

People Scrutiny Commission

Supplementary Information



Date: Monday, 13 December 2021

Time: 5.00 pm

Venue: City Hall College Green Bristol BS1 5TR

a) Risk Report (Q1)

(Pages 2 - 15)

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Date: Monday, 06 December 2021



People Scrutiny Commission

13th December 2021



Report of: Risk and Insurance Senior Officer

Title: People - Risks on the Corporate Risk Management Report – Q1 2021/22

Ward: Citywide

Recommendation

For the People Scrutiny Commission to note the attached People Risks from Corporate Risk Management Report Q1 2021/22 and Appendix A – Risk Summary Report for People scrutiny commission that contains a summary of People risks contained within the Corporate Risk Report that went to Cabinet on 14th September 2021.



1. Policy

- 1.1. The Accounts and Audit Regulations 2015 require the council to have in place effective arrangements for the management of risk. These arrangements are reviewed each year and reported as part of the Annual Governance Statement (AGS). The Council is required to comment on the effectiveness of its arrangements in this regard. The statement must also identify any significant governance issues that may have resulted from failures in governance and risk management.
- 1.2. Risk Management is an integral part of good governance to which the Council is committed. Risk Management provides the framework and processes that enables the Council to manage uncertainty in a systematic way. As part of the Risk Management arrangements the Council reviews the Risk Management Assurance Policy on an annual basis.
- 1.3. It is considered good practice to regularly review and update the Risk Management Assurance Policy to ensure it strengthens the Council's approach to its risk management and assurance arrangements.
- 1.4. Ensuring that the Corporate Risk Report (CRR) is soundly based will help the council to ensure it is anticipating and managing key risks to optimise the achievement of the council's objectives and prioritise actions for managing those risks.
- 1.5. The CRR provides assurance to management and Members that the Bristol City Council's significant risks have been identified and arrangements are in place to manage those risks within the tolerance levels agreed.
- 1.6. The CRR is a management tool and needs regular review to ensure that the occurrence of obstacles or events that may put individual's safety at harm, impact upon service delivery and the council's reputation are minimised, opportunities are maximised and when risks happen, they are managed and communicated to minimise the impact.
- 1.7. The CRR has been prepared and presented in line with the Risk Management Assurance Policy that was approved by Cabinet in January 2019.

2. Consultation

Internal - First to fourth tier managers, Extended Leadership Team, Corporate Leadership Team, Cabinet Member, Finance, Governance and Performance.

External - None

3. Context

Corporate Risk Register (CRR)

- 3.1. The Corporate Risk Report (CRR) is a key document in the council's approach to the management of risk; it captures strategic risks set out in the Corporate Strategy 2018-2023. It also provides a context through which Directorates construct their own high-level risk assessments and is used to inform decision

making about business planning, budget setting, transformation and service delivery.

- 3.2. The CRR provides assurance to management and Members that Bristol City Council's significant risks have been identified and arrangements are in place to manage those risks within the tolerance levels agreed. It should be noted that 'risk' by definition includes both threats and opportunities, which is reflected in the CRR.
- 3.3. The Accounts and Audit Regulations 2015 require the council to have in place effective arrangements for the management of risk. These arrangements are reviewed each year and reported as part of the Annual Governance Statement (AGS). Ensuring that the Service Risk Registers (SRR), Directorate Risk Reports (DRR) and the Corporate Risk Reports (CRR) are soundly based will help the council to ensure it is anticipating and managing key risks to optimise the achievement of the council's objectives and prioritise actions for managing those risks.
- 3.4. The registers and reports are a management tool. They need regular review to ensure that the occurrence of obstacles or events that may put individual's safety at harm, impact upon service delivery and the council's reputation are minimised, opportunities are maximised and when risks happen, they are managed and communicated to minimise the impact.
- 3.5. The CRR summary of risks is attached to this report at Appendix A is the latest position following a review by managers and Directors.

