

NCC CORPORATE RISK REGISTER – 17 JULY 2020

Relative Impact	Catastrophic	(5)	M	H	VH	VH	VH
	Significant	(4)	M	H	VH	VH	VH
	Moderate	(3)	M	M	H	H	H
	Minor	(2)	L	L	M	M	M
	Insignificant	(1)	L	L	L	L	L
			Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost certain (5)
Relative Likelihood							

LIKELIHOOD		
1	Rare	0 to 5% chance
2	Unlikely	6 to 20% chance
3	Possible	21 to 50% chance
4	Likely	51 to 80% chance
5	Almost certain	81%+ chance
IMPACT		
1	Insignificant	0 to 5% effect
2	Minor	6 to 20% effect
3	Moderate	21 to 50% effect
4	Significant	51 to 80% effect
5	Catastrophic	81%+ effect

Guidance Notes and definitions

- The term “risk” used in this register is defined by the Institute of Risk Management as the “combination of probability of an event and its consequences” (ISO/EC Guide 73)
- This Corporate Risk Register sets out the key risks to NCC that have been identified by Risk Owners.
- Risk Owners are officers who are responsible for identifying the key risks to the organisation and for implementing and managing the controls to mitigate those risks.
- Sources and triggers for each risk have been identified and the possible consequences of failure to address each risk have been determined.
- Current controls and mitigations have been listed for each risk and these identify the controls presently in place that are designed to address the risks.
- Additional controls required and new controls that are being introduced are also recorded in the register. This identifies any gaps in controls and provides details of new controls that management are intending to introduce, to address these gaps, or are implementing to strengthen existing controls.
- For each of the identified risks, inherent, current and residual risk scores have then been determined.
- Inherent risk is defined as the amount of risk that would exist in the absence of any controls.
- Current risk is defined as the amount of risk assuming the current mitigations are being applied.
- Residual risk is the amount of risk that will remain after proposed actions are put in place.
- In conjunction with this Risk Register, Internal Audit has completed a number of assurance maps, which categorise the mitigating controls for each risk under one of three “lines of defence”. These are:
 1. Controls established by management to provide oversight of identified risks (for example, the implementation of policies and Committee reviews)
 2. On-going Internal controls applied by management applied to manage and control day to day operations (for example, reconciliations and performance reports)
 3. Third party assurance (independent oversight of risk management by auditors and other independent bodies such as the CQC and Ofsted)

The current controls and mitigations listed on this register to address the identified risks have been categorised on this basis.

1. Major failure of Information Governance

Risk Owner: Marjorie Toward

Sources & Triggers:

- Failure to put in place appropriate, risk-based technical measures to secure and protect data (e.g. encryption, identity-based access controls, password controls etc).
- Failure to put in place appropriate risk-based organisational measures to secure and protect data (e.g. information governance and IT training; data protection procedures, guidance; data protection impact assessments; information sharing agreements etc).
- Failure to manage corporate, service user, staff and corporate records appropriately (e.g. not organising, retaining and disposing of information properly).
- Failure to assure that third party suppliers manage information appropriately
- Information security breaches, including those due to cyber-attacks (e.g. ransomware)
- Personal data breaches (e.g. personal data being sent to incorrect recipients etc)
- Individual's rights over their data infringed (e.g. excessive personal information collection; failure to provide privacy notices etc).
- Council's Information Governance framework incapable of responding to emergency situations to enable quick risk-based decisions to be made.
- Receipt of regular, large data files relating to vulnerable people in Notts
- Temporary data processing measures put in place during pandemic become permanent without satisfactory data protection due diligence

Possible consequences:

- Physical, emotional or financial harm to member of the public or staff
- Failure to meet a statutory obligation / Impact on service delivery / inefficient service delivery and associated costs
- Litigation against the Council
- Loss of reputation
- Financial cost to authority (e.g. loss of revenue through fraud, compensation payments or fines levied by the Information Commissioner)
- Failure to deliver essential services due to lack of responsiveness

Current controls & Mitigations:

LINE 1

- Information Governance Board (IG) chaired by Senior Information Risk Owner (SIRO) reviews IG risks quarterly
- ICT Risk Management Team has a specific information security risk register
- Dedicated and separate IG and IS teams.
- Annual cyber security strategy written by IT security architect
- IG in the remit of Risk, Safety and Emergency Management Board / Groups.
- IG / IS Framework of policies, standards, procedures and guidance

