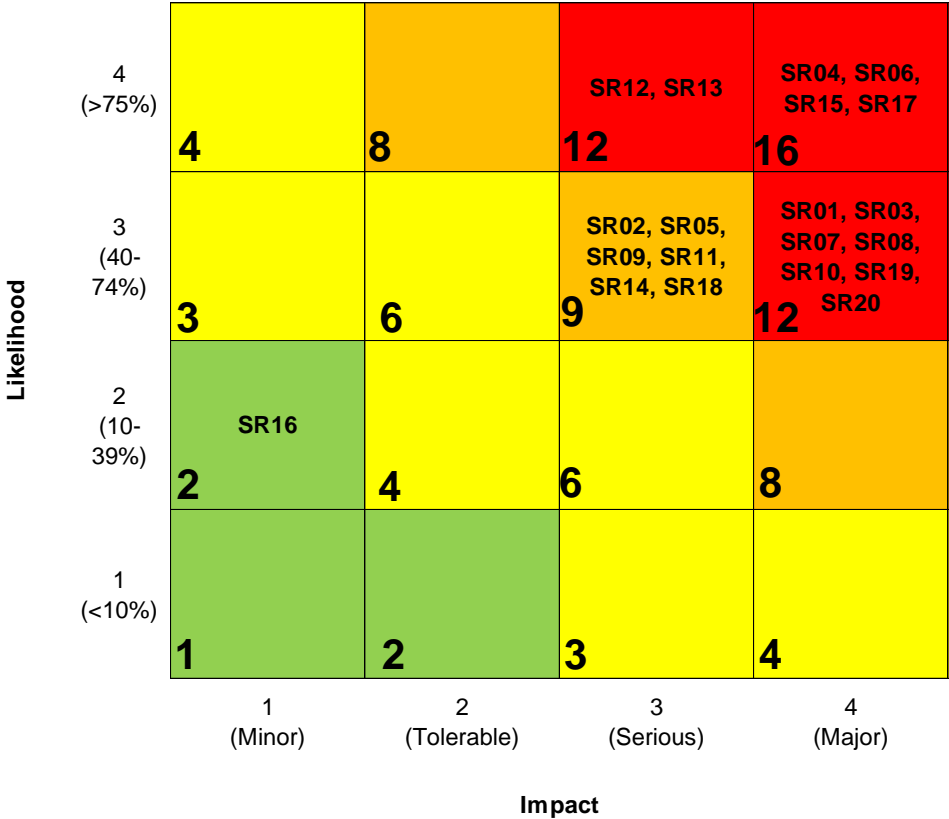


**Strategic Risk Summary – Changes in Net Scores Q1 2024/25**

Ref	Risk	Q4 Net	Q1 Net	Travel	Target
SR01	Increased Demand for Adult's Services	12	12	↔	9
SR02	Fragility and failure in the Social Care Market	9	9	↔	9
SR03	Complexity and Demand for Children's Services	12	12	↔	12
SR04	Dedicated School Grant Deficit	16	16	↔	16
SR05	Failure to Protect Vulnerable Children	9	9	↔	6
SR06	Failure to Achieve the MTF5	16	16	↔	9
SR07	Leadership Capacity	12	12	↔	9
SR08	Ability to Achieve Organisation Change	12	12	↔	8
SR09	Recruitment & Retention	9	9	↔	9
SR10	Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks	12	12	↔	8
SR11	Failure to Adhere to Agreed Governance Processes	9	9	↔	6
SR12	Stakeholder Expectation & Communication	12	12	↔	9
SR13	Information Security and Cyber Threat	12	12	↔	12
SR14	Business Continuity	9	9	↔	6
SR15	Capital Projects - Place	12	16	↑	12
SR16	Failure of the Local Economy	12	2	↓	12
SR17	CEC Carbon Neutral Status	16	16	↔	16
SR18	Local Planning Authority Modernisation Plan	9	9	↔	6
SR19	Delivery of the ILACS improvement plan	-	12	NEW	12
SR20	SEND Inspection	-	12	NEW	8

**Strategic Risks Heat Map Q1 2024/25**



<b>12 - 16</b>	Critical Risks - Only acceptable in the short to medium-term, requires immediate action implementing and close monitoring
<b>8 - 9</b>	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
<b>3 - 6</b>	Moderate Risks - Acceptable level of risk only requiring on-going monitoring to ensure they don't develop into something more serious
<b>1 - 2</b>	Negligible Risks - Lowest level of risk, only kept in the register for completeness and to ensure there are no unexpected changes in the profile

**Individual Risk Details – Q1 2024/25**

<b>Risk Name:</b> Increased Demand for Adult Services		<b>Risk Owner:</b> Executive Director of Adults, Health, and Integration																									
<b>Risk Ref:</b> SR01	<b>Date updated:</b> 15 <sup>th</sup> July 2024	<b>Risk Manager:</b> Director of Adult Social Care Operations																									
<p><b>Risk Description:</b> An increase in demand for adult social services that cannot be met within the existing budget.</p> <p>There is currently a historically high demand for services from young adults right through to the elderly. This has been caused by an overall decrease in national adult health and wellbeing and other socio-economic factors. There has been an increase in responsibility and duties being transferred to LA i.e. RCRP.</p> <p>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.</p> <p>Detailed causes; due to the additional wellbeing pressures placed on residents, council staff, third-party providers and the NHS, the volume and complexity of demand for adult services has increased materially. As have political factors such as changes in legislation and resettlement agreements. Due to several different socio-economic factors recruitment and retention of staff is difficult resulting in increased use of agency staff. The increase in demand and complexity for services has not been recognised with increased established staffing, resulting in use of Agency Staff to fill the void.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Red (Gross)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange (Target)</td> <td>Red (Net)</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> </table>	4	Yellow	Orange	Red	Red (Gross)	3	Yellow	Yellow	Orange (Target)	Red (Net)	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow		1	2	3	4
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<b>Interdependencies (risks):</b> Failure of Council Funding, Fragility in the social care market, Failure of the local economy, Organisational capacity and demand		<b>Lead Service Committee:</b> Adults and Health Committee																									
<p><b>Key Mitigating Controls (Existing):</b></p> <ul style="list-style-type: none"> <li>• Delivery of market engagement events, keeping providers / people informed of preventative change resulting from the People Live Well, for Longer Transformation Programme.</li> <li>• Contracts and Quality Monitoring Policy Framework, monitoring the user outcomes that partners are delivering. This helps to inform the managed decommissioning of services, in an effort to reduce service disruption. Maintaining a provider risk register with the Care Quality Commission to ensure market oversight. A standard set of fit for the future contracts, designed to ensure quality outcomes for users and ensure provider's business models remain sustainable as demand changes.</li> <li>• Monthly quality monitoring partnership forum that reports to relevant DMTs and the Safeguarding Board. Attendees include the Police, Safeguarding, Care Quality Commission, ASC operations, Legal, CCG's and ASC lead commissioner.</li> <li>• People Helping People programme, working collaboratively with partners and local volunteers to channel community-based support, reducing demand on adult social care. The sourcing/brokerage team support the co-ordination of these services, helping vulnerable people to access non-council support where appropriate.</li> <li>• Direct payment scheme, allowing users identify and manage their own care support.</li> <li>• The preventative policy framework standardises the approach to prevention across adult social care "front door. When appropriate, directing users to approved community solutions, which can provide non-traditional benefits to those individuals and help maintain their independence.</li> </ul>																											

<ul style="list-style-type: none"> <li>• Annual financial and resource planning by ASC services, considering expected demand, funding, the local social care market and other socio-economic trends.</li> <li>• Regular service/team meetings to disseminate information and discuss operational issues.</li> <li>• Involvement in the North West regional and local programme of work pertaining to health and care staff recruitment, retention, and selection – resulting in a robust career path being developed with key partners and in being clear pertaining to local strategy.</li> <li>• Collaborative working with other services, such Public Health, where objectives align and communication is required to delivery value for money. Utilisation of Public Health JSNA and wider regional data sets inform future planning. The joint commissioning management monthly working group seeks to ensure ASC is working effectively and efficiently with other Children and Family services.</li> <li>• Engagement with the Integrated Care Partnership, including health partners.</li> <li>• Regular ASC reporting to CLT and Adult and Health Committee on performance, expenditure/budget and demand. On-going management of services, based on performance, expenditure/budget and demand management information. Trend analysis used to help predict future demand.</li> <li>• Engagement with service users, collaboration with Healthwatch and other independent organisations to help drive service improvements and cost savings.</li> <li>• Business continuity assessments and resiliency preparation, both internally and with key partners.</li> <li>• Implementing recommendations of independent review. All care plans presented to Senior Leasers board for authorisation of spend.</li> <li>• Tighter controls on hospital discharge will impact relationship with ICB colleagues.</li> <li>• 3 times weekly Quality, Performance and Authorisation Board to review every request for care, since the start of this regime over 2000 cases have been reviewed to ensure that the package of care is effective and efficient.</li> <li>• Weekly Extended leadership meeting to review budget, spend and activity.</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
Implementation of Impower Consulting review (Weekly CEBERT meetings)	Q4 2023/24
<p><b>Comments this quarter:</b> The level of demand into Adult Social Care has remained constant with the First Point of Contact Teams working well to ‘prevent, reduce, delay’ traditional care services. However the cases that progress to assessment demonstrate increased care needs and complex behaviours. Complex cases involving Hoarding, self neglect and Court of Protection intervention, places increasing pressure on teams. The reduction in the use of Agency staff will result in a build up of referrals waiting for assessment and support.</p> <p>The demands of Care Agencies requesting higher fee increases, with threats to terminate placements, further increases the pressure. Families are demanding more costly care options than the council can realistically provide and the result is in increased complaints and requests for further reassessments. The increases in Domestic Homicide Reviews and Safeguarding Adult Reviews continues to add additional demand on staff and Managers.</p> <p>Adult Social Care is currently facing a projected £20 million overspend in this year, this will require robust and strict application of eligibility to bring this down and will result in individuals not being offered the packages of care that they would wish for.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> The outcomes from the work commissioned with Impower is being actioned via HLBC, we are monitoring all support and care plans and calls for services on a 3x per week basis, Director is monitoring approx150 cases per week. Demand is constant especially for those who are 90+yrs, and for those with dementia. Cost of individual care packages remains very high with an increasing number£2000 per week.</p>	