Summary of People Corporate Risks:

- 3.6. The CRR sets out the critical, significant and high rated risks both threats and opportunities. All other business risks reside on the Service Risk Registers and reported through the DRRs.
- 3.7. The Q1 21-22 Corporate Risk Report (CRR) as at 30 June 2021 contained the following risks that are the responsibility of the People directorate:

| Threat Risks | Opportunity Risks | External / Contingency Risks |
|---|--|---|
| <ul style="list-style-type: none"> • 1 critical • 4 high • 1 medium • 0 new • 1 improving • 2 deteriorating • 0 closed | <ul style="list-style-type: none"> • 0 significant • 0 high • 0 medium • 0 new • 0 improving • 0 deteriorating • 0 closed | <ul style="list-style-type: none"> • 0 critical • 0 high • 0 medium • 0 new • 0 improving • 0 deteriorating • 0 closed |

- 3.8. A summary of risks (Threat and Opportunities) for this reporting period are set out below.
- 3.9. There is one critical threat People risks on the Corporate Risk Report – CRR9 Safeguarding Vulnerable Children
- 3.10. There is one improving threat risks – CRR42 Provision of Leisure Services.
- 3.11. There are two deteriorating threat risks – CRR9 Safeguarding Vulnerable Children and CRR23 Adult and Social Care (ASC) Transformation programme 2020/21 – 2021/2022.

3.12. All risks on the CRR have management actions in place.

3.13. It is not possible to eliminate the potential of failure entirely without significant financial and social costs. The challenge is to make every reasonable effort to mitigate and manage risks effectively, and where failure occurs, to learn and improve.

Risk Management Framework

3.14. Risk management is the culture, process and structures that are directed towards effective management of potential opportunities and threats to the council achieving its priorities and objectives and a key element of the council's governance framework. The Annual Governance Statement (AGS) declaration highlighted several opportunities to enhance Risk Management. Areas for improvement included:

- Increasing the level of engagement and ownership by Service Managers.
- Enhancing the engagement of Members in the risk management process.
- Engagement with the timeliness, completion, and accuracy of Service Risk Registers.
- Accuracy of Corporate and Directorate Risk Reports.
- Risk Management training and awareness.
- Risk Management within Decision Making, Business Case approvals, Project Management and Procurement Frameworks.
- Maintaining the focus of the process on reducing risk against the council's Corporate Plan 2018-23.

3.15. The risk management framework and process continues to be developed.

3.16. Upcoming plans for 2021/22 include:

- Risk data migration Q1 2021/21 and roll out of new system
- eLearning will roll out on the new Learning and Development platform which will be mandatory for key staff.
- Annual Risk Management Maturity Assessment.
- Approach to management of risk reporting to CLB.
- Reviewing and updating the Risk Management Assurance Policy.

4. Proposal

- People Scrutiny Commission receive and note the Risk Management update.
- People Scrutiny Commission review and comment upon the Corporate Risk Report (CRR) as a source of assurance that risk management arrangements are in place.

5. Other Options Considered

5.1. None necessary. Having robust risk management processes in place is a requirement of the City Council. The CRR has been developed in line with the Risk Management Assurance Policy.

6. Risk Assessment

6.1. The Risk Management Assurance Policy and the CRR will further develop risk

management assessment within the City Council, and help the management of risk arrangements embed.

7. Summary of Equalities Impact of the Proposed Decision

No Equality Impact anticipated from this report.

8. Legal and Resource Implications

Legal

Not Applicable

Financial

Not Applicable

Land

Not Applicable

Personnel

Not Applicable

Appendices:

Appendix A - Corporate Risk Report Resource Risks Only

LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

Background Papers:

Risk Management Assurance Policy.

Criteria

Corporate risk performance summary for threat risks

| Risk ID | Risk | Risk Owner | Quarter 1 Apr – Jun 20/21 | | Quarter 2 Jul - Sept 20/21 | | Quarter 3 Oct - Dec 20/21 | | Quarter 4 Jan - Apr 20/21 | | Quarter 1 Apr – Jun 21/22 | |
|---------|--|--|------------------------------|--------|-------------------------------|--------|------------------------------|--------|------------------------------|--------|------------------------------|--------|
| | | | Rating | Travel | Travel | Travel | Rating | Travel | Rating | Travel | Rating | Travel |
| CRR9 | Safeguarding Vulnerable Children | Executive Director People Director Children's and Families Services | 2x7=14 | ↔ | 3x7=21 | ↓ | 4x7=28 | ↓ | 3x7=21 | ↔ | 4x7=28 | ↓ |
| CRR10 | Safeguarding Adults at Risk with Care and support needs | Executive Director People Director Adult Social Care | 2x7=14 | ↔ | 3x7=21 | ↓ | 3x7=21 | ↔ | 3x7=21 | ↔ | 3x7=21 | ↔ |
| CRR23 | Adult and Social Care (ASC) Transformation programme 2020/21 – 2021/2022 | Executive Director People Director Adult Social Care | 2x5=10 | New | 2x5=10 | ↔ | 2x5=10 | ↔ | 2x5=10 | ↔ | 4x5=20 | ↓ |
| CRR42 | Provision of Leisure Centres | Executive Director People Director Public Health | | | | | | | 4x7=28 | New | 2x7=14 | ↑ |
| CRR39 | Adult and Social Care major provider/ supplier failure | Executive Director People Director Children's and Families Services | | | 2x7=14 | New | 2x7=14 | ↔ | 2x7=14 | ↔ | 2x7=14 | ↔ |
| CRR36 | SEND | Executive Director People Director Education and Skills | 2x5=10 | New | 2x5=10 | ↔ | 2x5=10 | ↔ | 2x5=10 | ↔ | 2x5=10 | ↔ |

