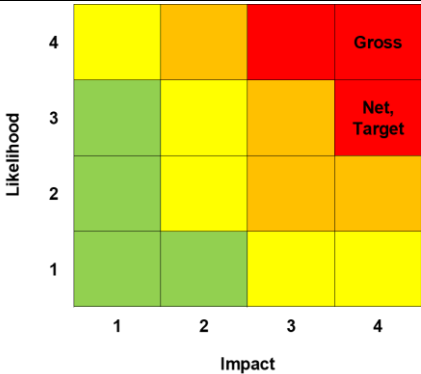
- Continuous improvement team tasked with root cause analysis of issues and identifying service improvements

Consultation;
- Ensure that consultation is undertaken when any proposals are still at a formative stage
- Consultation must give sufficient reasons for any proposal or change to permit stakeholders to undertake intelligent consideration and response to the options
- Ensure consultation and engagement activity informs our evidence-based decision-making approach and that adequate time is given between the end of a consultation and a decision is made to allow for consideration of and where required, a response to, the output of a consultation or engagement
- Ensure that Equality Impact Assessments (EIA) are completed, appropriate for the purpose of use and that they are signed off before any consultation can begin
- When communicating about decisions, make it clear HOW consultation and engagement activity, EIA and other intelligence has been conscientiously taken into account when finalising the decision
- Evidence where and how output from consultation has been used to inform the decision-making process

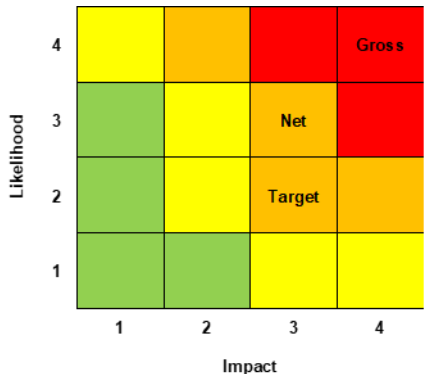**Lead Service Committee:** Corporate Policy Committee

Risk Name: Climate Change (CEC Carbon Neutral Status 2025)	**Risk Owner:** Executive Director of Place, Executive Director of Corporate Services
Risk Ref: SR14	**Risk Manager:** Director of Environment & Neighbourhood Services, Head of Environmental Services

Risk Description: Failure to achieve Carbon Neutral status for the Council by the 2025 milestone target as a result of ineffective planning and delivery of actions.

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.

(Risk matrix: Likelihood (y-axis 1–4) vs Impact (x-axis 1–4). Gross at Likelihood 4, Impact 4 (red). Net at Likelihood 3, Impact 3 (orange). Target at Likelihood 2, Impact 3 (orange).)

Interdependencies (risks): Economy and World Events, Organisational Capacity and demand, Council funding, Capital Projects

Comments this quarter: The project is on track but retains significant risks in time to deliver the transition to electric fleet, and in progressing the carbon inset through securing a second solar farm and planting sufficient natural insect in the remaining two planting seasons.

Actions taken this quarter to address these risks:
- Additional capital funding as part of the council's medium term financial strategy for 2023-25 will allow the speed up of transition of our small van fleet with associated additional electric charging over the coming two years. This is cost neutral to the council as the cost of capital will be paid through savings on lease costs through the capital purchase of vehicles and charging for electricity used at new electric vehicle charging stations installed at our depots.
- Delegated authority granted through the March Economy and Growth Committee now gives all permissions to progress the allocated second solar farm site. The project will now prepare detailed design and seek planning permission over the course of this year.
- Capacity issues associated with the Mersey Forest have meant that planned tree planting this quarter has been severely reduced. In mitigation the authority is advertising for a temporary post to complete more of the preparation work required in house to give greater certainty in achieving sufficient planting in the next two planting seasons available. The post will be funded as part of the capital allocation for natural inset within existing budgets.

The project retains sufficient funds to deliver Carbon Neutrality assisted by external grant funding and MTFS allocation.

Actions (Monitoring):

Secure planning permission for second solar farm (Delegated Authority granted at March 2023 Economy & Growth Committee. Action will be reviewed monthly at Carbon board chaired by Head of Environmental Services)

Transition of Electric Fleet and Natural offset project, failing to meet targets (New Capital funding secured though 2023 MTFS Action for fleet transition and tree planting progress, will be reviewed monthly at Carbon Board chaired by Head of Environmental Services)

Key Mitigating Controls:
- Risk is reviewed as part of the brighter futures transformation projects board, operational board and member steering group.
- Carbon Neutral programme established with Programme Board reviewing progress and risks monthly
- Member Advisory group overseeing its delivery
- Annual update on progress reported to relevant committee
- Climate change is a key consideration as part of our statutory planning duties as an authority and within the development of local planning policy
- Planned natural offset set at 10% more than required to reduce risk of non-delivery in any one project area.