<b>Risk Name:</b> Fragility and Failure in the Social Care Market		<b>Risk Owner:</b> Executive Director of Adults, Health and Integration																																	
<b>Risk Ref:</b> SR02	<b>Date updated:</b> 8 <sup>th</sup> July 2024	<b>Risk Manager:</b> Director of Commissioning																																	
<p><b>Risk Description:</b> A failure of the local social care market.</p> <p>Increases in the volume and complexity in demand and financial pressures have caused weaknesses in the national social care market which have yet to be resolved.</p> <p>Detailed consequences; the council is unable to deliver a robust adult social care package without the use of third-party providers, without these outsourced services the overall social adult care package would fail and the council would not be able to achieve its objective of people living well and for longer. If the Council is unable to increase fees for providers it will impact on the sustainability of some care providers and result in some packages of care being handed back to the Council or notices served on care home resident’s placements. This could lead to a need to increase the use of care providers who have not been through a formal tendering process which in some cases could result in higher costs and/or poorer quality. While due diligence is undertaken for these providers, some providers do not fully co-operate with this process. It will also bring challenges in managing budgets in 2024/25.</p> <p>Detailed causes: the major risk going forward is the financial impacts on providers resulting from the 9.8% uplift in National Living Wage from April 2024 and high rates of inflation. The current financial position of the Local Authority precludes it from uplifting care fees for all care contracts in 2024/25.</p>		<table border="1"> <tr> <td rowspan="4">Likelihood</td> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Gross</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Yellow</td> <td>Red</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="4">Impact</td> </tr> </table>	Likelihood	4	Yellow	Orange	Red	Gross	3	Yellow	Yellow	Yellow	Red	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow			1	2	3	4			Impact			
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<b>Interdependencies (risks):</b> Failure to Achieve the MTFs, Business Continuity, Failure of the Local Economy		<b>Lead Service Committee:</b> Adults and Health Committee																																	
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>• Contracts and Quality Monitoring Policy Framework, monitoring the people’s outcomes that partners are delivering.</li> <li>• Localised quality assurance risk management oversight tool embedded which provides pertinent intelligence that will identify any escalation of providers quality and safety of service delivery in an effort to reduce service disruption. This risk matrix connects to an overarching provider risk register with the Care Quality Commissioning to ensure market oversight.</li> <li>• A standard set of fit for the future contracts, designed to ensure quality outcomes for users and ensure provider’s business models remain sustainable as demand changes.</li> <li>• Increasing the robustness of due diligence on care providers who have not been through a formal tendering process.</li> <li>• Comprehensive cost of care exercise to be undertaken with all care providers to ensure that care packages are sustainable and available resources are distributed fairly.</li> <li>• Delivery of market engagement events, keeping providers / people informed of preventative change resulting from the People Live Well, for Longer Transformation Programme.</li> <li>• The preventative policy framework standardises the approach to prevention across adult social care “front door. When appropriate, directing users to approved community solutions, which can provide non-traditional benefits to those individuals and help maintain their independence.</li> <li>• Annual financial and resource planning by ASC services, undertaken capacity and demand modelling, funding, the local social care market, and other socio-economic trends. Development and publication of the Market Sustainability Plan. Completion and submission of the Cheshire East Market Availability and Capacity Plan to DHSC.</li> </ul>																																			

<ul style="list-style-type: none"> <li>• Involvement in the Northwest 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.</li> <li>• Update of the joint Market Position Statement with ICB to ensure that care providers receive timely information about commissioning intentions.</li> <li>• Regular ASC reporting to DLT, CLT and Adult and Health Committee on performance, expenditure/budget and demand. On-going management of services, based on performance, expenditure/budget and demand management information. Trend analysis used to help predict future demand.</li> <li>• Engagement with service users, collaboration with Healthwatch and other independent organisations to help drive service improvements and cost savings.</li> <li>• Business continuity assessments and resiliency preparation, both internally and with key partners.</li> <li>• The Council is working with skills for care to see what support it can give to the market in terms of recruitment and retention and build knowledge. Providers have access to recruiting staff from abroad if there isn't a sufficient supply available locally. Development of a Workforce Strategy for the external care workforce.</li> <li>• Investigation and investment into new health and care technologies. Use of new technologies to be driven by considering performance, capacity, and value for more against more traditional methods.</li> <li>• Quality Performance Authorisation Board meets three times a week to ensure that the Council is obtaining value for care money for commissioned placements and making best use of all commissioned block booked assets across the Borough.</li> <li>• 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 and ensure people are supported through the correct pathway at the point of discharge.</li> <li>• Commissioners undertake Market Engagement activities with Care at home Providers to Coproduce new models of care. Joint working with 'Skills for Care' to encourage individuals to take up employment within the care sector. 'Hidden Carer's' initiative launched through Carer's Hub to help identify and support carers not known to the system.</li> <li>• Low level support for the British Red Cross who respond to crisis situations in the community.</li> <li>• A tool called Care Cubed has been commissioned to assess the actual cost of delivering care for individual care providers and benchmark against market prices.</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
Develop engagement with community groups and 3rd sector (VCFSE Project Group, monthly and Commissioning SMT, weekly)	December 2023
Commissioning of Care Cubes (Monthly DMT)	March 2024
<p><b>Comments this quarter:</b> The overall position to the risk status remains unchanged currently. It should be noted that a small cohort of providers are continuing to press the Local Authority for fee increases which are being managed through a fee oversight group.</p> <p>During Q1 we have received 26 hand backs of care at home packages. The current care at home waiting list remains at 16 people which equates to 110 hours per week. Operational colleagues continue to RAG rate individuals placed on the waiting list for care at home.</p> <p>In relation to the overall quality position, we have one home across the Borough that remains inadequate rated with CQC. The June North West ADASS monthly CQC data update confirms we have 77% of our care homes rated as Good or Outstanding across the Borough.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> N/A (Net score is equal to target). To a certain extent the risk is outside the Council's control as there is a reduced pool of people who wish to work in Social Care.</p>	

<b>Risk Name:</b> Complexity and Demand for Children's Services		<b>Risk Owner:</b> Executive Director of Children's Services																																
<b>Risk Ref:</b> SR03	<b>Date updated:</b> 16 <sup>th</sup> July 2024	<b>Risk Manager:</b> Children's Services Directorate Leadership Team																																
<p><b>Risk Description:</b> That Cheshire East's local social, economic and demographic factors, including the impact of the pandemic, lead to an increase in the level and/or complexity of need and demand for children's services, which the council cannot meet effectively. This risk would mean that we would not achieve the council's desired outcomes for children and young people as set out in the council's Corporate Plan.</p> <p>The service received growth through the MTFS to help address the pressures but the challenge to deliver to budget and achieve the required savings remains present. Significant action is still required to deliver savings to live within the budget as all indications are that demand, complexity and cost will continue to increase.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Red (Gross)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Orange (Net Target)</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="3" style="text-align: center;">Impact</td> </tr> </table>		4	Yellow	Orange	Red	Red (Gross)	3	Yellow	Yellow	Orange	Orange (Net Target)	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow			1	2	3	4			Impact		
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<b>Interdependencies (risks):</b> Increased Demand for Adult Services, Insufficient and Non-Compliance with Financial Processes, Organisation Capacity and Demand, Failure to Achieve the MTFS, Failure of the Local Economy		<b>Lead Service Committee:</b> Children and Families Committee																																
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>• Growth to address budget pressures within services was agreed in the MTFS for 2024/25, including £10.8m to address placement costs for children.</li> <li>• 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.</li> <li>• We are closely monitoring the demand to services and the reasons that are driving demand so that we can be responsive and mitigate any risks to service delivery. Performance is monitored by services.</li> <li>• 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.</li> <li>• Our approach is to ensure only the right children come into care; this is right for children and young people and will also reduce demand to Children's Social Care services, however this is a challenging landscape. Increased demand for placements has increased costs. We will continue to look to identify options for children to live within their family networks where this is the best outcome for them. We have been successful in gaining DfE funding for innovation and supporting family networks which will increase opportunities for children to remain living in their families.</li> <li>• We are continuing to support children and young people who are most vulnerable through the Household Support Fund and the Holiday Activity Fund. Vouchers worth £4m were distributed on behalf of the Department of Work and Pensions over 2023/24 to support the most vulnerable households across the county with food, utilities, housing costs, and other essentials.</li> <li>• A workforce strategy has been developed for children's social care to support recruitment and retention as we know the quality and stability of our workforce is critical in offering strong support and enduring relationships to children and their families.</li> <li>• We have implemented Family Hubs, bringing council, health and community services together – improving access and reach of services, supporting earlier intervention, and improving partnership working. Over the past 12 months the council has opened five family hubs across the borough, including a SEND Centre of Excellence, as well as a new digital offer so families can also access advice and information online.</li> </ul>																																		
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																																

Appendix A – Q1 2024/25 Strategic Risk Register Detail

A fundamental review and realignment exercise for children’s services will be carried out to future-proof services to deliver differently for less as part of our integrated children’s services 4-year strategy (Progress will be monitored through the MTFS arrangements)	March 2027
Expanding our in-house residential provision to offer more local and cost-effective homes for children and young people (Children’s social care senior leadership team to monitor progress)	September 2024
Develop and deliver a new improvement plan to respond to the Ofsted ILACS inspection findings (Progress on the improvement plan will be monitored on a monthly basis by the independently chaired Improvement and Impact Board)	June 2024
Develop a Corporate Parents Working Group to drive improved outcomes	October 2024
<p><b>Comments this quarter:</b> No change to the net rating, it remains 12, a material risk, equal to the target score.</p> <p>A new improvement plan has been developed to the findings from the Ofsted inspection of children’s services in February and March 2024. This was received by full Council on 17 July 2024. An independently chaired Improvement and Impact Board is monitoring progress against the plan on a monthly basis. Sufficiency of placements is one of the areas covered by the improvement plan.</p> <p><b>Timescale for managing risk to an acceptable level:</b> March 2026. The integrated children’s services strategy is a 4-year plan. We aim to see an incremental reduction in the risk as we implement our strategy with aim to be at a low level of risk by 2026.</p>	