Appendix A: Bristol City Council – People Risks from Q1 Corporate Risk Report (register of risk summary)
Criteria

Risk Scoring

| Corporate Risk Register as at June 2021 – Threat Risks to the achievement of Bristol City Councils Objectives. | | | | | | | | |
|---|--|--|---|--------|-------------|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | Likelihood | Impact | Risk Rating |
| <p>CRR9: Safeguarding Vulnerable Children. The council fails to ensure that adequate safeguarding measures are in place, resulting in harm or death to a vulnerable child.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> • Failure to meet the requirements of the Children Act and associated legislation. • Inadequate controls result in harm. • Demand for services exceeds its capacity and capability. • Increase in complex safeguarding risks, criminal exploitation, serious youth violence and gang affiliation. • During Covid-19, in line with Govt guidelines tiers, lockdown and infection control, there has been a reduction in the frequency of face-to-face visits to families. Since the last easing of restrictions on 12 April face to face visiting is now expected unless exceptional circumstances that are signed off by a Tier 3 manager. Risk assessments are required to assess whether a face-to-face visit is required. This is kept under review with services operating as near normal as is possible within the guidelines. • Placement failure due to COVID infection across children’s home or fostering household. • An increase in demand of up to 5% is anticipated because of Covid and economic downturn, with some children more vulnerable to exploitation and abuse as a result of lost safe, stable, and nurturing relationships. • Increased destitution in families, impacting on mental ill health, managing increased infection within children and young people population and their parents. | <p>We regularly analyse performance against key causes and report to Cabinet Members and Directors regarding safeguarding performance and progress. A children’s safeguarding assurance report updates senior leaders on a quarterly basis.</p> <p>The Keeping Bristol Safe Board provides independent scrutiny of children’s safeguarding arrangements in the city and holds BCC and partner agencies to account. This includes delivery of Safer Communities and the Prevent Duty.</p> <p>BCC works with partners to effectively identify victims and perpetrators of extra-familial abuse including Child Sexual exploitation, Criminal Exploitation and Serious Violence, taking action to disrupt and protect.</p> <p>Multi Agency Public Protection Arrangements are in place (MAPPA) with BCC contributors at every level to support family safeguarding.</p> <p>Additional capacity has been committed to the Local Authority Designated Officer for allegations against people who work with children.</p> <p>Bristol’s published policies and procedures, comprehensive training and development and monthly professional supervision help ensure safe practice and adequate control of risks. This is monitored and tested through a performance and quality assurance framework.</p> <p>September 2018 Ofsted ILACS single inspection identified that, ‘services have improved substantially for care leavers, children in care and children in need of help and protection’ and that ‘children identified as being at immediate risk of harm receive timely support and interventions.</p> <p>Bristol has invested in Early Help and targeted services through an integrated localities and team around the school and family approach. The aim is to meet the needs of children and families at the earliest point, build family resilience, reduce demand for specialist services and maintain capacity within the system.</p> <p>Children and Families’ Services invests in its workforce and has a career progression policy and workforce strategy focussed on attracting, recruiting, retaining, and developing excellent social workers. Senior leaders monitor social work vacancies and caseload levels to ensure the system operates as safely as possible for children and families. Competent agency social workers and managers are used on a temporary basis to fill vacancies.</p> <p>Information sharing protocols are in place with partners. Services take action to comply with GDPR (General Data Protection Regulation) where sensitive data is stored/processed.</p> <p>Children’s strategic commissioning team have a priority work plan in place and are working to increase placement sufficiency through regional framework arrangements. BCC commissioners work closely with operational services to identify need and ensure appropriate services are commissioned.</p> <p>Developed a dynamic multi agency sharing information hub (MASH) to enable information to be shared between agencies and risk for children identified at the earliest opportunity.</p> <p>Developed a Domestic Abuse daily triage with colleagues in Police, Nextlink and our IDVA’s to ensure support is provided at the earliest opportunity and timely referrals are made to First Response if appropriate. (FT)</p> | ↔ | 4 | 7 | 28 | 1 | 7 | 7 |
| Risk Owner: Executive Director People, Director Children’s, and Families Services. | Action Owner: Director Children’s and Families Services. | Portfolio Flag: Children and Young People. | Strategy Theme: Our Organisation, Empowering and Caring, Wellbeing. | | | | | |