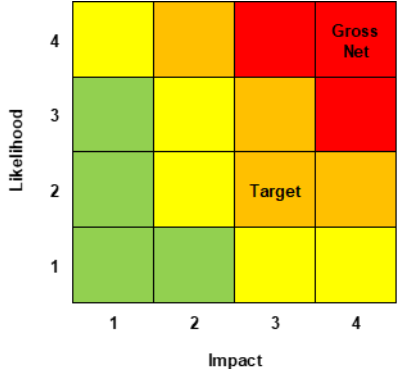**Lead Service Committee:** Environment and Communities

Risk Name: Failure of the Local Economy	**Risk Owner:** Executive Director of Place
Risk Ref: SR15	**Risk Manager:** Director of Growth and Enterprise

Risk Description: Failure of the local economy

The risk that the local economy does not realise the expected level of growth due to an inability to attract, grow and retain commercial enterprises, residents and visitors. The borough has a strong local economy, an above average Gross Value Added (GVA), some areas of deprivation and is reliant on a number of different industries.

Consequences: The failure of enterprises reduces the local money supply, reducing the standard of living for residents and council income. Secondary effects can include a reduction in public health and the loss of highly trained or skilled individuals. Consequences and causes, over the medium to long-term can have a symbiotic relationship, creating either an upward or downwards spiral. An example of this is shops closing in a town centre, then reduced footfall resulting in further closures.

Causes: The local economy is significantly driven by changes in the national economy, taxation and other government policies. However the failure to maintain parity, or offer benefits above other boroughs, can lead to a relatively larger economic downturn. As noted above poverty and deprivation, like other issues, can be both a consequence and cause causing a snowball effect.

Interdependencies (risks): Capital Projects, HS2 Infrastructure Investment, Pandemic Virus, Climate Change

Comments this quarter: No substantive change to the risk. Interest rates and inflation continue to be concern, both of which are remaining 'sticky' even with the Bank of England and the Government identifying actions to mitigate inflation. There have also been four bank failures internationally in March/ April 2023, regulators are playing down the potential of a international financial crisis. The Bank of England intervened on one of these (SVB UK) and brokered its sale to the HSBC.

Actions (Monitoring):

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

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

Lead Service Committee: Economy and Growth

Risk Name: Local Planning Authority Modernisation Plan	**Risk Owner:** Executive Director of Place
Risk Ref: SR17	**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 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, lack of agreed change management process within the Modernisation Plan.

Interdependencies (risks): Organisational Capacity and Demand, Reputation, Council Funding,

Comments this quarter: The Modernisation Plan is now in place with regular meetings to monitor progress including monthly updates to the action log. The key priorities remain identified as the new ICT system, reducing the application backlog, staffing/restructure and communications / customer service.

Escalation of issues with the ICT supplier has resulted in better engagement and resource commitment from them with clearer timeframes for implementation which will help manage future risk. The application backlog is slowly reducing. Detailed work on the restructure is underway, including dialogue with key stakeholders and an indicative timeframe for formal consultation. Various updates to websites / letter templates and a draft Communications Strategy have been completed.

Resources to deliver the Plan priorities remain stretched as it is the Planning Service - including at management level - itself that is undertaking many of these actions, alongside significant budget pressures causing the risk to stay high.

Actions (Monitoring):

IT System Project Board, now including regular attendance from supplier (Regular fortnightly meetings)
Continued monitoring of resource / recruitment (Weekly manager meetings)

Key Mitigating Controls:

- Environment and Communities Report 31/10/2022; Local Planning Authority Review and Service Transformation Report and Modernization Plan.
- Planning Services Transformation Plan
- Monitoring of progress against Modernisation Plan by Transformation Board and Environment and Communities Board
- Regular meetings of Interim Director of Planning and Head of Planning and managers to review action logs and progress on key priorities
- Internal Audit reports on Community Infrastructure Levy and Section 106 will inform the scope of a member/officer working group

Lead Service Committee: Environment and Communities

Risk Name: Delivery of the JTAI Improvement Plan	**Risk Owner:** Executive Director of Children's Services
Risk Ref: SR18	**Risk Manager:** Executive Director of Children's Services

Risk Description: That as a safeguarding children's partnership, Cheshire East Council's children's services, health, and police, do not achieve the improvements needed at the necessary pace to address the recommendations from the joint targeted area inspection (JTAI) of child exploitation, including child sexual exploitation.