LINE 2

- Significant and diverse technical security controls (e.g. secure e-mail facilities)
- Mandatory IG training for all staff at induction and refreshed biennially; IG intranet hub
- Information Asset Register and other records of data processing activity in place
- Data Protection Impact Assessment process for new / changed personal data processing.
- Data breach management process, including management notification of breaches
- Short-form DPIA / Information Sharing request form introduced to hasten risk-based decision-making during Covid-19 pandemic

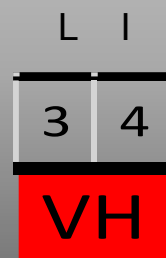
LINE 3

- Cyber security and information governance compliance regimes (e.g. PSN Code of Connection Compliance and Data Security and Protection Toolkit, Cyber Essentials)

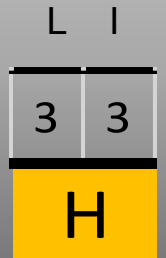
Additional controls required & new controls being introduced:

Action	Timescale	Action owner
Revise IG and IS training offer and approach	Spring 2020	Caroline Agnew
Assess NCC performance against national / local IG framework(s)	Winter 2020	Caroline Agnew
Review and determine next steps for approach to electronic document and records management	Autumn 2020	Heather Dickinson / Caroline Agnew

Agreed
Current Risk



Agreed
Target Risk



2. Failure to provide safe and secure premises

Risk Owner: Adrian Smith

Sources & triggers:

- Changed working locations for large numbers of staff who are working from home or in sparsely used premises
- Management of vacant properties – lack of site monitoring visits during lockdown period, for both vacant and temporarily closed buildings
- Uncontrolled hazards (asbestos / legionella / other hazards)
- Uncontrolled fire safety issues, including those in schools and care homes
- Serious injury to NCC staff arising from work activities
- Failure to exercise duty of care
- Lack of clarity / awareness regarding staff responsibilities / NPO role
- Reduced expenditure on building maintenance and inability to carry out repairs, maintenance and servicing during lockdown period
- Ineffective Implementation of NCC Smarter Working initiatives
- Failure to supply and inspect appropriate and safe equipment
- Inappropriate contracting arrangements and management
- Failure to design safety
- Failure to inspect and maintain grounds / outdoor environment (including at schools) – potentially reduced during lockdown period?
- Re-purposing the use of NCC premises during the emergency response
- Inability to carry out essential tasks due to high staff absence levels
- Inability to safely secure stored supplies of PPE

Possible consequences:

- Death, injury or illness of members of staff, service users or the public (including unauthorised users)
- Judicial review
- Litigation against the Council, for example claims arising from changed working conditions
- Enforcement action e.g. HSE, Fire Environment Agency
- Loss of reputation
- Inability to deliver services
- Increased costs

Current controls & Mitigations:

LINE 1

- a) Corporate Property Strategy
- b) H&S Policies

LINE 2

- c) Communication with sites to ensure statutory inspections and emergency repairs remain in place throughout periods of building closure. Property closure checklists issued to all sites and available on NCC intranet and schools' portal.
- d) Management of vacant sites by Estates Practice Team and ARC Partnership with record of services isolated and those remaining live, locations of keys and security provisions).
- e) Close down instructions and a checklist have been issued to Nominated Property Officers to maintain safety and security at NNC sites and security patrols are being maintained.
- f) Remedial actions following inspections and risk assessments recorded on P2 with target completion dates.
- g) Full Programmes of statutory inspections and risk assessments (fire, asbestos, legionella, gas, electrical mechanical and lifts) recorded and documented on asset management system P2.
- h) Planned maintenance programme including larger scale remedial actions
- i) Dynamic risk assessments produce by service if buildings temporarily change use
- j) Management of asbestos including E-Learning awareness training, management and refurbishment surveys, annual register updates and local asbestos management plans. Process to report and respond to incidents.
- k) Property Strategy, Service Asset Management Plans and stock condition surveys produced and analysed to assess maintenance and usage requirements of all assets
- l) Contractor management by Commissioning Team. Partnership arrangements with Arc Partnership consisting of joint working, SLA's and monitored KPIs
- m) Property Compliance Action Plan including actions identified during audit review of all policies and procedures, training needs analysis, communication strategy and P2 improvements.
- n) Collaborative working between NCC H&S Team and Property Compliance including Compliance Board and progress to ISO 45001)
- o) Insurance

LINE 3

- p) Independent Review and certification on property compliance by BSI

Additional controls & actions required:

Action	Timescale	Action owner
Continuous Review of Property Compliance with areas for improvement added to Property Compliance Action Plan	Continuous	Derek Highton & Neil Gamble
Implement Corporate Landlord Model to create centralised and standardised approach to property management and safety	2020/21	Derek Highton

Agreed

Current Risk

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3 5

VH

Target Risk

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2 5

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3. Major Supplier or Supply Chain Failure (including Contract Management failure)

Risk Owner: Nigel Stevenson

Sources & triggers:

- Inadequate supply and distribution of PPE to meet up-to-date PHE guidance for use in all service provision settings
- Inadequate availability, supply and distribution chains to provide essential items and services, due to the loss of normal supply chains and demand for new emergency goods and services.
- New / emergency suppliers insisting upon payment arrangements and terms which do not comply with NCC standards terms
- Commissioning Model (including partners)
- Poor contract specifications
- Compliance failure
- Supplier / Quality / cost fraud - risk is heightened where there is increased demand for items in short supply and where normal controls have had to be relaxed to meet emergency demands (e.g. in relation to PPE)
- Major supplier of critical services goes out of business
- Accumulated closures of '2nd tier' key suppliers create significant delay in the supply chain for critical services
- Poor provider performance
- Market volatility
- Energy dispute / disruption of supply
- Breach of contract or breach of procurement guidelines
- Lack of expert guidance due to high staff absence levels
- Unreliability of ICT systems hinders supply chain management
- Services moving to alternative delivery settings (changed premises, hub and spoke arrangements, staff based from home, etc)
- Devolved purchasing arrangements leading to rogue purchases from unapproved suppliers

Possible consequences:

- Increased costs
- Loss of reputation
- Inability to deliver key services or staff carry on working in unsafe condition
- Litigation, for example from individual members of staff or as part of class actions relating to inadequate supply of PPE
- The acquisition of poor-quality items that do not meet safety standards at inflated prices due to purchasing from unapproved suppliers

Current controls & Mitigations:

LINE 1

- Business Continuity Plans
- Devolved contract management with support and guidance from Procurement Centre with corporate contract management framework
- Councillors' oversight via the F&MCM Committee

LINE 2

- New emergency payment terms and systems introduced
- PPE contracts have been agreed with suppliers and logistical processes embedded
- Category Managers
- Market management
- Active Contract Management
- Departmental Procurement Groups
- Risk assessment of possible failure
- Supply chain management
- Category managers working closer with suppliers, market and commissioners
- Contracts database

LINE 3

- Local and national guidance has been issued in relation to PPE standards and purchasing
- Trading standards have been involved in procurement process to ensure supplier compliance
- Local Fair Price for Care Implemented (?)
- East Mids. Property Alliance
- LRF/Category 2 critical infrastructure plans
- Dunn and Bradstreet checks on suppliers

Additional controls & actions required:

Action	Timescale	Action owner
Overview of managers work to review and refresh existing contract	Continuous (monthly)	Kaj Ghattaora
Implement outcomes of Internal Audit of Contract Management	Autumn 2020	Kaj Ghattaora

Agreed Current Risk

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3 3

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Agreed Target Risk

L I

3 3

H

4. Inability to deliver critical services due to a sustained business interruption

Risk Owner: Derek Highton

Sources & triggers:

- Loss of premises / staff / ICT (heightened due to extent of homeworking) / telecoms / utilities (gas/electricity/water) / key suppliers and / or key resources (e.g. fuel)
- Unavailability of senior officers and key staff essential to the Council's structures for business continuity
- Breakdown of industrial relations locally or nationally – potentially heightened in relation to adequate supply of PPE
- Lack of understanding of what is critical / Failure to prioritise Council services correctly
- Inadequate Business Continuity Planning and Preparations (e.g. for relocation of critical services)
- Sustained response to significant civil emergency or other external challenge
- Failure of maintained schools, external providers, and suppliers to have adequate insurance and business continuity arrangements
- Breaches of contract leading to legal action
- Risk to staff Health and Wellbeing by contracting COVID-19 at work and impact of trauma on workforce
- Mental Health of staff adversely affected by prolonged home-working.