<b>Risk Name:</b> Dedicated School Grant Deficit		<b>Risk Owner:</b> Executive Director of Children’s Services	
<b>Risk Ref:</b> SR04	<b>Date updated:</b> 16 <sup>th</sup> July 2024	<b>Risk Manager:</b> Children’s Services Directorate Leadership Team	
<p><b>Risk Description:</b> That the deficit held in the dedicated schools grant (DSG) continues to rise and/or is not recoverable.</p> <p>The final outturn position for the financial year 2023-24 outlines a reduced deficit position of the DSG high needs budget of £79.5M compared to the forecast deficit of £89.6M resulting in a reduction of £10.1m. The mitigated cumulative forecast reserve deficit identified through the Safety Valve programme is £285m. This is in part as a result of the growth in the number of pupils with an education, health and care plan greatly exceeding the funding and insufficient local placement options. This is a national issue and local authorities are required to hold a negative reserve for this purpose which is in place until March 2026. This position is unaffordable and unsustainable. The arrangements beyond March 2026 are not confirmed by the Department for Levelling Up, Housing and Communities (DLUHC). This risk continues to be a feature of ongoing liaison with the Department for Education and the DLUHC.</p> <p>Without significant changes to funding the DSG reserve deficit is not recoverable. Significant action is required to deliver savings to live within the budget as all indications are that demand, complexity and cost will continue to increase.</p>			
<p><b>Interdependencies (risks):</b> Increased Demand for Adult Services, Insufficient and Non-Compliance with Financial Processes, Organisation Capacity and Demand, Failure to Achieve the MTFS, Failure of the Local Economy</p>		<b>Lead Service Committee:</b> Children and Families Committee	
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>On 7 September 2023, we accepted an invitation from the Department for Education to start negotiations to join their Safety Valve programme, which would provide more help from the government to balance our budget. The aim of the Safety Valve programme is to agree a package of reform to improve the performance of local authorities’ high needs systems and ensure this is delivered in a sustainable way, for the benefit of children and young people, whilst bringing DSG deficits under control. We submitted detailed plans to the government in January 2024. In March 2024 Ministers advised that they are currently unable to enter into an agreement with Cheshire East as Cheshire East’s Safety Valve submission included an ask of the Department which is significantly above the level which the Department could reasonably afford in comparison to other agreements. Ministers recognise that the DSG deficit as forecasted poses a substantial risk to Cheshire East, and propose to work with us over the coming months, alongside colleagues from DLUHC, to seek an appropriate solution.</li> <li>The DSG management plan is in place to monitor the impact of demand to SEND services on financial pressures and monitor the delivery and impact of mitigations that have been put in place. A revised DSG management plan for 2024/25 to 2030/31 was approved by the Children and Families Committee on 29 April 2024. The committee also received an update on the Safety Valve submission. The Children and Families Committee is receiving monthly updates on the DSG management plan.</li> <li>The council has updated the SEN sufficiency statement for 2023/24 to 2025/26, and the SEND strategy, which were received and agreed by the Children and Families Committee in September 2023. The SEN sufficiency statement sets out the additional provision needed over the next three years. The SEND strategy has been refreshed to include priority actions relating to the mitigations with the revisited DSG management plan 2024-2031.</li> <li>There is significant capital investment in local SEND provision to meets children’s needs more locally but also reduce dependency on high-cost independent school placements. As part of the Safety Valve programme we were invited to submit a Capital bid. The bid was successful and we have been awarded £16m to create more specialist provision.</li> <li>The capital grant will allow us to create the following             <ul style="list-style-type: none"> <li>3 x special school satellite sites providing in total 140 additional places</li> <li>1 x 14 place new SEN unit</li> </ul> </li> </ul>			

<ul style="list-style-type: none"> <li>○ Generic funding to support the refurbishment/adaption of space within mainstream settings which could support the current demand by way of resource provisions and/or SEN units.</li> <li>•</li> <li>• We are embedding a graduated approach and inclusion across all schools and settings and strengthening SEN support.</li> <li>• We participated in the DfE's delivering better value (DBV) programme to support the council to achieve a more sustainable financial position in relation to SEND. This identified two priority areas of cultural change that will make the biggest difference on managing demand – inclusive practice and transition. Cheshire East has been awarded £1 million to support the delivery of this transformational change. These areas have been incorporated within our SEND Strategy.</li> <li>• 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.</li> <li>• 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.</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
A fundamental review and realignment exercise for children's services will be carried out to future-proof services to deliver differently for less as part of our integrated children's services 4-year strategy. (Progress will be monitored through the MTFS arrangements)	March 2027
Delivery of the delivering better value implementation plan (Children's services senior leadership team)	March 2025
Continue to increase SEND provision in Cheshire East (Reviewed quarterly)	September 2024
Embed the graduated approach and inclusion across all schools and settings and strengthen SEN support (Reviewed quarterly)	September 2025
Implement the Safety Valve plan (Quarterly by the DfE if accepted onto the programme. If not accepted the plan will be monitored internally through a CEX lead board with member involvement).	March 2031
<p><b>Comments this quarter:</b> Q1 expenditure is currently being collated and a forecast will be produced.</p> <p>We have been asked by our DfE advisor to refresh the DSG management plan to reflect the reduced growth of EHCPs in 2023-2024. By doing this, targets for performance indicators (financial and numerical) will change, but we will also know the impact of the reduced growth of EHCPs and therefore the reduced forecast deficit position. As part of this refresh, we will also be revisiting the dates and milestones of the actions under each mitigation.</p> <p>Work on the mitigations are progressing. Children and Families Committee are receiving monthly updates on progress of the mitigations.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> March 2025. We aim to see an incremental reduction in the risk as we implement our plan. By the end of March 2025, we aim for the risk to be reduced to a score of 12, then to see this continue to reduce over the following years with aim to be at an acceptable level of risk by 2026.</p>	

<b>Risk Name:</b> Failure to Protect Vulnerable Children		<b>Risk Owner:</b> Executive Director of Children's Services	
<b>Risk Ref:</b> SR05		<b>Date updated:</b> 5 <sup>th</sup> July 2024	
<b>Risk Description:</b> The risk, that as a part of the local safeguarding children's partnership, Cheshire East Council's children's services are unable to fulfil their responsibilities relating to the protection of vulnerable children at risk of criminal exploitation and child sexual abuse. To do this Cheshire East seeks to be an effective and collaborative partner in the partnership. Ofsted are responsible for conducting inspections into the quality of children's social care provided by Cheshire East and as the local authority responsible Cheshire East is continually looking to meet those expectations in an ever-changing and challenging environment.			
<b>Interdependencies (risks):</b> Increased Demand for Adult Services, Complexity and Demand for Children's Services		<b>Lead Service Committee:</b> Children and Families Committee	
<b>Key Mitigating Controls:</b> <ul style="list-style-type: none"> <li>The Quarterly Quality and Impact board has oversight of the Multi Agency Safeguarding Arrangements. There are 3 Statutory Partners; Health, Local Authority and Police. The Statutory Partners form the Cheshire East Safeguarding Children's Partnership. Working Together 2023 outlines the responsibility of the Statutory Partners to involve other agencies.</li> <li>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.</li> <li>Ofsted regularly inspect the Local Authority and the partnership arrangements.</li> <li>The partnership ensures awareness within all agencies by providing regular training focused on exploitation. The training facilitates communication, increased knowledge and understanding and working together.</li> <li>We have an Exploitation Strategy, practice guidance, and training for frontline practitioners. This all ensures there is a clear partnership approach to supporting children and young people at risk of exploitation.</li> <li>There is a shared understanding of the children and young people who are at risk of exploitation across the partnership.</li> <li>There are regular multi agency audit of practice are completed for children at risk of exploitation to evaluate the impact of changes on quality of practice.</li> <li>Committee will have oversight through the annual report and any inspection reports.</li> <li>Quarterly reports are developed through the Learning and Improvement sub group and the CS/SOC Strategic group to provide the direct line of sight from practitioners to Executive members.</li> <li>Voice of the child case study is presented at every Executive Board. This demonstrates the impact that services and intervention are making for the child.</li> <li>Improvement board following the recent Ofsted inspection and this has oversight of the ILACS Improvement plan, with independent scrutiny from the DfE.</li> </ul>			
<b>Actions (Monitoring):</b>		<b>Target Date for Completion</b>	
CS SOC Impact report to be presented to the Quality and Impact board (Quality and Impact Board)		Q2 2024	
Quality and Impact board to continue to have oversight of children at risk (Quality and Impact Board)		November 2024	

**Comments this quarter:** In May 2024, Ofsted undertook an ILACs inspection of Children's Social Care. Ofsted reported:

*'Since the JTAI, there have been significant improvements in safeguarding practice for children missing from home and for those at risk of, or affected by, criminal and sexual exploitation. Focused work by leaders, to integrate and align multi-agency strategic and operational groups, has resulted in a clearer understanding and shared approach to prioritising and meeting children's needs earlier. There are now effective multi-agency forums in place to share intelligence about risks to children. Persistent work by committed staff in children's social care, and across the partnership, engages many highly vulnerable children. This is effective in responding to, and reducing the risk of, further serious harm.'*

Based on the outcome of Ofsted, particularly relating to children at risk of exploitation, we are not changing the net score. We have updated the timescale for managing the risk. We have reviewed and updated the controls, actions and key risk indicators. A multi-agency audit is being undertaken around children at risk of exploitation, the findings of which, will be presented initially to the Learning and Improvement partnership board and then to the Quality and Impact Executive board.

**Timescale for managing risk to an acceptable level:** December 2024

<b>Risk Name:</b> Failure to Achieve the MTFS		<b>Risk Owner:</b> Director of Finance and Customer Services (s151 Officer)																													
<b>Risk Ref:</b> SR06	<b>Date updated:</b> 30 <sup>th</sup> July 2024	<b>Risk Manager:</b> Head of Finance																													
<p><b>Risk Description:</b> Failure to achieve approved changes and manage net spending within the MTFS agreed by Council within the expected timescales will undermine the Council’s ability to manage its budget effectively in the current and future years.</p> <p>Potential impacts: Failure to achieve the agreed annual budget will reduce the Councils reserves and may endanger its medium-term financial stability, ultimately leading to reduction in the services it can provide to its residents, due to having to issue a Section 114 Notice. Poor management of specific grant funding can also result in the Council having to repay those monies.</p> <p>Drivers of likelihood: Key drivers of this risk are a lack of effective strategic and/ or operational management, and a lack of ability and/ or authority to implement change, along with global and national events adversely affecting levels of inflation and prices.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red (Gross Net)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow (Target)</td> <td>Red</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> </tr> <tr> <td></td> <td></td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="2">Impact</td> </tr> </table>		4	Yellow	Orange	Red (Gross Net)	3	Yellow	Yellow (Target)	Red	2	Green	Yellow	Orange	1	Green	Green	Yellow			1	2			3	4			Impact	
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<b>Interdependencies (risks):</b> all		<b>Lead Service Committee:</b> Corporate Policy Committee																													
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>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.</li> <li>Use of quality financial systems, with appropriate training and subsequent audit of their effectiveness to provide management and control of the Council’s finances</li> <li>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</li> <li>MTFS sets out how the Council will deliver the Council's Corporate Plan</li> <li>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.</li> <li>Clear and effective communication of changes or updates to Finance and Contract Procedure Rules with the Constitution</li> <li>Sources of specialist advice and guidance</li> <li>Budget monitoring, comparing actual performance against approved budget, is undertaken throughout the financial year and presented to service committees, in the form of forward-looking forecast outturn reports</li> <li>Outturn reporting and audit of statements supports in-year monitoring and future year planning</li> <li>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.</li> <li>Where a residual deficit is forecast in a financial year, a number of actions will be explored including:- <ul style="list-style-type: none"> <li>use of any service or non-specific underspend to offset pressures elsewhere within the budget</li> <li>accessing external funding, ensuring compliance with any funding conditions</li> <li>use of reserves</li> <li>use of general balances</li> </ul> </li> <li>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</li> </ul>																															