This would mean that we would not achieve the council's desired outcomes for children and young people at risk of exploitation. There is also a reputational risk of not delivering the required improvements, as this could result in an inadequate rating by Ofsted. An inadequate rating by Ofsted would have a significant impact on the council's reputation, ability to recruit and retain staff, and would increase costs in order to deliver improvement activity.

Significant work is required to deliver these improvements which requires sufficient capacity and resources. High quality work to support children and young people is dependent on being able to achieve a stable and experienced workforce. Nationally and locally there are challenges recruiting and retaining staff within specific areas of children's services, which is resulting in higher than average workloads and some delays in delivering services. There is a risk that this could result in children experiencing delays in receiving support leading to escalation of need and increased risk of poorer outcomes - including risk of harm and risk to life, a lack of continuity of workers for children and young people, and increased costs to the council.

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

Comments this quarter: No change to the net risk rating although the target rating has been reduced from a 12 to 6. Services are making good progress in delivering the improvement plan and there are robust arrangements in place to ensure key members of the partnership are sighted on progress and are held to account. External support and challenge are in place through the Department for Education Children's Improvement Advisor, who is the independent chair of our partnership Improvement Board. The Improvement Advisor is conducting visits to services to evaluate the impact of changes and is supporting and advising senior leaders.

The independent scrutineer has completed an in-depth review of the partnership's arrangements, which included the effectiveness of the structure and function, overall approach to quality assurance and learning, listening to and acting on the voice of children and young people, the impact of the three priority sub-groups, communication, and training.

A significant amount of awareness raising has taken place across the partnership on exploitation, including a partnership Exploitation Conference with national key note speaker, and training sessions delivered over a partnership learning week in January 2023. These were positively received by practitioners. We have launched 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.

The net risk score has not changed since Q2 as it is still early in our improvement journey and we want to be able to demonstrate sustained impact of changes before reducing the risk.

Actions (Monitoring):

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

Independent support and challenge from the Department for Education (DfE) Children's Improvement Advisor through visits to services, support to senior leaders and acting as the independent chair of the Improvement Board.

Agree the changes that will be made to the operation of the Safeguarding Children's Partnership in response to the findings from the independent review (Safeguarding Children's Partnership Executive to ensure achieved by the completion date)

Complete an audit of children at risk of exploitation to evaluate the impact of changes on quality of practice (Safeguarding Children's Partnership Executive to ensure achieved by the completion date)

Key Mitigating Controls:
- We have a comprehensive partnership improvement plan in place to address the recommendations from the JTAI inspection

- An independent scrutineer has provided scrutiny to the partnership. The scrutineer has completed an in-depth review to inform how the partnership is structured and manages its business in the future, including how it evaluates impact
- Meetings of the Executive Group of the Safeguarding Children's Partnership have been increased to bi-monthly from quarterly to support increased pace of change
- An Executive Board is in place which consists of the Chief Executive of the council, Chief Constable and Chief Nurse, which scrutinises partnership progress against the improvement plan
- An Improvement Board is in place with an independent chair – our DfE Improvement Advisor, for additional scrutiny and challenge of the improvement plan.
- A strategic improvement group is in place which is focused on delivery of the improvement plan
- All exploitation screening tools received by the front door are now reviewed within 24 hours and managed as a contact. This involves partnership information gathering, analysis by an experienced social worker and management approval of the most appropriate course of action. A decision will be made on the same day either to progress to a referral to children's social care and allocated to a social worker or into early help and prevention and allocated to an early help practitioner. Statutory intervention commences immediately including a visit to the child and the initiation of a child and family assessment, and specific risk mitigation now begins without delay
- The weekly contextual safeguarding screening meeting now retrospectively reviews the immediate safety planning for all children at risk of exploitation who have been referred into either children's social care or early help in the previous 7 days
- A significant amount of awareness raising has taken place across the partnership on exploitation, including a partnership Exploitation Conference with national key note speaker, and training sessions delivered over a partnership learning week in January 2023
- We have launched 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
- Performance is monitored on a monthly basis by services. The children's services quarterly scorecard is reviewed at the Children and Families Committee and the Safeguarding Review Meeting attended by the chief executive and lead member for children and families. The Safeguarding Review Meeting includes discussion of workforce pressures and risks. Social work caseloads have continued to reduce from an average of 27 in September 2022 to an average of 21 in February 2023
- Audits of practice are completed quarterly to evaluate the quality of practice and the effectiveness of service improvements

Lead Service Committee: Children and Families Committee