Criteria

| Corporate Risk Register as at June 2021 – Threat Risks to the achievement of Bristol City Councils Objectives. | | | | | | | | | |
|--|---|---|--|--------|-------------|--|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | What we are doing | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | | Likelihood | Impact | Risk Rating |
| <p>CRR10: Safeguarding Adults at Risk with Care and support needs. The council fails to ensure adequate safeguarding measures are in place, Adults at risk.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> • Adequacy of controls. • Management and operational practices. • Demand for services exceeds capacity and capability. • Poor information sharing. • Lack of capacity or resources to deliver safe practice. • Failure to commission safe care for adults at risk. • Failure to meet the requirements of the ‘Prevent Duty’ placed on Local Authorities. • Increased destitution in families, impacting on mental ill health, managing increased infection within the population. (COVID19) • Increased isolation. (COVID19) • Capacity strain / resilience. (COVID19) • Absence of building-based services whilst we have reduced community solutions. (COVID19) | <p>Bristol has the Keeping Bristol Safe Partnership (KBSP), which covers Adult Safeguarding, Children’s Safeguarding and Community Safety. The Board has senior executive representation and ensures a strong focus on matters of strategic concern. The Keeping Bristol Safe Board provides independent scrutiny of adult safeguarding in the city and holds BCC and partner agencies to account. The Keeping Adults Safe board reports into the KBSP and has oversight of adult safeguarding priorities. KBSP business plan priorities are agreed and being actioned and regularly reviewed.</p> <p>The Adult Social Care Transformation programme has been established to implement policy objectives of delivering financial sustainability and ‘right positioning’ care delivery in the Bristol health, care, and wellbeing system.</p> <p>An active strategy is in place to attract, recruit and retain social workers through a variety of routes with particular emphasis on experienced social workers. Regular strategies and campaigns support the recruitment and retention of high calibre social workers and managers, with competent agency social workers and managers used on temporary basis to fill vacancies.</p> <p>All key staff working with people directly at risk are trained in the essentials of safeguarding and BCC has an ongoing awareness-raising ‘Prevent’ training programme.</p> <p>Community Finance Support Scheme meets regularly to respond to provide financial protection to adults with Care and Support needs who are unable to protect themselves and have no one willing or unable to act on their behalf.</p> <p>Annual report shared with Elected Members to allow for scrutiny of progress of the KBSP.</p> <p>The quality assurance and performance visits to teams</p> <p>Corporate safeguarding policy in draft and going to Cabinet to be agreed and signed off.</p> <p>Regular attendance at Channel, MARAC (Multi Agency Risk Assessment Conference) and Multi Agency Public Protection Arrangements are in place (MAPPA) with BCC contributors to support risk management.</p> <p>Safeguarding Discussion Forum set up to ensure complex or stuck cases are addressed in a timely manner.</p> <p>Improving Performance-Developed a new data collection with Power BI which is entering its testing phase.</p> <p>Focused work is being undertaken to address the backlog in safeguarding referrals due to reduced capacity and an action plan is in place. Agency staff agreed to increase capacity within the safeguarding adults team. Flow and capacity issues in the First teams have an action plan being constructed for sign off at Director level.</p> <p>Commissioning capacity has increased this to lead on monitoring and assuring quality in the care sector with clear links to adult safeguarding. Provider failure process is enacted to support and manage whole service risks.</p> <p>Corporate safeguarding policy in draft and going to CLB to be agreed and signed off procedures being written to accompany this for publication on the Source. Strategic Safeguarding Leads Group Meeting set up.</p> <p>Improving Performance-Developed a new data collection with Power BI which tested and is going live.</p> | ↔ | 3 | 7 | 21 | <p>Social workers and other social care practitioners are working with multi-agency partners supporting adults and older people to live safely within their families and communities.</p> <p>Planning placed based approaches to include working with micro providers.</p> <p>The Adults Delivery Group is up and running and a new Transitions theme has also been instituted. Whilst the Covid-19 situation has changed the complexion of adult safeguarding, it is anticipated that the likelihood and impact of incidence will be similar This is being monitored through Power BI and reported to DMT by exception.</p> <p>Services operating within Covid guidance and are provision a near to normal to pre Covid. Business Continuity response enacted to manage increased demand, potential gaps in workforce or services.</p> <p>Development and delivery of an Adults Multi-agency Safeguarding Hub as a priority for the partnership.</p> <p>Power BI data set being used to monitor performance, trends, timeliness alongside auditing.</p> | 1 | 7 | 7 |
| <p>Risk Owner: Executive Director People, Director Adult Social Care.</p> | <p>Action Owner: Director Adult Social Care.</p> | <p>Portfolio Flag: Adult Social Care.</p> | <p>Strategy Theme: Our Organisation, Empowering others and Caring, Fair, and Inclusive, Well connected, Wellbeing.</p> | | | | | | |