<ul style="list-style-type: none"> <li>• 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</li> <li>• Engagement with government departments related to financial models and consultation</li> <li>• Education and training for officers and Members, including financial management in local government, the CIPFA FM Code, and Finance and Contract Procedure rules</li> <li>• Reporting of status and action plan on CIPFA FM Code</li> <li>• Budget management regime implemented early in 2023/24 to track activities relating to delivery of approved budget changes</li> <li>• Spending management regime implemented in October 2023, to control and reduce spending on staffing and supplies and services; review fees and charges to customers; and approaches to charging costs to capital projects and using capital receipts</li> <li>• Strategic Financial Management Board, with a number of groups – Procurement; Strategic Assets; Workforce Oversight; Financial Management – each with terms of reference and various assigned tasks; and with a further link for all groups/ activities to the Transformation Programme. any Directorate forecasting spend &gt;5% over approved budget will be subject to focussed budget management, reporting progress to SFMB weekly</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
Ongoing reporting of spending management effectiveness and latest forecasts to SFMB/CLT (Weekly reporting and review by SFMB/CLT)	March 2025
Directly or via professional or political networks, liaise with Government departments on the severity of the many financial issues (Reporting to CLT, and to Members in the MTFS update)	February 2025
Preparation and approval of the 2025/26 annual budget (Formal Financial Reviews to Committees; with progress on all change proposals reported to each committee cycle)	February 2025
<p><b>Comments this quarter:</b> No change to the risk ratings. The draft outturn figures for 2023/24 show a net overspend of £8.5m; this compares favourably with the £13m overspend forecast in the Third Financial Review. However, the final position showed a greater adverse variance in Adult Social Care spending (£11.8m overspend; £6.8m more than anticipated in Third Review) – but this was more than offset by favourable variances across other Services. The outturn position has been analysed, and any further cost pressures (or reductions) which will continue to have an effect in the current year will be reflected in future reporting, alongside progress on the delivery of the 2024/25 approved change items, and any other variances arising in the year.</p> <p>The Council's Transformation Programme is underway – and along with other activities led and managed by the new Strategic Financial Management Board (made up of Corporate Leadership Team, as supported by other senior officers) will shape the development of the Council's updated MTFS for 2025-29.</p> <p>With regard to the offer of Exceptional Financial Support (capitalisation directions), as required by DLUHC (now MHCLG again) CIPFA are currently conducting a financial resilience review. Should the Council wish to take up the capitalisation directions, a plan must be submitted to MHCLG by 27 August.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> March 2025</p>	

<b>Risk Name:</b> Leadership Capacity		<b>Risk Owner:</b> Chief Executive																															
<b>Risk Ref:</b> SR07	<b>Date updated:</b> 2 <sup>nd</sup> July 2024	<b>Risk Manager:</b> Head of HR																															
<p><b>Risk Description:</b> There are a number of vacancies and temporary acting up arrangements in place across CEC’s leadership team are not functioning. These limit its capacity and prevents the team from operating as effectively as possible. Without the right capacity across the leadership team, the organisation is unable to flex and be respond to its challenges.</p> <p>Potential impacts: The impact may be a failure to achieve priorities, which is ever more critical in light of current financial challenges as well as the Council’s requirement to deliver a large-scale transformation programme. It could also be the case that priorities are delivered at higher cost than could otherwise be achieved. Without maintaining value for money throughout the organisation, overall amount of effectiveness is reduced.</p> <p>Drivers of likelihood: Reputational risk from Section 114 notice and impact on recruitment and retention. Failure to recruit and retain individuals for senior management positions. Failure to complete DMA exercise and implement a revised structure, Failure implement management development for the leadership team. Failure to communicate and motivate the wider workforce.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Gross</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Target</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>		4	Yellow	Orange	Red	Gross	3	Yellow	Yellow	Orange	Target	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow		1	2	3	4		Impact			
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<b>Interdependencies (risks):</b> All other strategic and operational risks.		<b>Lead Service Committee:</b> Corporate Policy Committee																															
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>• Council Constitution and decision-making structure, including the Committee system and defined terms of reference.</li> <li>• Corporate Plan and Annual Service Business Plans.</li> <li>• Support from Governance functions.</li> <li>• Leadership team recruitment processes, including skills and experience requirements.</li> <li>• Leadership team performance management processes.</li> <li>• Organisation structure and internal reporting.</li> <li>• Workforce Strategy</li> </ul>																																	
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																															
Undertake Decision Making Accountability (DMA) exercise from Heads of Service level to develop a revised organisational structure and implement new structure (Introduction of new populated structure)		TBC																															
Leadership development programme for CLT and WLC (Evaluation of programme once completed and sessions delivered)		30/06/2024																															
Interim arrangements for key posts (Interim recruitment exercise to a number of key posts)		31/05/2024																															
<p><b>Comments this quarter:</b> The Local Government Association (LGA) has undertaken a Decision Making Accountability (DMA) review to examine current senior management roles to help ensure a stable senior management structure is in place. This will provide recommendations for a revised organisational structure which is effective at making decisions, with clear accountabilities and roles, and that are efficient in their use of management resources.</p> <p>An update on progress in relation to the DMA review will be presented to Council in July 2024. A series of development sessions for Corporate Leadership Team (CLT) and Wider Leadership Community (WLC) has been developed, with the first of these sessions held on 12th April. Additional sessions for CLT and WLC will continue through the year.</p>																																	

Recruitment to a number of key senior interim roles has also taken place to provide cover for the Director of Finance and Customer Services & s151 Officer, Director of Policy and Change, Director of Commissioning, Director of Family Help & Children's Social Care, Director of Environment and the Director of Transformation.

Recruitment to the Executive Director of Place is currently underway and recruitment to the role of Executive Director Corporate Services (including s151 officer) is planned to commence after Council in July 2024.

**Timescale for managing risk to an acceptable level:** August 2024



<b>Risk Name:</b> Ability to Achieve Organisation Change		<b>Risk Owner:</b> Chief Executive																																
<b>Risk Ref:</b> SR08	<b>Date updated:</b> Q1 2024	<b>Risk Manager:</b> Director of Transformation																																
<p><b>Risk Description:</b> The risk that the council is unable to achieve organisational change due to a lack of resources and capacity to focus on transformation as people focus on the delivery of business as usual. Recently received advice from government commissioners advised that organisational change capacity is a key ingredient to support the council in delivering transformation to achieve medium to long term change that will support achievement of savings and also, in the event of a section 114 notice being issued, organisational change capacity is also essential to deliver necessary actions arising from interventions.</p> <p>Potential impacts: The council is required to deliver transformation activity at pace in order to balance the budget and avoid section 114. If a section 114 notice is issued and commissioners intervene, the council bears their costs. These costs are estimated at up to £200K per commissioner and there are usually 2-6 commissioners, for a period of up to 5 years. Therefore it is more prudent to ensure that there is capacity for organisational transformation to avoid more significant costs and reputational damage.</p> <p>Drivers of likelihood: A focus on delivery of frontline and statutory services and a de-prioritisation of corporate, enabling functions. A lack of clear governance and oversight of delivery of transformation. No clearly identified medium- and long-term transformation programme. Failure to recruit and retain individuals for senior management positions. Failure to identify and implement required change initiatives effectively and in a timely fashion. Failure to oversee efficient and effective operations, including dealing with poor performing individuals and to communicate and motivate the wider workforce.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Gross</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Net</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Target</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="3" style="text-align: center;">Impact</td> <td></td> </tr> </table>	4	Yellow	Orange	Red	Gross	3	Yellow	Yellow	Orange	Net	2	Green	Yellow	Yellow	Target	1	Green	Green	Yellow	Yellow			1	2	3	4			Impact			
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<b>Interdependencies (risks):</b> Recruitment and Retention, Failure to Achieve the MTFS		<b>Lead Service Committee:</b> Corporate Policy Committee																																
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>• A “doing things differently” initial list of change proposals has been collated and is being discussed with members.</li> <li>• A weekly CEBERT meeting is in place with Senior Level Membership to review the activities required to meet budget savings targets</li> <li>• A Bright Ideas scheme is in operation to enable the workforce to contribute their ideas for transformation</li> <li>• A new Corporate Plan has been consulted on to clarify the vision and priorities for Cheshire East</li> <li>• Appointment of a Delivery Partner to provide additional capacity and to produce the council transformation plan</li> <li>• Formation and weekly meetings of the transformation board</li> <li>• Establishment of a core project team to support the next phase of transformation</li> </ul>																																		
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																																
Strategic CLT discussion planned on structure necessary to achieve transformation.		September 2024																																
Medium to Long Term Transformation Plan to be developed.		August 2024																																
<p><b>Comments this quarter:</b> No change to the risk rating or description at this time. During Quarter 1 several key Interim Director appointments have been made; Interim Director of Transformation, Interim Director of Finance and Customer Services (S151) and Interim Director of Policy and Change; these are critical appointments for capacity, skills and experience to ensure the delivery of the transformation plan and delivering the actions arising from the Corporate Peer Challenge. The outcome of the Corporate Peer Challenge was received at full Council in July and action plan published at the end of August. Inner Circle Consulting have been appointed as the Council’s Transformation Delivery Partner, and the transformation plan was approved at CPC at the 21 August meeting. Inner Circle are providing capacity and capability to support the delivery of the plan, organisational change and skills transfer. The council’s senior leadership team is being supported with change management through SOLACE.</p>																																		
<b>Timescale for managing risk to an acceptable level:</b> TBC																																		

<b>Risk Name:</b> Recruitment and Retention		<b>Risk Owner:</b> Director of Finance & Customer Services																														
<b>Risk Ref:</b> SR09	<b>Date updated:</b> 2 <sup>nd</sup> July 2024	<b>Risk Manager:</b> Head of HR																														
<p><b>Risk Description:</b> Recruitment and retention of skilled and motivated staff is required to allow the organisation to deliver its Corporate Plan and its transformation programme. Achievement of the plan and programme requires operational changes which allow the council to adapt and improve.</p> <p>Impact of the risk occurring: High staff turnover and, or skills shortages, insufficient capacity within services. Failure to achieve annual budget and deliver the council's transformation programme and a detrimental impact upon the physical, emotional, and mental wellbeing of staff.</p> <p>Drivers of failure: National and local demographics alongside external factors led to increasing and changing demands on services. Increases to the cost of living also present risks to the resilience and wellbeing of our workforce and therefore the capacity to respond to demand. Outcome of Ofsted inspections as well as current financial challenges. WorkplaCE programme and the DMA review also impact.</p>		<table border="1"> <tr> <td rowspan="4">Likelihood</td> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red (Gross)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow (Net Target)</td> <td>Red</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td colspan="2"></td> <td colspan="4">Impact</td> </tr> </table>		Likelihood	4	Yellow	Orange	Red (Gross)	3	Yellow	Yellow (Net Target)	Red	2	Green	Yellow	Orange	1	Green	Green	Yellow			1	2	3	4			Impact			
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<b>Interdependencies (risks):</b> Business Continuity, Increased demand for Adults Services, Complexity and Demand for Children's Services		<b>Lead Service Committee:</b> Corporate Policy Committee																														
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>Workforce planning is in place via the Council's Workforce Strategy 2021-2025. This is a 4-year strategy with ongoing review. Work is underway on the development of a new Workforce Strategy for 2025-2028. Service Workforce Plans are also undertaken on an annual basis as part of the wider business planning process to review and support workforce planning on a service-by-service level</li> <li>Benchmarking exercises and workforce metrics are used to identify potential issues and service workforce plans developed as above to mitigate. Work on the refinement of a workforce assessment for the Council has been completed and a monthly workforce dashboard is available to identify potential issues. The workforce assessment is then updated twice a year, to ensure services have regular focused workforce data available.</li> <li>Focused apprenticeship levy funding, specific succession planning and talent management initiatives are used to support high priority areas. This is supported by the introduction of a manager and director dashboard on Learning Lounge that will help the identification of training and skills gaps.</li> <li>Recruitment and retention programme has delivered attendance at a programme of local and regional recruitment fairs, an end-to-end review of the recruitment process, improved recruitment advertising, an employee offer brochure, a review, and the planned implementation of additional employee benefits, a social work academy in Children's Services and the development of additional career pathways. The introduction of employee profile videos on social media and on Cheshire East Council's website to enhance the Council's profile have also been introduced. Further work will be undertaken to streamline the recruitment process to ensure improved efficiency and a better user experience.</li> <li>Review of the provision of agency staff, including an audit of spending, to reduce reliance and transition to a more stable permanent workforce base with reduced costs has also been undertaken. The Council have implemented the provisions of the Government proposal on capping the pay rates for agency social workers and have also engaged with the proposals for capping agency pay rates for Children's Social Workers as part of the Greater Manchester Pledge.</li> <li>Analysis of exit interview and questionnaire data with the relevant Executive Director to support the retention of staff.</li> <li>Wellbeing and engagement support, including delivery of EAP services, the introduction of 'In the Know' sessions for all staff, a revitalised recognition scheme, monthly organisation wide wellbeing updates for all staff, and the promotion of the government funded initiative Able Futures.</li> <li>Senior manager support in the redesign and restructure of services to meet MTFS targets, including MARS to minimise the impact on the workforce. A workforce planning toolkit is now in place to support services in identifying skills gaps and identify actions to address any identified gaps.</li> </ul>																																

