

Strategic Risk Register - Draft June 23

Corporate Plan Link:	Risk No.	Risk Description	Risk Owner (Director)	Inherent Risk Rating (Impact x Likelihood)	Residual Risk rating (Impact x Likelihood)	Target Score (Impact x Likelihood)	3 Lines of Assurance			Actions / Responsibilities / Timescales	Assurance Rating (RAG)
							1st Line	2nd Line	3rd Line		
							Day to day operations of internal control systems	Management oversight and monitoring controls	Independent assurance from internal / external audit and other assurance sources (OFSTED, CQC etc.)		
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	1	Financial Resilience The Council is unable to deliver its Medium Term Financial Plan. Failure to deliver services within available budgets and provide for future financial stability, including the maintenance of the Council's resource base and council tax collection and dealing with the current cost pressures and demand levels in Children's Services, combined with an uncertain macro economic outlook (inflation, cost of living, contracts linked to inflation, interest rate rises).	Ashley Hughes (Director of Resources)	25	25	6	Budget consultation framework, day to day internal budgetary control, approved Medium Term Financial Strategy and Treasury Management Strategy	Budget monitoring reports to SLT, Executive. Scrutiny of Budget. Consultation. Council approval of Budget. STAR chambers process in place	External audit financial statements (going concern opinion) CIPFA Financial management and Resilience Reviews. Internal Audit planned reviews 2023/24 of budgetary control, budget challenge, medium term financial planning, agency workers, direct payments	Spend control measures in place - SLT, March 2024 Medium Term Financial Strategy being drafted / refreshed - Director of Resources, July 2023 Delivery of budget 2023/24 - SLT March 2024 Early identification of savings required for 2024/25 as part of budget setting - SLT, October 2023	
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	2	Capacity Capacity of the workforce and/or the market is not sufficient to meet the Council's increasing demands, including notably external pressures arising from health and care systems.	SLT	20	16	12	Workforce and OD strategies. Appraisals and performance management. Joint working with partners in health. Day to day commissioning and contract management, supplier due diligence.	Monitoring of demand and the provider markets at strategic level, budget monitoring reports, forecasting future demand, market sufficiency plan (new and Published), market position statement (due). Oversight at SLT, Executive, Scrutiny, STAR Chambers	Monitoring of CQC and other inspection reports from providers, Planned 2023/24 Internal Audits of commissioning, strategic procurement, recruitment and retention.	Market Sufficiency plan published - March 2023 (national requirement), Market Position Statement on forward plan for Cabinet in Sept 2023 to support market shaping, regular visits from the Quality improvement Team to support prep for CQC and improve outcomes, weekly updates from Commissioning to Adults Leadership Team, regular Provider Forums, contract monitoring in place Tracey Harrison - AD Adults, Trevor Tench, March 2024	
Starting Well, Living Well, Ageing Well	3	Safeguarding Inability to maintain and demonstrate organisation-wide arrangements to safeguard children and vulnerable adults.	Alison Stathers-Tracey (Director of Childrens) Stephanie Butterworth (Director of Adults)	25	16	1	Day to day statutory performance of roles and assurances through DASS and DCS. Operations in Childrens and Adults services ensuring quality, i.e. staff supervision, training and development, prompt escalation of issues. Up to date policies and procedures. Recruitment to key posts, fit for purpose structures.	SLT, Cabinet and Scrutiny oversight. Monitoring of improvement plans by DFE Improvement Board, SLT, Executive, Scrutiny and Education Attainment and Improvement Board	Safeguarding boards (adults and children's), Regular OFSTED and CQC Inspections. Planned 2023/24 internal audits of schools, children's improvement planning	Improvement Plans to be delivered - Monthly update of Children's Improvement plan by Improvement Board & 6 monthly DfE Reviews, Alison Stathers-Tracey, Director of Children's, March 2024	