| Corporate Risk Register as at June 2021 – Threat Risks to the achievement of Bristol City Councils Objectives | | | | | | | | | |
|--|--|------------------------------------|--------------------|--------|-------------|--|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | What we are doing | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | | Likelihood | Impact | Risk Rating |
| <p>CRR23: Adult and Social Care (ASC) Transformation Programme 2020/21-2021/22</p> <p>Failure to deliver the required outcomes and savings from the ASC Transformation Programme.</p> <p>Key potential causes are:</p> <p>Wider factors impacting on demand.</p> <ul style="list-style-type: none"> Rapid increased demand and complexity due to COVID-19. Increase of needs due to more health services being delivered in the community without appropriate funding following the patient. Increased complex needs across our demographics that must be met under the Care Act. <p>Wider factors impacting on supply.</p> <ul style="list-style-type: none"> Financial pressures on an already vulnerable provider market during sustained changes forced on provider during COVID-19. Time to commission and embed alternative Tier 3 services as another option to traditional care homes, such as Extra Care Housing, supported Living, shared lives Time to commission and develop genuine step up/ step down alternatives to Tier 3 long term care (Home first, VCSE, reablement for all). Ability to joint fund this supply using the BCF with NHS (National Health Service) partners working in an Integrated Care System model. Ability to prioritise the programme under one city plans and to have the corporate support and investment needed alongside ASC staff to deliver on the proposed solutions | <p>New transformation programme board chaired by Cabinet Member for Adult Social Care with the Chief Executive and Executive Director and DASS meet monthly to keep the focus and impetus on the aims and objectives of the programme.</p> <p>A set of ASC POWERBI accelerators have been developed delivering a detailed understanding of activity and cost across the services delivered to support DMT in building the right solutions and having the evidence of the impact their decisions are having on service numbers and cost.</p> <p>Improving Pricing Control - Procured Care Cubed and written to providers to notify them that we will be negotiating rates based on the national care funding calculator. New processes are just being established for how care cubed will be used operationally.</p> <p>Improving Business Intelligence - ASC are leading the corporate objective to move our performance management onto PowerBI. Working with the Intelligent-I team the transformation team are creating a number of sophisticated ASC dashboards which will open ASC data to staff. Giving staff the tools, they need for proactive performance management to become everybody's business. Work is planned to be ongoing with intelligent-I until August.</p> <p>Improving ASC process issues - To drive the right behaviour, we are working on a new Standard Operating Process (SOP) which can start to address issues which promote poor outcomes or move service users into Tier 3 services too soon.</p> <p>Making change everybody's business - New 'change Agent' roles have been established across the business to champion change. The first task is to work directly on the SOP with support from senior staff and to report back on what needs to happen into DMT (Department Management Team) in June.</p> <p>Realignment of operations - Care management are currently going through a consultation with staff about the realignment of teams into the wider system 'Integrated Care Partnerships' (ICP) model for community health and care delivery. This will help ASC align closer to community health partners such as Sirona and Primary care Networks but also start to develop a more robust locality model offering a greater range of Tier 1 and 2 services working closely with the VCS.</p> <p>Inhouse services reviewed - ASC are working with Mutual Ventures to review our £15m of in-house service provision. Each service is unique and brings different benefits. We are looking to create future 'road maps' for each service that will then be taken through the key decision pathway to get authority to proceed with the modernisation of these services (report due in May)</p> <p>Business cases drafted -Two overarching business cases are being drafted for the department. One for older people (over 65) and one for adults with long term conditions (18-64). These contain the narrative about our priorities and the transformation we want to see.</p> <p>Dashboards created - The team have worked with commissioning and care management to pull out the top priorities for transformation work over the next 12 months. These will be shared with staff and be the golden thread for ASC that link the more detailed business cases to a clear set of actions. We have taken the programme into Exception in August due to COVID pressures and need for more dedicated capacity to be able to deliver the solutions set out in the programme.</p> | | | | | <p>The programme is currently undergoing a Deep Dive review by corporate services as the Transformation team have taken the programme into exception due to COVID pressures and the need for more dedicated resource and investment to address the more long-term strategic solutions.</p> <p>In the interim a number of immediate actions have been taken to address the budget pressures on ASC:</p> <ul style="list-style-type: none"> All new cases to be referred to Reablement before a longer-term package of care is agreed, increasing the amount of cost avoidance as a result of delaying or avoiding the need for more long-term care Brokerage to take up to 5 days to secure best value care packages (for non-urgent needs) Authorisation of high-cost packages: <ul style="list-style-type: none"> Additional scrutiny from Deputy Directors for Commissioning and Operations for all placements over £1000 SM to sign off and quality control of cases to be booked into Case Discussion Forum (including ensuring that practitioners have explored all alternative care options before referral to CDF) Prioritise reviews of all relevant packages that have been set up during COVID, with additional COVID related spend Increase referrals to the TEC team (based on specific targeted cohorts e.g. night time care in Supported Living) Single point of coordination for all CHC joint funded and single funded packages Ensuring that brokerage and commissioning staff work closely with Care Management when agreeing care packages, which will be further embedded when locality model is introduced (from September) | | | |
| Risk Owner: Stephen Beet | Action Owner: Stephen Beet | Portfolio Flag: Adult Social Care. | 4 | 5 | 20 | Strategy Theme: Our Organisation, Empowering others and Caring, Fair, and Inclusive, Well connected, Wellbeing. | 1 | 5 | 5 |