<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
Introduction of a range of additional employee benefits, enhancing the existing offer (Monthly review by HRMT/Ongoing briefing to CLT on progress and implementation).	September 2024
Use Pulse Survey and Exit Interview data results to gauge employee satisfaction (Reviewed by HRMT and shared with DMTs).	On-going
Completion of a transformation skills audit (Reviewed by HRMT monthly)	July 2024
<p><b>Comments this quarter:</b> No change to the risk ratings at this time, with the same market pressures in place. The outcome of the recent Ofsted inspection during this quarter has also added pressure to the recruitment and retention of staff within Children’s Services. The continuing financial position for the Council increases the pressure across the Council. Further amendments have been made to the recruitment process during this quarter and the need for a verbal reference as well as a written reference has been removed to speed up the process. Workshops on the recruitment process have been held at the Manager Share &amp; Support sessions to ensure hiring managers are able to navigate the system more easily.</p> <p>Workplace charters to support the relocation of staff from Westfields have been developed by all services across the Council and are now in place. A series of workshops on the Pulse staff survey have been held with the Brighter Future Champions, at the Manager Share &amp; Support and the In the Know sessions as well as with the trade unions and a series of actions taken to address the results. These actions have been communicated out to staff through Team Voice.</p> <p>A further review of agency staff is ongoing to ensure a move to a more stable permanent workforce. A number of posts in the senior management structure have been filled with interim staff to ensure capacity and the first part of a transformation skills audit completed to better understand skills gaps, The second and final part of the audit is underway currently. Additional wellbeing support has been delivered for staff in Children’s, as a response to the additional stress Ofsted inspections can cause.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> N/A</p>	

<b>Risk Name:</b> Failure to manage the Consequences of Policy Uncertainty and National Policy Frameworks		<b>Risk Owner:</b> Director of Governance & Compliance (Monitoring Officer)																																		
<b>Risk Ref:</b> SR10	<b>Date updated:</b> 16th July 2024	<b>Risk Manager:</b> Director of Governance and Compliance (Monitoring Officer)																																		
<p><b>Risk Description:</b> The risk that the council cannot adequately understand and react to national policy changes or effectively implement them. The scope of the risk covers all central and local government decisions which relate to the operations of local government.</p> <p>The Corporate Plan guides the council's decision-making, it informs what is considered a 'good' policy outcome and areas of priority. Political changes may result in stakeholders no longer being aligned with that current plan. Central government policy decisions can materially impact the council in many ways, while other risks might draw out specific changes and capture their direct impact, this risk brings together the total effect of political uncertainty for consideration.</p>		<table border="1"> <tr> <td rowspan="4">Likelihood</td> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Red</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Gross Net</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Target</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="4">Impact</td> <td>TBC</td> </tr> </table>	Likelihood	4	Yellow	Orange	Red	Red	3	Yellow	Yellow	Orange	Gross Net	2	Green	Yellow	Yellow	Target	1	Green	Green	Yellow	Yellow			1	2	3	4			Impact				TBC
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<b>Interdependencies (risks):</b> Stakeholder Expectations and Communications, Failure to Achieve the MTFS, Failure to Adhere to Agreed Governance Processes		<b>Lead Service Committee:</b> Corporate Policy Committee																																		
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>Engagement with national government, consultations and requests for feedback</li> <li>Application for and funding agreement processes, governance process for ad hoc grants</li> <li>Engagement with political administration of CEBC</li> <li>Engagement with group leaders of CEBC parties</li> <li>Induction, on-going training and committee briefings for CEBC members</li> <li>Service Committee support and briefings for members and senior officers</li> <li>Corporate Plan and MTFS regular and ad hoc (post material changes) review process, including contingency planning</li> <li>Preparation for elections and promoting engagement in democracy.</li> <li>Forward planning for each committee's policy development and areas of political sensitivity</li> <li>The development and delivery of the Corporate Plan</li> <li>New member induction &amp; training programme</li> </ul>																																				
<b>Actions (Monitoring):</b>		<b>Target Date for Completion</b>																																		
A review of the Committee briefing process to increase flexibility to draw out impact on residents more clearly		2024/2025																																		
Oflog reporting (Oflog)		TBC																																		
<p><b>Comments this quarter:</b> The announcement of the general election was made on 23 May and held on 4 July. The announcement of the general election and observation of pre-election protocols created a pause to central government activity, and the impact of the change of government upon policy and devolution plans is expected to crystallise throughout the rest of the current year. The timescales for delivery of the transformation plan will be agreed confirmed by full council in July, the council's ability to adapt is critical to ensuring its delivery of its obligations (delivery of the plan being a strategic risk in of itself). Overall, no change to the risk score or description at this time</p>																																				
<p><b>Timescale for managing risk to an acceptable level:</b> Controls that mitigate this risk are based on the current landscape and timetable for local and national elections. The ability to manage this risk is not completely within the council's gift.</p>																																				

<b>Risk Name:</b> Failure to Adhere to Agreed Governance Processes		<b>Risk Owner:</b> Director of Governance and Compliance (Monitoring Officer)																																
<b>Risk Ref:</b> SR11	<b>Date updated:</b> 16th July 2024	<b>Risk Manager:</b> Director of Governance and Compliance (Monitoring Officer)																																
<p><b>Risk Description:</b> The council is a complex public sector organisation with a broad range of objectives, some of which it is legally obligated to deliver, its goals for the borough are identified within its Corporate Plan. Formal reporting and decision-making within the council is, to a degree, prescribed by local authority regulation. The decision-making process at all levels, must comply with regulatory requirements while also delivering those stated goals.</p> <p>Detailed consequences: Robust governance requires clear aims and policy objectives and identified and delivered. Governance processes should facilitate the lawful delivery of those objectives and prevent the misapplication of resources in achieving other goals. Ultimately this can result in a reduction of living standards and physical health and mental wellbeing of residents. Failure to provide a reasonable level of service to residents at an appropriate cost, or to follow legal decision-making protocols, can result in increased regulatory scrutiny and reputational damage. Possible outcomes of which may be, public censure, financial penalties or direct central government intervention.</p> <p>Detailed causes: The volume and complexity of the council's services and objectives, coupled with finite resources and differing stakeholder views, make the application of the Corporate Plan into 'good' decision-making, a challenge. Examples of governance failures are:</p> <ul style="list-style-type: none"> <li>• Variations in interpretation and non-compliance with agreed process and internal controls.</li> <li>• Deviation from core objectives as result of prioritising presenting issues.</li> <li>• Failure to allocate limited resources in line with the requirements of agreed objectives.</li> <li>• Inadequate internal controls across the organisation or vertically with a directorate.</li> </ul>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Red (Gross)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange (Net)</td> <td>Red</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow (Target)</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>	4	Yellow	Orange	Red	Red (Gross)	3	Yellow	Yellow	Orange (Net)	Red	2	Green	Yellow	Yellow (Target)	Orange	1	Green	Green	Yellow	Yellow			1	2	3	4			Impact			
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<p><b>Interdependencies (risks):</b> Failure to Achieve the MTFs, Stakeholder Expectation &amp; Communication, Leadership Capacity, Ability to Achieve Organisation Change, Failure to Manage the Consequences of Policy Uncertainty and National Policy Frameworks</p>		<b>Lead Service Committee:</b> Corporate Policy Committee																																
<p><b>Key Mitigating Controls:</b>                  Council's Constitution covers decision making processes, including finance and contract procedure rules. The Constitution is reviewed and amended on an on-going basis to ensure legal compliance and operational continuity. Following the adoption of the Committee system, mechanisms were put in place to capture Member's feedback and are reported to the (Constitution Working Group). The number, nature and terms of references of the Committees are assessed on an on-going basis, with refinements being implemented via full council decision.</p> <p>Constitution is a publicly available document; guidance on the use of the decision-making processes is provided by enabling services including Legal, Finance, Democratic Services, and Audit and Risk. Constitutional updates are overseen (recommended and administrated) by the Director of Governance and Compliance (also the Monitoring Officer) in response to regulatory changes and Full Council decisions. Administration of local, regional and national elections and monitoring of behaviour in the period of heightened sensitivity beforehand. During which time, appropriate adjustments are made to the publishing or reporting of controversial issues or anything that seeks to influence voters. Reports to Committees are developed and reviewed by senior officers and enabler sign off, briefings are arranged with Committee Members to address any further knowledge requirements ahead of the relevant meeting. All decisions are formally recorded in meeting minutes and administrated in line with delegated authorities as per the constitution.</p>																																		