Possible consequences:

- Inability to deliver critical services / business as usual
- Harm to staff, service users and the public
- Failure to protect and safeguard people at risk
- Failure to protect health and safety of people and building
- Failure to maintain the transport network
- Failure to maintain ability to pay employees and suppliers
- Reduced ability to deliver the aspirations in the Strategic Plan
- Loss of reputation
- Reduced confidence in the ability of the Council to deliver services

Current controls & Mitigations:

LINE 1

- Corporate business continuity plan, and emergency plans
- List of critical services
- H&S at work policies including updates re: COVID-19
- Monitoring by Corporate Leadership Team, Risk, Safety and Emergency Management Board and RSEM Groups.
- HR Guidance - managing industrial action
- Business Continuity Plans for Critical Services
- Monitoring by Risk, Safety and Emergency Management Board and RSEM Groups

LINE 2

- Staff Re-Deployment Measures (e.g. Mandatory Skills Audit, staff re-deployment training package).
- Remote working guidance and tools (e.g. 'Occupational Health 'Virtual Work Station Assessments', 'Physiotherapy Service Referrals', 'Home Working Risk Assessment Form', 'Lone Working Health and Safety Guidance'.)
- Business Impact Analyses
- Control of contractors / contract management
- HR Guidance - managing industrial action
- Smarter Working Programme
- Insurance (including contingencies for Academy Schools)

LINE 3

- ICT Business Continuity Plans / Disaster Recovery Plans
- Well-being provision (e.g. Remote Chaplaincy)
- Corporate Business Continuity Exercise Zepto (March 2018)

Additional controls & actions required:

Action	Timescale	Action owner
Further development of BC Plans and Business Impact Analyses	Continuous	Critical Services Plan authors
Continual review of Business Continuity Plans for all critical services by plan authors (including exercises)	Continuous	Critical Services Plan Authors

Agreed
Current Risk

L I

4	4
VH	

Agreed
Target Risk

L I

3	3
H	

5. Failure to deliver the transformation programme and maintain critical services

Risk Owner: Sue Milburn

Sources & triggers:

- Lack of funding to support delivery of the business cases
- Failure to comply with legislative requirements and changing demands placed on the Council by Government
- Short-term planning / inadequate horizon scanning - Uncertainty whether the transformation goals the organisation is aiming for need to be reconsidered as a result of Covid19
- Re-Direction of staffing resources to support delivery of critical services during the COVID-19 Emergency
- Undue pace of change
- Insufficient cultural change within the organisation
- Unanticipated major increase in organisational costs
- Unanticipated external costs
- Reduction in number and value of funding streams
- Suitability of ICT systems
- Insufficient staff capacity - Re-direction of staffing sources to support delivery of critical services during the Covid-19 emergency
- Failure to identify interdependencies and unintended consequences

Possible consequences:

- The pace of transformation is slowed while the Council deals with the emergency situation
- Transformation goals are out of step with what is needed in the post-Covid19 environment
- Poor performance
- Overspending
- Lack of robustness in budget monitoring systems
- Inability of the organisation to sustain critical services in the long term
- Loss of reputation
- Failure to recover capital receipts
- Failure to achieve savings expected to be delivered by transformation programme prior to COVID-19
- Failure to realise anticipated benefits of planned transformation programmes i.e. improvements to processes and other efficiencies.

Current controls & Mitigations:

LINE 1

- Established Transformation & Change Programme, incorporating KPIs, metrics, programme governance, reporting arrangements and reviews
- Medium-term financial strategy
- Appropriate project governance
- Regular reports to and monitoring by CLT, Transformation and Change Governance Group, Improvement & Change Sub-Committee and Finance & Major Contracts Management Committee

LINE 2

- Transformation & Change Team
- Project risk management processes
- Budget planning and control arrangements
- Effective, ongoing learning, contract management and rigorous management of pressures

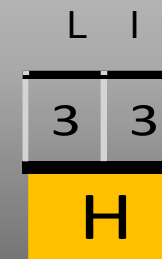
LINE 3

Internal Audit Review

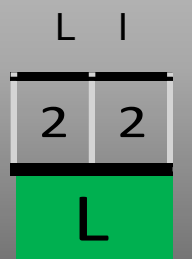
Additional controls & actions required:

Action	Timescale	Action owner
Review the current transformation & change programme for the post-Covid19 Council	July 2020	CLT, with support of Sue Milburn
Agree the organisation's response to Transformation and Change – October CLT, with Support of Sue Milburn.	October 2020	Sue Milburn
Review the objectives and timescales for the current engagement with the Council's external transformation partner	July 2020	CLT, with support of Sue Milburn

Agreed Current Risk



Agreed Target Risk



6. Failure to protect vulnerable children and young people

Risk Owner: Colin Pettigrew

Sources & triggers:

- Child death
- Allegations of historic abuse
- Child Sexual Exploitation
- Increasing demand for Children's Social Care and resulting in budget pressures
- Inappropriate case management/insufficient management control
- Failure to recruit and retain experienced / qualified staff and inability to redeploy non-critical staff and volunteer resources into critical service roles
- High levels of sickness absence – heightened due to Covid-19 Partners not working together effectively / lack of clarity between partners
- Insufficiently robust contract monitoring
- Poor data quality
- Data loss/leakage
- Social worker caseloads become too high
- Unreliable connectivity to ICT systems
- Lockdown period leads to reduced referrals of child safeguarding concerns which may be continuing – reduced visibility and reduced opportunity for children to self-refer
- Lack of care provision in schools for children of key workers
- Services moving to alternative delivery settings (changed premises, hub and spoke arrangements, staff based from home, etc)
- Changing threshold of service provision (e.g. MASH)
- Shortages of PPE
- Increased risk of domestic violence and risk to children
- Mental health and drug misuse
- Post-lockdown hidden harm and unmet need
- Impact of economic downturn
- Impact of Brexit on availability of care staff

Possible consequences:

- Harm to children, young people and families
- Serious Case & Domestic Homicide reviews
- Harm (including possible transmission of illness or disease to/from staff)
- Cost to the authority
- Cost to society
- Reputational damage to the authority
- Increased and / or inappropriate referrals into Children's Social Care
- Judicial review
- Litigation
- Failed inspections under regulatory framework

Current controls & Mitigations:

LINE 1

- a) Safeguarding policies / procedures / training (updated to reflect COVID-19 issues – includes details of latest guidelines and advice from Govt and professional bodies)

LINE 2

- a) Sufficient SW capacity, use of workload management tools. SW capacity also increased by return of Social Workers who have recently left the profession (including fast track DBS checking)
- b) Safer recruitment policy, tracking DBS renewals & HCPC regs
- c) Use of agency social workers - vacancies and long-term absences
- d) Development of recruitment and retention incentives - MFS and SWSO posts
- e) Advanced practitioner support
- f) Continued development of early help services to work alongside core child protection arrangements
- g) Robust QA Framework and review of performance data
- h) Emergency Residential Care arrangements have been applied to cover the COVID-19 period
- i) All cases have been risk assessed for COVID-19 implications
- j) Risk assessments have been completed in relation to COVID-19 as it affects staff and staffing
- k) HR working with agency managed service provider to maintain coverage if it is affected by Brexit .

LINE 3

- l) Most recent Ofsted inspection in 2020 was "Good"
- m) Introduction of new legislation relaxing administrative requirements in relation to adoption, in response to COVID-19.
- n) DfE introduction of helpline relating to education and social care
- o) Co-operation with, and participation in, the Independent Inquiry into Child Sexual Abuse
- p) Effective safeguarding arrangements and challenge via Local Safeguarding Children Board
- q) Well-established Pathway to Provision and Children's Trust

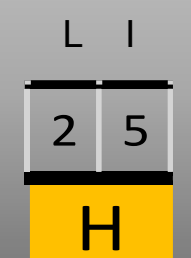
Additional controls & actions required:

Action	Timescale	Action owner
Closer alignment of the MASH (Multi Agency Safeguarding Hub) and the Early Help Unit	Monthly review	Steve Edwards
Ongoing work to manage caseloads and keep them at a manageable level	Monthly review	Steve Edwards
Continue to develop the integrated assessment framework and toolkit across children's services	Monthly review	Steve Edwards
Ofsted inspection action plan		

Proposed Current Risk



Proposed Target Risk



7. Failure to deliver an effective Medium-Term Financial Strategy

Risk Owner: Nigel Stevenson

Sources & triggers:

- Failure to create strategy - insufficient savings proposals identified
- Unbudgeted expenditure on emergency activities
- Reduced delivery of services to paying service users and customers
- Non-payment for services received by service users and suspension of debt recovery procedures
- Delay and/or suspension of transformation programmes
- Failure to approve budget proposals at Full Council meeting
- Failure to identify pressures / funding cuts in time to react
- Failure to monitor in-year budget effectively / understand cost drivers
- Failure to react to changes in Central Government Policy
- Failure to obtain necessary information from District Councils (tax base, NNDR)
- Significant levels of Council Tax non-payment, and business closures reducing NNDR payments
- Failure to complete Equality Impact Assessments
- Failure to consult on Budget proposals
- Key resources not being available
- Unreliable connectivity to ICT systems
- Lack of expert guidance due to high staff absence levels
- Government policy and requirements issued at short notice
- Failure to deliver capital receipts
- Accuracy of financial planning and budget monitoring
- Cash Flow Balances Fall below acceptable balances
- Financial policies plans, budgets, estimates and predictions based upon economic and financial situation prior to COVID-19 (including investment and pensions planning), with no consideration of the effects of post-COVID "new normal"
- New legislation - However, the enabling legislation 'fell away' in the run up to the June 2017 General Election and no new legislation is in the current Parliamentary timetable
- Failure to understand implications of proposed changes in needs assessment, mechanics of allocations and impact of additional responsibilities
- Government policy and requirements issued at short notice
- Failure to appropriately prepare for Brexit