| Corporate Risk Register as at June 2021 – Threat Risks to the achievement of Bristol City Councils Objectives. | | | | | | | | | |
|--|---|---------------------------------------|---|--------|-------------|---|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | What we are doing | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | | Likelihood | Impact | Risk Rating |
| <p>CRR36: Failure to make sufficient progress against the findings from Ofsted’s 2019 inspection of SEND (Special Education Needs & Disability) leading to:</p> <ul style="list-style-type: none"> The OFSTED reinspection resulting in requirement for accelerated improvement plan worsening of parental confidence in Bristol’s SEND system and associated reputational damage / increased potential litigation / Judicial Reviews <p>Risks to delivery of the Ofsted approved recovery plan (March December 2019 to July 2021) forming the Written Statement of Action (WSOA) following the SEND local area OFSTED inspection in 2019 and subsequent action plans (2021 onwards).</p> | <p>Independently chaired SEND improvement Board meets bi-monthly to oversee improvement progress. Multi agency delivery group ‘SEND Partnership Group’ (SPG) includes social care, health, and schools meets monthly and reports to the improvement Board.</p> <p>Delivered the 1st phase of the SEND improvement journey through the Written Statement of Action to its formal conclusion in July 2021. 89% of July milestones were achieved or on track for the autumn. The 11% not achieved are all underway and have new timeframes agreed through the Local Area SEND governance arrangements. DFE monitoring of WsoA concluded and overall impressed with achievements and how well the council and its partners are working together to address all areas of weakness.</p> <p>Implemented quality assurance activity, including routine service user feedback and improved data capture and quality, enabling the development of robust data sets that have enhanced operational and strategic performance management and enabled better service planning to meet demand.</p> <p>Investment in key priority areas such as additional staff in statutory SEND and EP team. Re-structured and re-focused the work of the statutory SEND team. All EHCP systems and processes reviewed and remodelled with parent carers, including co-production of a new EHCP template and child centred model of assessment.</p> <p>Focused on early identification and intervention to reduce demand for statutory EHC Plans e.g. training and guidance for schools staff and leaders relating to their responsibilities for meeting the needs of children and young people with SEND.</p> | ↔ | 2 | 5 | 10 | <p>Developing the next iteration of the SEND action plan taking account of:</p> <ul style="list-style-type: none"> - other programmes of work / strategic developments and initiatives - the progress made and what still needs to be done to address the five significant areas of weakness identified in the SEND inspection - other areas for improvement identified through ongoing analysis of data and service user feedback. <p>Ongoing work with stakeholders and partners across the local area to continue to improve services and the service user experience.</p> <p>Ongoing governance and monitoring activity including Scrutiny. Inviting the DFE and NHSE advisers to continue to act as critical friends regarding progress made against the inspection findings and the new SEND action plan.</p> <p>Developing a service user engagement and co-production framework to align partnership activity, reach seldom heard voices and embed a sustainable BAU model of engagement and co-production at a strategic level.</p> <p>Preparing for the re-inspection which is likely to take place between Autumn – Spring 2021/22.</p> | 1 | 5 | 5 |
| Risk Owner: Hugh Evans, Alison Hurley | Action Owner: Alison Hurley | Portfolio Flag: Education and Skills. | Strategy Theme: Our Organisation, Empowering and Caring, Fair, and Inclusive, Well Connected, Wellbeing | | | | | | |