<p>Schemes of delegation; local and financial are in place to provide clarity on responsibilities ensure separation of duties is in place where required and minimise the risk of inappropriate management override.</p> <p>Assurance mechanisms on the organisations' compliance with it's decision-making processes are provided through the external audit (Statement of Accounts) and the work of the Internal Audit team. Internal Audit's assurance is achieved through the development and delivery of an annual plan and follow-up monitoring of agreed actions. There are other external inspections, such as Ofsted, which may examine elements of our decision-making processes through their work, although this is not usually the primary focus. The organisation publishes an Annual Governance Statement identifying significant governance issues which have occurred, any known areas which may cause issues if not managed effectively and updates on issues previously identified.</p>	
<p><b>Actions (Monitoring):</b></p>	<p><b>Target Date for Completion</b></p>
<p>Review of shared service governance arrangements with specific actions to be identified</p>	<p>2024/25</p>
<p><b>Comments this quarter:</b> The risk has not changed in score or description during Q1. There is a high volume of change and decision making required in the current year, and ensuring our processes enable timely and lawful decision making, and there is compliance with them, will be key to the future successful operations of the council and its ability to avoid a section 114 notice.</p> <p>During Quarter 1, reports to Council and Committee's covered a number of recommended changes to refine governance and decision-making processes, however, there were indications to the Audit and Governance Committee in May of a likely limitation on the annual audit opinion for 23/24, which was subsequently confirmed in the annual opinion report to the committee on 29 July.</p> <p>Council on 15 May received the recommendations of the Corporate Policy Committee in respect of the review of the Committee structure and resolved to retain the Scrutiny Committee, that the General Licensing Sub-Committee and Licensing Act Sub-Committee be amalgamated to form one sub-committee, and that reports for "noting" would not be placed on agendas (apart from specific exemptions), but would be shared through the Councillors Hub and the Open Data and Transparency Webpages.</p> <p>The same meeting of Council also received the recommendations of the Corporate Policy Committee in respect of proposed changes to the Constitution arising from the review of the Committee structure. The proposed changes related to various matters relating to notices of motions, committee terms of reference and delegations to the Executive Director Place.</p> <p>At the Finance Sub Committee in June, the committee received the outcomes of the wholly owned companies' strategic options review and determined that the services provided by Ansa and Orbitas are to be brought back in house and delivered directly by the Council.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> TBC</p>	

<b>Risk Name:</b> Stakeholder Expectations and Communication		<b>Risk Owner:</b> Interim Director of Policy and Change																															
<b>Risk Ref:</b> SR12	<b>Date updated:</b> 14 <sup>th</sup> August 2024	<b>Risk Manager:</b> Head of Communications, Acting Head of Business Change																															
<p><b>Risk Description:</b> The risk that the council does not understand the expectations of its stakeholders and that its communication and engagement with those stakeholders does not result in their understanding of the council's actions, nor appropriate involvement and influence. The council has an obligation to provide as high a level of service to its residents as its funding will allow. This requires not only considering both the short and long-term but also the expectations of all of its stakeholders.</p> <p><b>Potential impacts:</b> A lack of understanding and poor communication and/or failure to effectively engage with stakeholders will cause damage to the council's reputation, if this is severe enough it may result in poor performance, increased complaints, regulatory inspection, challenge from central government, low morale, increased staff turnover and make the borough a less desirable place to live and work in. Consultation fatigue will result in a poor experience, reduced engagement and a lack of clarity over the changes being proposed.</p> <p><b>Potential drivers:</b> To a certain degree the council cannot fully control the views that its stakeholders form. At times it will have to make decisions that are unpopular, this can be due to the context of these decisions not being effectively communicated, understood or just being disregarded by stakeholders. Management of this risk should be considered on the basis of the objective regard for and interest in the council its policies and its services (measured via surveys, media coverage, customer relations activity, etc.) and an assessment of the quality of its engagement (both listening and telling).</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red (Net)</td> <td>Red (Gross)</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange (Target)</td> <td>Red</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>		4	Yellow	Orange	Red (Net)	Red (Gross)	3	Yellow	Yellow	Orange (Target)	Red	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow		1	2	3	4		Impact			
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<b>Interdependencies:</b> Increased Demand for Adult's Services, Complexity and Demand for Children's Services, Failure to Achieve the MTF5		<b>Lead Service Committee:</b> Corporate Policy Committee																															
<p><b>Key Mitigating Controls:</b></p> <p><b>Communication &amp; Media</b></p> <ul style="list-style-type: none"> <li>• 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</li> <li>• Communications strategies for key projects, issues, decisions and service changes developed agreed and reviewed with senior stakeholders and decision makers (internal and external communication)</li> <li>• Positive proactive communication across multiple channels to celebrate the council's successes and achievements.</li> <li>• Comms programme is planned and reviewed over the short-term (daily) and the long-term (monthly / annually), including review of committee forward plans, council service plans, consultation and engagement programmes.</li> <li>• Communications handling requirement for each service committee/full council meeting agreed with lead officer(s)</li> <li>• Continue to develop proactive direct comms to be issued via e-mail / SMS – we currently have 56,426 subscribers for 'push' notifications across a range of topics</li> <li>• Regular internal communications to members and officers</li> <li>• Monitoring and reporting of organisational reputation and sentiment, (social and traditional media). This includes weekly analysis report for senior managers.</li> <li>• Monitor public sector press (e.g. MJ and LGC) and maintain and develop relationships with these media outlets to maximise opportunities for positive coverage.</li> <li>• Communications and media function advised at an early stage of all future demand and emerging issues to enable effective planning</li> <li>• Media training programme for key spokespersons</li> <li>• Use performance management reports for council services and programmes to identify reputational opportunities and risks at an early stage.</li> <li>• Providing a 24/7 emergency communications on call function</li> </ul>																																	

<ul style="list-style-type: none"> <li>• Media relations protocol and approvals process – including protocol(s) for partnership communications where required.</li> <li>• Review communications business continuity, priorities and emergency / crisis comms protocols and plans</li> <li>• Regular meetings with comms leads from public sector partner organisations to collaborate, share plans and intelligence</li> <li>• Flexible use of social media and digital communication platforms</li> </ul>	
<b>Consultation</b> <ul style="list-style-type: none"> <li>• Endeavor to ensure that consultation is undertaken when proposals are still at a formative stage.</li> <li>• Design consultation which gives sufficient reasons for any proposal or change to permit stakeholders to undertake intelligent consideration and response to the options.</li> <li>• Consultation and engagement activity will be used as evidence when making decisions and adequate time will be given between the end of a consultation and a decision is made, to allow for consideration of and where required, a response to, the output of a consultation or engagement.</li> <li>• Equality Impact Assessments (EIA) are completed, appropriate for the purpose of use and that they are signed off before any consultation can begin.</li> <li>• Make it clear HOW consultation and engagement activity, EIA and other intelligence has been conscientiously taken into account when finalising the decision.</li> <li>• Use the equality impact assessment toolkit, guidance, and template to provide clarity around what the equality impact assessment is and how it should be used.</li> <li>• Equality champions supported by annual impact assessment training</li> <li>• Resident surveys</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion</b>
<b>Communication &amp; Media</b>	
Review communications and engagement strategy in the context of Corporate Peer Challenge Action plan, new Cheshire East plan, and wider transformation and improvement work (Provide progress reports to CPC every six months – once a revised communications and engagement strategy has been approved and adopted)	Q3/Q4 2024/25 (aligned to new Cheshire East plan development)
Provide communications support for transformation and improvement, financial management and implementation of MTFs proposals to ensure all stakeholders are well-informed about any changes to service and policy (Review annually)	March 2025
Review use of social platforms and other digital communications and engagement channels, including email (as Peer Challenge Action Plan) in the context of changing technologies and cultures on those platforms (Review quarterly)	Q2 2024/25
<b>Consultation:</b>	
Complete the service restructure to enable recruitment to vacant posts in the research and consultation team	Q2 2024/25
Better align the relationship between communication, engagement and consultation functions (Review annually)	September 2024
Explore options to strengthen resident engagement to inform decision making e.g. citizen/resident panel (Review annually)	October 2024
Develop a consultation and engagement programme (Review annually)	October 2024
<b>Comments this quarter:</b>	
<b>Communication &amp; Media:</b> There have been a number of significant developments that have impacted on stakeholder perception of the organisation in Q1. These have included: <ul style="list-style-type: none"> <li>• Ofsted Inspection of Children’s Services</li> <li>• Corporate Peer Challenge</li> <li>• General Election</li> <li>• Household waste recycling centres review</li> <li>• Libraries strategy</li> </ul>	



- Parking review
- Poynton Pool flood management works
- Middlewich Eastern Bypass funding
- HSE prosecution

The pre-election period for the general election meant that a number of decisions and consultations, and the publication of the corporate peer challenge report, were delayed until after the general election on 4 July. We will, therefore, see reputational impacts of some of these items carried over into Q2.

During Q1 we trialled a number of changes to the way we use X (formerly Twitter and Facebook, recognising the changing environments each platform offers. We will continue to develop and adapt our approach as the platforms and communities using them change.

**Consultation:** Consultation during the period has focussed on some high-profile activities, including Household Waste recycling centres, bus routes and libraries strategy. The outcome of these activities will be used to inform the council decision making activities.

Ensuring that the capacity, development and planning within the consultation team is appropriate for the transformation activities will be important to ensure that capacity and delivery of engagement activity remains achievable. Limited resources and resilience are a concern and supporting the transformation work alongside MTFs and other BAU will require careful planning at a strategic level.

Efforts continue to be made to provide support to the team and it is envisaged that a clear prioritisation of work can further support the focus of the team over the next period.

**Timescale for managing risk to an acceptable level:** Q4 2024/25

<b>Risk Name:</b> Information Security and Cyber Threat		<b>Risk Owner:</b> Head of Information Communication Technology and CIO	
<b>Risk Ref:</b> SR13	<b>Date Updated:</b> 3 <sup>rd</sup> July 2024	<b>Risk Manager:</b> ICT Programme Manager	
<p><b>Risk Description:</b> (Cause) There is a risk that as the Council continues to move towards using new technology systems to reduce costs and fulfil communication, accessibility, and transaction requirements, (threat) it becomes increasingly vulnerable to a security breach, and, or loss of information, either maliciously or inadvertently from within the Council or from external attacks by cyber-criminals. (Impact) This could result in many negative impacts, such as loss of information, distress to individuals, legal, financial, and reputational damage to the Council, in addition to the possible penetration and crippling of the Council's IT systems preventing it from delivering its Corporate Outcomes.</p>			
<p><b>Interdependencies:</b> This risk has interdependencies with corporate risk Business Continuity and Stakeholder Expectations and Communication. It also has links to the Financial Resilience risk, as funds for maintenance and replacement will be stretched, placing additional strain on assets and resilience of information security controls.</p>		<b>Lead Service Committee:</b> Corporate Policy Committee	
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>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.</li> <li>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</li> <li>Progress on Information Risk and Information Security is monitored through the Information Security Steering Committee (ISSC), Strategic Information Governance Group (SIGG) and the IG Collaboration Group.</li> <li>The Council has an Incident Reporting process which has been communicated to staff, all incidents are scored and assessed by SIGG to ensure that the breaches are minimised, and future breaches are reduced.</li> <li>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.</li> <li>The Council has an Information Asset Register which is reviewed on an annual basis and has been published on the open data portal.</li> <li>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.</li> <li>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.</li> </ul>			