Possible consequences:

- County Council General Fund balance falls below acceptable level
- Renegotiation of debt at higher rates
- Risk to services if sudden termination of services made without due planning (issues on meeting minimum statutory requirements)
- Risk of legal action if Council fails to deliver services or give due regard to impact
- Reputational issues / credibility of officers
- Short term decision making resulting in lack of investment in key areas
- Failure to meet statutory requirement in setting a balanced budget
- Financial policies could fail to meet the requirements of post-COVID-19 world.
- Adverse impact on structure of the Council
- Adverse impact on the MTFS

Current controls & Mitigations:

LINE 1

- CLT oversight of budget process, CLT briefings and peer challenge
- Regular Member briefings (Majority and opposition groups)
- Attendance at SCT and other confs / SCT Briefings / environmental analysis and other events
- Continual budget process with Elected Members
 - Regular Updates to Members and CLT

LINE 2

- Continual review of budget monitoring process and the effectiveness of the finance function
- Review of appropriate reserves levels
- Quality information for effective decision making at short notice
- Budget timetable with identified responsibilities
- Budget Consultation in progress
- Regular contact with District Councils
- Continual improvements in financial management across NCC
- Systems to ensure that the Council is fully aware of all the implications of the new financial arrangements for Local Government and takes appropriate action to plan for them, both politically and managerially
- Attendance at various MHCLG, LGA, CCN and relevant events
- Attendance at ACCE and SCT
- Keeping up to date on impact of other announcements on other changes to Business Rates
- Anthony May and Nigel Stevenson continue to be involved in working groups and conversations with MHCLG on this matter
- Brexit Risk Log in place and being updated

LINE 3

- Obtain external support where necessary
- Peer review has been completed
- CIPFA Financial Management Code
- Review by Internal Audit
- EU Exit Local Government Delivery Board
- East Midlands Chamber has established Brexit advisory group

Additional controls & actions required:

Action	Timescale	Action owner
Member of MHCLG/LGA led working groups	continuous	Nigel Stevenson
Active participation in consultations	Continuous	Nigel Stevenson

Agreed Current Risk

L	I
4	3
H	

Agreed Target Risk

L	I
4	3
H	

8. Prolonged loss of ICT

Risk Owner: Nigel Stevenson

Sources & triggers:

- Data Integrity Issues
- Security breaches - Systems attack (hacks, malware and viruses)
- Infrastructure failure (hardware or software)
- Inadequate ICT resilience
- Inadequate safeguards in respect of theft and unauthorised removal of ICT equipment
- Lack of resources due to high staff absence levels

Possible consequences:

- Loss of ICT:
 - i) systems
 - ii) data
 - iii) access/connectivity
- Inability to provide critical services systems
- Loss of reputation
- Loss of productivity

Current controls & Mitigations:

LINE 1

- a) ICT Security Strategy & info Sec Policies
- b) Corporate sign-off of critical systems
- c) Failover testing of power and infrastructure

LINE 2

- d) Business continuity arrangements for services
- e) Maintain fit for purpose ICT provision
- f) Ongoing infrastructure upgrade programme
- g) SLA for 99.8% availability for priority ICT systems
- h) Insurance
- i) Formal ICT change management process

LINE 3

- j) Annual network penetration testing and PSN audit
- k) Internal audit assessments and reviews
- l) Third party support contracts

Additional controls & actions required:

Action	Timescale	Action owner
Testing response to loss of ICT	Continual	RSEMB
Annual infrastructure refresh programme	Continual	Mark Davies
Annual PSN compliance checks and mitigating actions	Annual	Mark Davies

Proposed Current Risk

L I

2 4

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Proposed Target Risk

L I

2 2

L

9. Failure to respond effectively to a prolonged major emergency in the Community

Risk Owner: Derek Highton

Sources & triggers:

- Lack of care provision in schools for children of key workers
- Ineffective co-ordination with local, regional and national partner organisations
- Knock-on impact of capacity issues in other public services, such as NHS, prison service, probation, police, NFRS, etc
- Staff absence levels in critical service areas (such as the Customer Services Centre)
- Failure to plan for, support and stimulate recovery during and after the emergency
- Unreliable connectivity to ICT systems
- Lack of expert guidance due to high staff absence levels
- Government policy and requirements issued at short notice
- Major and prolonged flooding

Possible consequences:

- Illness / death of residents and visitors
- Loss of staff
- Diversion of resources to emergency response and recovery
- Infrastructure compromised
- Financial costs
- The emergency is prolonged in Nottinghamshire compared with swifter recovery in other areas of the country
- Loss of reputation
- Public inquiry
- Inability to respond and deliver business as usual

Current controls & Mitigations:

LINE 1

- a) Covid-19 Pandemic Plan
- b) Risk, Safety and Emergency Mgmt. Board and Groups
- c) Emergency Plans and the planning process
- d) Business Continuity Plans

LINE 2

- e) Business Plans
- f) Staff training at Strategic, Tactical and Operational levels
- g) Exercising of emergency plans
- h) County Emergency Centre / Comms systems

LINE 3

- i) Partnership working through the Local Resilience Forum
- j) LRF Community Risk Register
- k) Debriefing following significant emergency events
- l) Safety of Sports Grounds and Events Safety structures

Additional controls & actions required:

Action	Timescale	Action owner
Increase resilience through wider engagement with managers in all departments and ASDM	Review at RSEMB meetings	Rob Fisher
Maintenance of plans and preparations	Continual review	Rob Fisher
Emergency Planning training event for NCC Extended Leadership Team	To be advised	Rob Fisher

Agreed Current Risk

L	I
2	3
M	

Agreed Target Risk

L	I
2	3
M	

10. Failure to protect vulnerable adults at risk of harm

Risk Owner: Melanie Brooks

Sources & triggers:

- Inability to redeploy non-critical staff and volunteer resources into critical service roles
- Lack of sufficient PPE for staff working in frontline service roles
- Impact on population health of economic downturn, including worsening of health inequalities and the impact of self-isolation and social distancing on physical and mental health and wellbeing – smoking, alcohol, domestic violence, lack of physical activity
- Cashflow issues for external care providers struggling to meet additional funding requirements due to COVID-19, resulting in loss of providers and safeguarding issues
- Waiting list for DoLS assessments
- CQC instigated actions
- Inadequate funding arising from legislative changes
- Insufficiently robust quality monitoring of externally provided services
- Poor data quality
- Inability to protect residents against scams
- Coroners Enquiries
- Safeguarding Adults Reviews
- Failure of care providers to operate during the pandemic – due to absence of staff, lack of PPE, additional costs
- Public demand and expectations greater than NCC is able to deliver
- National Surveys
- Unreliable connectivity to ICT systems
- Lockdown period leads to reduced referrals of safeguarding concerns which may be continuing – reduced visibility and reduced opportunity for vulnerable adults to self-refer
- Lack of care provision in schools for children of key workers
- Services moving to alternative delivery settings (changed premises, hub and spoke arrangements, staff based from home, etc)
- Health and well-being of social care staff – social care staff found to be at greater risk of death involving coronavirus
- Changing threshold and focus of service provision
- Insufficiency of contract monitoring – management of the market
- Adult mental health and drug mis-use
- Post-lockdown hidden harm and unmet need
- Impact of economic downturn
- Carer absences
- Human Rights Breaches
- Failure to prepare appropriately for Brexit

Possible consequences:

- Death or harm to service user
- Inability to provide care services due to external service providers having insufficient funds to meet additional costs which could lead to safety and safeguarding concerns for both those in receipt of care and those providing it.
- Harm to staff
- Judicial review
- Litigation
- Loss of reputation
- Failed inspections
- Inability to deliver safeguarding services
- Risk to staff health and wellbeing

Current Controls & Mitigations:

LINE 1

- Safeguarding policies and procedures
- Scrutiny through Chairman's meetings and monthly ASC&PH Committee

LINE 2

- Additional Government funding to external providers, administered by the Council and LRF.
- Tracking, monitoring and distributing PPE where need identified
- Regularly reviewed and updated local guidance on the use of PPE
- Re-deployment pool, emergency training, daily capacity tracking introduced to address staffing issues
- Additional support and training for staff and independent sector providers
- Intranet updated to provide guidance for staff in relation to COVID-19, operating models and processes
- Quality Assurance
- Infection Prevention control training given
- Safeguarding partnership working
- HR working with agency managed service provider to ensure staff coverage if this is affected by Brexit