Starting Well	4	Adverse Inspection Results Failure to achieve good inspection results from external assessment agencies due to inadequacies in our service delivery e.g. OFSTED, CQC, LGA Peer Assessment	SLT	25	16	6	Day to day operations in Childrens and Adults services ensuring quality, i.e. staff supervision, training and development, prompt escalation of issues. Up to date policies and procedures. Recruitment to key posts, fit for purpose structures.	SLT, Cabinet and Scrutiny oversight. Monitoring of improvement plans by DFE Improvement Board, SLT, Executive, Scrutiny and Education Attainment and Improvement Board	OFTSED Inspection outcomes. Planned 2023/24 internal audit of schools, children's improvement planning. Monthly on site visits by DFE Improvement Advisor. External support from Salford & Stockport SLIP DfE & CQC monthly monitoring of WSOA. Re-inspection under the new January 2023 framework expected approx autumn 2024.	SEND Action plan delivery - Autumn2023/Winter2024. Improvement Plans to be delivered - Monthly update of Children's Improvement plan by Improvement Board & 6 monthly DfE Reviews, Alison Stathers-Tracey, Director of Children's, March 2024 Preparation for LGA Peer Assessment - Simon Brunet, Head of Policy, Performance August 2023	
Corporate Support and Enabling Services	5	Cyber Security Risk of a successful cyber-attack on the Council's infrastructure would have significant impact on the availability of all ICT systems over a sustained long-term period. This could impact some or all internally operated services and those consumed by our customers and residents. Data loss could also be a consequence.	Ashley Hughes (Director of Resources)	25	16	6	Day to day arrangements for information governance (including complaints, FOI's, SAR's), all staff training, policies and procedures, Data Protection Impact Assessments, breach procedure	Information Governance Group chaired by the Chief executive, summary reports to Audit Panel. SLT, Executive oversight.	Planned 2023/24 internal audit review of cyber security	Information Governance team work plan refresh, Interim Head of Assurance, September 2023 Cyber / Data Protection Training to Members, Risk & IG Manager, August 2023 NHS Data Security and Protection Toolkit assessment to be completed, Risk & IG Manager, July 2023	
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	6	Wider Socio Economic Environment - Cost of Living The risk that the Cost of Living crisis causes budget management pressures to Council Services, possible increases in community demand for health and social care services, and the detrimental effect to Tameside poverty levels and health.	Single Leadership Team	25	15	6	Day to day money advice support for residents, public health, day to day management of growth projects and inflationary pressures. Support in place via welfare rights/customer services advice re. debts, benefits and work. Poverty action plan with cross-directorate delivery. Council has voluntarily adopted the Socio-economic Duty.	Monitoring of exchequer collection rates. Poverty Strategy monitored via Health and Wellbeing Board. Poverty Sub group in place with Borough action plan and Poverty Monitor to identify data trends. Oversight by SLT, Executive and Scrutiny	Poverty Strategy implementation monitored via Tameside Health and Wellbeing Board. Planned 2023/24 internal audit review of place, major programmes (growth)	Poverty Strategy Action Plan sub group met 12th June and will meet monthly. Debbie Watson - Director of Population Health, March 2024	
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	7	Health & Social Care Reform Implementation of a GM Integrated Care System may increase the operational and financial risks of the Council and may delay our progress in implementing local strategies to improve population health outcomes.	Sandra Stewart (Chief Executive)	25	12	6	Day to day governance arrangements in place to support the next stage of health and social care integration.	ICS Board oversight	Planned 2023/24 audit of health and social care reform	TBC	
Great Place Inclusive Growth	8	Inability to Drive Growth Tameside is unable to exploit growth opportunities and this has a detriment to residents, local businesses and the borough's future prosperity.	Julian Jackson (Director of Place)	20	12	9	Day to day work to exploit growth opportunities and funding, strategic partnering. Implementing the inclusive growth strategy.	Oversight by SLT, Executive and Scrutiny	Planned 2023/24 internal audit review of Place -major projects and capital programme	The Council will continue to engage with all funding/investment opportunities working closely with the market, Julian Jackson Director of Place, March 2024 <u>Building a project pipeline of</u>	
Corporate Support and Enabling Services	9	Key Supplier / Partner Failure In current economic climate and /or cashflow issues, supplier failure may lead to disruption to services affecting our residents.	SLT	20	8	6	Day to day operations of procurement and commissioning teams, supplier due diligence, contract management register.	Oversight by SLT, Executive and Scrutiny	Planned 2023/24 internal audits of strategic procurement, commissioning	Development of business continuity arrangements for key supplier failure. ADDG, December 2023	

Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	10	Housing Supply Insufficient supply and range of available housing means that targets for affordable housing are not met and strategic priorities to ensure the needs of current and future residents of Tameside are not achieved, ultimately with more residents becoming homeless.	Julian Jackson Director of Place	20	8	6	Day to day implementation of housing strategy, homelessness provision.	Oversight by SLT, Executive and Scrutiny	Planned 2023/24 internal audit review of place, major programmes (growth)	Review of housing and homeless functions to create greater synergy / holistic offer. Place DMT, March 2024 Accessing GMCA and available government funding, Place DMT, March 2024	
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	11	Resilience Resilience of teams to respond to disruption to services (e.g. seasonal flu pandemics, industrial action), impacts ability to deliver priorities and safe services to residents; whilst also ensuring the safety and wellbeing of staff.	SLT	20	8	6	Tests of arrangements and lessons learned in place. Training. Monitoring of trends in public health outcomes and mortality via public health intelligence team and Health Protection lead. Operational oversight via Tameside multi-agency Health Protection Board.	Regular oversight of emergency planning by Chief Officers Group.	NW and national UKHSA Health Protection Surveillance	Business Continuity arrangements to be reviewed and plans implemented - Interim Head of Audit, September 2023 COVID/Flu group in place standing up for Winter planning mid July 2023	
Starting Well, Living Well, Ageing Well, Great Place Inclusive Growth	12	Climate Change The Council does not produce, or deliver on, a sufficiently ambitious plan to become zero carbon or implement measures effectively to adapt to the impacts of climate change on Tameside in the longer term (e.g. increased risks of extreme weather, flooding and heat).	Julian Jackson Director of Place	20	8	6	Specifically appointed climate change officer. Day to day implementation of the climate change strategy and action plan.	Oversight by SLT, Executive and Scrutiny of climate change strategy	LGA peer assessment - November 2023.	Strengthening climate change function (appointing a manager) and implementation of climate change strategy and action plan. AD Strategic Property, March 2024.	
Emerging Risks											