<ul style="list-style-type: none"> <li>The Council provides security and compliance e-learning modules (which are mandatory for all employees) on the Learning Lounge. This includes several modules of Data handling, Cyber Security, and Information Assurance. Work has begun on a new cyber e-learning package developed by NCSC, and this is in a test phase. There are also several best practice guides on the Councils Lighthouse on the best ways to use technology and to protect information. These modules and best practice guides are updated regularly to reflect changes in working practices and as a response to additional threats.</li> <li>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.</li> <li>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.</li> <li>In addition, the Council is moving to Zero Trust architecture, this is a direct result of increased threats posed to the working infrastructure. This shift is in line with the latest thinking and guidelines issued by the NCSC.</li> <li>In support of this a high-level business case for Infrastructure Investment of which Security &amp; Compliance is an element was submitted and subsequently approved. This additional funding will be used to develop the necessary tools to start the implementation.</li> </ul>	
<b>Actions (Monitoring):</b>	<b>Target Date for Completion:</b>
Identity Management (Information Security Steering Committee (ISSC), Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
Application Management (Information Security Steering Committee (ISSC))	March 2025 (Multiyear project)
Data Security (Information Security Steering Committee (ISSC))	March 2025 (Multiyear project)
Data Quality (Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
Information Management (Information Assurance and Data Management (IADM))	March 2025 (Multiyear project)
<p><b>Comments this quarter:</b> No change to the risk rating at this time but there is a continued heightened alerts across the public sector, disruption could be expected particularly to coincide with high profile national events such as the Election period.</p> <p>Identity Management – projects are continuing to ensure that identities are protected through increased monitoring and controls. Access from locations outside of the UK are automatically blocked reducing the attack surface. There are regular phishing tests to understand the behaviours of staff and their understanding of cyber risks.</p> <p>Application Management – work is ongoing to ensure that MFA and SSO is applied to applications that are cloud hosted.</p> <p>Data Security – continued enhancement of the existing security controls to ensure that the latest threats are mitigated and protected. Work is continuing to strengthen the resilience capabilities of data storage and protection. Work has progressed to refresh the Cyber Incident Response Plan and associated workbooks to ensure that the Council is best equipped should an incident occur. There has been changes to cloud backups to ensure that there is coverage in the event of a cyber incident.</p> <p>Data Quality – Continuation of the MDM projects across several data fields to ensure that the councils' solutions have the correct data embedded with them, updated seamlessly across multiple systems. This is a key area to support any future drive to AI and Digital.</p> <p>Information Management – continuation of projects to deliver and improve the maturity of information both through its storage and use of information. This will enable both greater protection for that information but also enable efficiencies through accurate management information and improved compliance through controlled retention and ease and speed of access to critical information. Analysis of file storage within the organisation has begun at a service level, the process to apply retention and classification has been agreed and the first area has had this applied. This is a key area to support any future drive to AI and Digital.</p>	
<p><b>Timescale for managing risk to an acceptable level:</b> N/A</p>	

<b>Risk Name:</b> Business Continuity		<b>Risk Owner:</b> Director of Governance and Compliance (Monitoring Officer)																																											
<b>Risk Ref:</b> SR14	<b>Date updated:</b> 19 <sup>th</sup> September 2024	<b>Risk Manager:</b> Head of Audit & Risk																																											
<p><b>Risk Description:</b> 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.</p> <p>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.</p> <p>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.</p>		<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td></td> <td style="background-color: yellow;"></td> <td style="background-color: orange;"></td> <td style="background-color: red;"></td> <td style="background-color: red;"></td> </tr> <tr> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">Likelihood</td> <td>4</td> <td style="background-color: yellow;"></td> <td style="background-color: orange;"></td> <td style="background-color: red;"></td> <td style="background-color: red;"></td> </tr> <tr> <td></td> <td>3</td> <td style="background-color: yellow;"></td> <td style="background-color: orange;">Net</td> <td style="background-color: red;"></td> <td style="background-color: red;">Gross</td> </tr> <tr> <td></td> <td>2</td> <td style="background-color: green;"></td> <td style="background-color: yellow;"></td> <td style="background-color: yellow;">Target</td> <td style="background-color: orange;"></td> </tr> <tr> <td></td> <td>1</td> <td style="background-color: green;"></td> <td style="background-color: green;"></td> <td style="background-color: yellow;"></td> <td style="background-color: yellow;"></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> </tr> <tr> <td></td> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>								Likelihood	4						3		Net		Gross		2			Target			1							1	2	3	4			Impact			
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<b>Interdependencies (risks):</b> Information Security and Cyber Threat, Pandemic Virus, Fragility in the Social Care Market, Council Funding, Organisational Capacity & Demand		<b>Lead Service Committee:</b> Corporate Policy Committee																																											
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>BC Plans held for each service area – clear format, identifying critical and serious priority activities with recovery time objectives.</li> <li>BC impact assessments undertaken across the organisation to understand challenges to service delivery ahead of known events, informing decision making and mitigation plans.</li> <li>High level course on Business Continuity Management has been added to the Council’s Learning Lounge</li> <li>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</li> <li>Ongoing liaison with Emergency Planning Shared Service</li> </ul>																																													
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																																											
Review and refresh of the Business Continuity Framework (2-year review cycle, delayed start due to other work pressures, involvement of BC workshops, policy framework changes more broadly)		November 2024																																											
Development of SharePoint BC system (Work to begin January 2024 - began, but paused for scoping/testing of ideas through BC workshops)		TBC																																											
Rollout and training for the SharePoint BC system (2-year review cycle)		Post SharePoint system development																																											
Work with Emergency Planning on scenario exercises (ad hoc pieces of work since March 2023 – and ongoing)		Began March 2023 – on-going																																											
<p><b>Comments this quarter:</b> Planning for business continuity workshops to be held in Quarter 2 has been undertaken with the support of colleagues from the Emergency Planning team, ICT Services and Communications. There are several desired outcomes from the sessions, which will inform individual plan content, as well as the wider organisational approach to responses. No change to risk scores.</p>																																													
<b>Timescale for managing risk to an acceptable level:</b> Q4 2023/24																																													

<b>Risk Name:</b> Capital Projects - Place		<b>Risk Owner:</b> Executive Director of Place																														
<b>Risk Ref:</b> SR15	<b>Date updated:</b> 31 <sup>st</sup> July 2024	<b>Risk Manager:</b> Place Directors and Business Managers																														
<p><b>Risk Description:</b> Failure to deliver major capital projects.</p> <p>Impact: The council delivers a broad range of capital projects in support of the aims and objectives of its Corporate Plan. Current delays to some projects and to the Capital Programme Review has brought uncertainty to overall programme delivery. It has impacted the ability to build some of the councils priority projects to deliver economic growth as published in the Local Plan Strategy.</p> <p>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. The uncertainty could lead to cancellation of major economic regeneration projects. This in turn would mean that very significant costs expended to date would need to be charged to revenue budgets in the year that the projects were cancelled. These costs would be significant and would exacerbate the councils revenue budget challenges.</p> <p>Likelihood: The uncertainties have already caused delays on some projects and continue to do so. Delays in times of high inflation mean significant cost increases for the projects in question, which have already added to the council's financial challenges.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Gross Net</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Target</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>	4	Yellow	Orange	Red	Gross Net	3	Yellow	Yellow	Orange	Target	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow		1	2	3	4		Impact			
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<b>Interdependencies (risks):</b> Failure to Achieve the MTFS, CEC Carbon Neutral Status, Failure of the Local Economy		<b>Lead Service Committee:</b> Economy and Growth, Environment and Communities, Highways and Transport																														
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>The Capital Strategy and overall Capital Programme is presented annually as part of the Medium-Term Financial Strategy at full Council</li> <li>Some new projects and schemes are subject to the approval of detailed business cases in accordance with the Finance Procedure Rules, although the quality of some schemes</li> <li>Appropriate and proportionate governance has been established to oversee many capital projects. including risk registers. This includes project boards to manage individual projects</li> <li>The Place Board provides strategic oversight of all the major Crewe-centric and Macclesfield-centric projects to ensure individual projects are fully aligned to the overarching vision and delivery plan for each town</li> <li>Financial monitoring undertaken quarterly, with summary data reported to Finance Sub-Committee and appropriate service committee</li> <li>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</li> <li>Regular 121s between Executive Director and Directors which includes updates on key capital projects</li> <li>Capital review of all Scheme included in the MTFS underway to consider affordability. Some schemes delivery may be impacted depending on the outcome</li> <li>Some good work with central government after the cancellation of HS2 has had a significantly positive impact on the Council's future capital funding profile</li> </ul>																																
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																														
The Transformation Plan for the Council is intended to bring about far more effective prioritisation and management of capital investment (Regular performance updates to CLT)		September 2024																														
<b>Comments this quarter:</b> Narrative and scores updated to reflect the current situation in respect of the financial challenges Capital Programme Review and on some major capital projects.																																

**Timescale for managing risk to an acceptable level:** Major capital projects by their nature are high risk. The controls are designed to proactively manage risks and mitigate their impact if a risk is realised. It is not realistic to expect the risk to be managed any lower.

<b>Risk Name:</b> Failure of the Local Economy		<b>Risk Owner:</b> Executive Director of Place
<b>Risk Ref:</b> SR16	<b>Date updated:</b> 31 <sup>st</sup> July 2024	<b>Risk Manager:</b> Director of Growth and Enterprise
<p><b>Risk Description:</b> Failure of the local economy</p> <p>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.</p> <p>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.</p> <p>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.</p>		
<b>Interdependencies (risks):</b> Capital Projects, HS2 Infrastructure Investment, Pandemic Virus, Climate Change		<b>Lead Service Committee:</b> Economy and Growth
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>Cheshire East Business support hub has been launched.</li> <li>Business forum to engage and plan future support.</li> <li>Investment plans to support regeneration and development.</li> <li>Place marketing and inward investment.</li> </ul>		
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>
<p>Launch of business support grants: (Quarterly returns to government)</p> <ul style="list-style-type: none"> <li>Repurposing our high street grants from Crewe town centre</li> <li>Decarbonisation grants for business</li> <li>New employment space grant</li> </ul>		March 2025
<p><b>Comments this quarter:</b> The Office for National Statistics estimate that real gross domestic product (GDP) is estimated to have shown no growth in April 2024, following growth of 0.4% in March 2024. Further to the positive outlook and having had local economies respond to the pandemic, inflation, and cost of living crisis it is determined that the local economies have constrained but survived, and therefore a robust resilience demonstrated. Therefore, the robustness against the risk of failure has seen improvement.</p>		
<b>Timescale for managing risk to an acceptable level:</b> N/A		