LINE 3

- Reporting to Department of Health and Social Care
- Trading Standards operations against criminality (managed via Place Dept)
- Safeguarding Board and partnership working
- Contract monitoring and market development
- Relationship with CQC/CCG quality monitoring of staff
- Register of Social Care Workers
- Multi-agency safeguarding Hub (MASH)
- Learning from Safeguarding Adults Reviews
- Vulnerable Persons Panels
- Performance Board
- DoLS Team

Additional controls & actions required:

Action	Timescale	Action owner
Oversight of COVID-19 response in care homes	June/July 2020	Melanie Brooks/ Jonathan Gribbin
Planning for increased demand in particular areas as lockdown measures are relaxed	June- Aug 2020	Melanie Brooks/ Jonathon Gribbin

Agreed Current Risk



Agreed Target Risk



11. Failure to maintain effective governance

Risk Owner: Marjorie Toward

Sources & triggers:

- Cancellation of committees leading to an inability to make prompt, open, transparent and effective decisions
- Increased use of urgent powers
- Disruption to the effective operation of the Corporate Leadership Team
- Disruption to the effective operation of the Risk, Safety & Emergency Management Board (RSEMB) and the Risk, Safety & Emergency Management Groups (RSEMGs)
- Suspension of, or significant change in functioning of, senior management team meetings (e.g. Senior Leadership Teams, Extended Leadership Team)
- Reduced capacity in core, support services due to staff absence levels and redeployment to critical services
- Disconnect or conflict between the priorities and objectives of Councillors and Senior Officers
- Ineffective communications with Nottinghamshire residents and businesses
- Lack of Openness and accountability for decision making
- Inability to make lawful and effective decisions and comply with Standing Orders and Standing Orders and Financial Regulations
- Failure to abide by legislation and best practice guidelines
- Open access for the public to meetings and records
- Inability to address FOI and DPA records and produce Data Subject Access Requests

Possible consequences:

- The operations and activities of the Council become unlawful
- Lack of effective strategic and operational direction
- Reputational damage
- Loss of confidence in the ability of the Council to maintain effective services
- Increased risk of unlawful expenditure and waste
- Reduced decision-making transparency (Note: Principle 10 of the COVID-19 Pandemic Plan is: 'The Council's democratic mandate must be exercised', 4.1, p. 9).

Current controls & Mitigations:

Line 1

- Five programmes of work established to manage the response to the emergency
- Committee Chairs and Corporate Directors review work programme for each Committee to identify important and urgent decisions required before the summer
- Policy Committee in place and meeting using virtual technology
- RSEMGs meeting weekly to manage continuity of critical services in line with business continuity plans
- Regular briefings by senior officers with the Council Leader and Committee Chairs
- CLT meeting daily; RSEMB meeting twice each week. RSEMB Chair advising CLT on a daily basis
- Capacity in frontline services secured through deployment within departments and recruitment of additional staff
- Regular briefings to staff by the Chief Executive
- Daily dashboard reporting for senior managers of frontline services to monitor capacity within critical services
- Communications strategy in place for the Council's stakeholders
- Urgent Decision procedures contained within the NCC Constitution set the parameters for the use of urgent decision-making powers and require record-keeping and reporting to relevant committees

Line 2

- CLT receiving situation reports from 2nd line assurers around governance?
- Legal and financial comments for briefings to Committee Chairs
- Quarterly updates to CLT of the Annual Governance Statement's Action Plan continue
- Daily dashboard in place for CLT to monitor staff capacity in critical services and across the Council
- Assurance mapping process in place, covering some key aspects of governance

Additional controls & actions required:

Action	Timescale	Action owner
Annual Governance Statement for 2019/20 being prepared in line with latest CIPFA guidance	June 2020	Rob Disney, Group Manager Assurance
Establish continuous assurance feed for key corporate systems and activities	May 2020	Rob Disney, Group Manager Assurance
Schedule regular, monthly review of the Corporate Risk Register by RSEMB	June 2020	Derek Highton, Chair of RSEMB
Review departmental risk registers for impact of Covid 19	June 2020	Rob Disney, Group Manager Assurance
Align assurance mapping with Corporate Risk Register	Summer 2020	Rob Disney, Group Manager Assurance

Proposed Current Risk

L	I
2	4
H	

Proposed Target Risk

L	I
1	4
M	