<b>Risk Name:</b> CEC Carbon Neutral Status		<b>Risk Owner:</b> Executive Director of Place	
<b>Risk Ref:</b> SR17		<b>Date updated:</b> 31 <sup>st</sup> July 2024	
<b>Risk Description:</b> Failure to achieve Carbon Neutral status for the Council by the 2027 milestone target due to requirement to secure statutory consents, seek viable and affordable solutions and other external market forces outside the Councils control.  Likelihood is based on a number of external factors, partnerships and key outcomes being delivered in a timely manner.  Impact will result in non-delivery of a key priority in the Council’s Corporate Plan. It will also contribute to climate change temperature rise and severe weather events which could have an impact on public health and safety. It could also have financial implications with increased need for adaptation of key infrastructure for severe weather events across the borough.			
<b>Interdependencies (risks):</b> Economy and World Events, Recruitment and Retention, Council funding, Capital Projects		<b>Lead Service Committee:</b> Environment and Communities	
<b>Key Mitigating Controls:</b>			
<ul style="list-style-type: none"> <li>• Risk is reviewed as part of the Brighter Futures Transformation Projects Board, operational board and member steering group</li> <li>• Carbon Neutral Program established with Program Board reviewing progress and risks monthly</li> <li>• Member Advisory group overseeing its delivery</li> <li>• Annual update on progress reported to relevant committee</li> <li>• Climate change is a key consideration as part of our statutory planning duties as an authority and within the development of local planning policy</li> <li>• Planned natural offset set at 10% more than required to reduce risk of non-delivery in any one project area</li> </ul>			
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>	
Cheshire East Capital Spend Review (Awaiting outcome of the corporate capital review, progress paused on 2nd Solar farm, next phase of EV and next tree planting program until the review is complete)		TBC	
<b>Comments this quarter:</b> The Council’s capital review remains paused throughout this quarter and now presents a significant risk to the project preventing the ordering of the next phase of EV vehicles and progression of the Council’s second solar farm. Without early approval the 2027 target of the program remains at risk. Net and target scores are therefore left at the highest possible rating.			
<b>Timescale for managing risk to an acceptable level:</b> TBC			



<b>Risk Name:</b> Local Planning Authority Modernisation Plan		<b>Risk Owner:</b> Executive Director of Place
<b>Risk Ref:</b> SR18	<b>Date updated:</b> 31 <sup>st</sup> July 2024	<b>Risk Manager:</b> Interim Director of Planning, Head of Planning
<p><b>Risk Description:</b>                  Following the completion of the ‘Local Planning Authority Review and Service Transformation’ report and presentation to Environment &amp; 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.</p> <p>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.</p> <p>Detailed causes: Insufficient resource to ensure completion of priority actions in the required timescales (staff and skills) while also ‘doing the day job’, Interim Service Review Lead/Planning Director limited contract duration, supplier resource to deliver new ICT system, failure to engage with internal and external stakeholders to affect necessary changes, lack of oversight from the Planning Transformation Board/Steering Group.</p>		
<b>Interdependencies (risks):</b> Organisational Capacity and Demand, Reputation, Council Funding,		<b>Lead Service Committee:</b> Environment and Communities
<p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>Environment and Communities Report 31/10/2022; Local Planning Authority Review and Service Transformation Report and Modernisation Plan.</li> <li>Monitoring of progress against Modernisation Plan by Transformation Board and Environment and Communities Committee.</li> <li>Regular meetings of Interim Director of Planning and Head of Planning and team managers to review action logs and progress on key priorities. Steering Group established to review workstream and focus priorities feeding into Transformation Board.</li> <li>Internal Audit reports on Community Infrastructure Levy and Section 106 will inform the scope of a member/officer working group.</li> <li>IT System Project has its own Project Board attended by supplier.</li> <li>Weekly monitoring of resources / recruitment during manager’s meetings.</li> </ul>		
<b>Actions (Monitoring):</b>		<b>Target Date for Completion</b>
IT System Project escalation due to breach of contract (Weekly team and fortnightly Project Board meetings or as needed)		Q2 2024/25
External support from Capita retained to assist with backlog. Backlog funding secured from DLUHC, intervention from senior officers on older applications (Continued monthly reporting on application backlog)		Q2 2024/25
Continued monitoring of resources – recruitment to critical posts ahead of restructure (Weekly manager meetings)		Q2 2024/25
Modernisation Plan recast as Service Improvement Plan (Service Improvement Board reporting against workstreams)		Q2 2024/25
<p><b>Comments this quarter:</b> Overall risk score remains, mainly due to the implementation of the new IT system and the wider impacts on the whole Service as a result.</p> <p>Further progress has been made on the data migration and functionality of the new system but CEC have been forced into a number of compromises with the new system in order to seek a revised go-live date of September 2024. Executive escalation calls remain ongoing to ensure the suppliers commitment to meet revised Project Plan, both for Planning and Land Charges. Significant staff input from Service will be required for testing and training over Q1, as well as during the transition phase between systems.</p>		

The consultation on the restructure has been completed and the final structure will be completed with vacancies to be populated early in Q2. Application 'backlog' is now close to a normal level of live applications albeit the drop in application number more widely have assisted in this. S106 audit recommendations are now largely completed, with multiple cross-service discussions to ensure new processes are adopted going forward and members updated.

The Modernisation Plan has seen a number of significant changes and improvements brought forward since its inception. During Q1 the Plan has now been recast as a Service Improvement Plan with a new Service Improvement Board to push forward on identified key workstreams across the Service.

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

<b>Risk Name:</b> Delivery of the ILACS Improvement Plan		<b>Risk Owner:</b> Executive Director of Children's Services																															
<b>Risk Ref:</b> SR19	<b>Date updated:</b> 16 <sup>th</sup> July 2024	<b>Risk Manager:</b> Improvement and Impact Board																															
<p><b>Risk Description:</b> That children's services do not achieve the improvements needed at the necessary pace to address the findings from the Ofsted inspection in February and March 2024, where children's services received an overall judgement of inadequate. This would mean that vulnerable children and young people in need of a children's social care service would not receive consistently good quality support.</p> <p>There is a significant reputational and financial risk to not delivering improvements. If services remain inadequate at the next inspection, further intervention measures may need to be put in place, for example escalation to a Statutory Direction notice, or Direction that another person or organisation performs the functions on the local authority's behalf. These measures will have a significant cost to the council.</p>		<table border="1"> <tr> <td>4</td> <td>Yellow</td> <td>Orange</td> <td>Red</td> <td>Gross</td> </tr> <tr> <td>3</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> <td>Net Target</td> </tr> <tr> <td>2</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> <td>Orange</td> </tr> <tr> <td>1</td> <td>Green</td> <td>Green</td> <td>Yellow</td> <td>Yellow</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">Impact</td> </tr> </table>		4	Yellow	Orange	Red	Gross	3	Yellow	Yellow	Orange	Net Target	2	Green	Yellow	Yellow	Orange	1	Green	Green	Yellow	Yellow		1	2	3	4		Impact			
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<p><b>Interdependencies (risks):</b> Increased Demand for Adult's Services, Complexity and Demand for Children's Services, Failure to Achieve the MTFS</p> <p><b>Key Mitigating Controls:</b></p> <ul style="list-style-type: none"> <li>A comprehensive improvement plan is in place to address the inspection findings. The plan has been scrutinised by the Safeguarding Children's Partnership, the council's leadership team, members of the two children's committees, and full Council. Advice from the LGA and Ofsted, along with good practice from other authorities, has been sought and incorporated into the plan</li> <li>Progress and impact against the improvement plan is monitored monthly through an independently chaired Improvement and Impact Board. This includes scrutiny of quality assurance and performance in relation to the plan. Independent improvement specialists from the DfE and LGA are members of the board</li> <li>Progress and impact will be externally evaluated through Ofsted monitoring visits and DfE reviews</li> </ul>		<b>Lead Service Committee:</b> Children and Families Committee																															
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>																															
Monitor delivery and impact of the improvement plan monthly (Monthly through the Improvement and Impact Board)		Monthly until April 2025																															
Report to the Children and Families Committee on progress against the improvement plan (At each Children and Families Committee Meeting)		Every committee meeting from September																															
Adapt the improvement plan to respond to areas for improvement from Ofsted and DfE monitoring (Through the Improvement and Impact Board and Children and Families Committee following monitoring activity)		January 2025																															
<p><b>Comments this quarter:</b> This is a new risk following the Ofsted children's services inspection in February and March 2024, and the publication of the inspection findings on 16 May 2024.</p> <p>A comprehensive improvement plan is in place which addresses all the inspection findings detailed in the inspection report. The plan has been scrutinised by the Safeguarding Children's Partnership, the council's leadership team, members of the two children's committees, and full Council. Advice from the LGA and Ofsted, along with good practice from other authorities, has been sought and incorporated into the plan.</p>																																	

An independently chaired Improvement and Impact Board was established in July 2024. Progress and impact against the improvement plan is being monitored monthly through this board to ensure changes are achieved at pace. This includes scrutiny of quality assurance and performance in relation to the plan. Independent improvement specialists from the DfE and LGA, along with key partners, are members of the board. The Children and Families Committee will receive progress updates against the plan at each Committee meeting.

**Timescale for managing risk to an acceptable level:** April 2026

<b>Risk Name:</b> SEND Inspection		<b>Risk Owner:</b> Executive Director of Children's Services	
<b>Risk Ref:</b> SR20		<b>Date updated:</b> 22 <sup>nd</sup> July 2024	
<b>Risk Description:</b> That as a partnership, Cheshire East's children's and adults services do not receive a positive outcome from an <u>Ofsted and CQC area SEND inspection</u> . This would mean that vulnerable children and young people with SEND would not have been receiving consistently good quality support. There is also a significant reputational and financial risk to a poor inspection outcome.			
<b>Interdependencies (risks):</b> Increased Demand for Adult's Services, Complexity and Demand for Children's Services, Failure to Achieve the MTFS		<b>Lead Service Committee:</b>	
<b>Key Mitigating Controls:</b>			
<ul style="list-style-type: none"> <li>• A partnership SEND inspection planning group is in place to drive and monitor activity to support inspection readiness</li> <li>• A self-evaluation of the quality of our SEND services has been completed ensuring we understand ourselves well against the Ofsted framework. This will continue to be refreshed on at least a six monthly basis</li> <li>• A SEND improvement team is being stepped up to drive service transformation</li> <li>• A project plan is being developed for the transformation activity, based on the Safety Valve submission and the SEND Strategy priorities</li> </ul>			
<b>Actions (Monitoring):</b>		<b>Target Date for Completion:</b>	
Establish the SEND transformation plan, with delivery firmly underway (Bi-monthly (every 2 months) through the SEND Partnership Board)		April 2025	
Refresh the self evaluation of SEND support (Six monthly through the SEND inspection planning group)		Refreshed every six months as a minimum	
<b>Comments this quarter:</b> This is a new risk following the Ofsted children's services inspection in February and March 2024, and the publication of the inspection findings on 16 May 2024 where the council's children's services were found to be inadequate overall. As a 0-25 partnership, Cheshire East is also expecting to receive an Ofsted and CQC area SEND inspection. A partnership SEND inspection planning group is in place to drive and monitor activity to support inspection readiness. A SEND improvement team is being stepped up to drive service transformation. A project plan is being developed for the transformation activity, based on the Safety Valve submission and the SEND Strategy priorities. A self-evaluation of the quality of our SEND services has been completed ensuring we understand ourselves well against the Ofsted framework. This will continue to be refreshed on at least a six monthly basis.			
<b>Timescale for managing risk to an acceptable level:</b> December 2024			