| Corporate Risk Register as at June 2021 – Threat Risks to the achievement of Bristol City Councils Objectives. | | | | | | | | | |
|---|--|---|--------------------|--------|--|--|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | What we are doing | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | | Likelihood | Impact | Risk Rating |
| <p>CRR39: Adult and Social Care major provider/ supplier failure Failures or closures in the supply chain mean insufficient supply to source adequate appropriate support and meet Care Act needs.</p> <p>Key potential causes could be as follows.</p> <ul style="list-style-type: none"> Major national care home provider goes into liquidation or starts to sell care homes. Major local provider/unable to meet demand due to recruitment / workforce/ or organisational issues. <p>Major providers become financially sustainable due to economic context. (COVID-19) Additional costs and pressures on market arising from additional impact on supply.</p> | <p>Multi agency support for providers to address impact of pandemic. Regular review of supply and sustainability issues part of weekly SITREP provided by commissioning. Strong contract and performance management including quarterly corporate reporting. Provider Financial sustainability process provides evidenced understanding of issues for strategically important providers. Work on managing market prices based on open book cost of care processes.</p> | ↔ | 2 | 7 | 14 | <p>Business cases reviewing appropriate investment to ensure supply key provision. Leading role in work across BNSSG re provider market. Support VCSE to work alongside formal supply.</p> <p>Timely distribution of Government funding (e.g., Infection Control Fund) and use of LA (Local Authorities) discretionary payments to support providers. Innovative use of Workforce Capacity fund to support bank staff project and wellbeing and resilience training for care workers, funding for Proud to Care projects.</p> <p>Continued and increased QA (Quality Assurance) team intervention and prevention work with providers. Fortnightly liaison meetings with CQC and CCG reps and closer working with neighbouring authorities. Fortnightly meetings with Care Provider association and key city providers to assess and plan risks to the sector and wider monthly provider forum.</p> <p>Review of Provider Financial Sustainability process- updating of paperwork and process more transparent and collaborative with providers as new factors emerging (e.g. rising insurance costs, Brexit). Updating of continuity plan and Provider Failure policy to address impact of pandemic.</p> | 2 | 7 | 14 |
| <p>Risk Owner: Executive Director People, Director Adult Social Care.</p> | <p>Action Owner: Director Adult Social Care.</p> | <p>Portfolio Flag: Adult Social Care.</p> | | | <p>Strategy Theme: Our Organisation, Empowering others and Caring, Fair, and Inclusive, Well connected, Wellbeing.</p> | | | | |

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|--|--|------------------------------------|--------------------|--------|----------------------------|--|----------------------|--------|-------------|
| Risk title and description | What we have done | Performance | Current Risk Level | | | What we are doing | Tolerance Risk Level | | |
| | | | Likelihood | Impact | Risk Rating | | Likelihood | Impact | Risk Rating |
| <p>CRR42: Provision of Leisure Services</p> <p>The ability to provide suitable leisure services to the Community of Bristol.</p> <p>Key potential causes are:</p> <ul style="list-style-type: none"> • Service closure due to Covid 19 • Procurement timescales | <p>We have carried out modelling to forecast the cost of maintaining the SLM leisure management contract once leisure centres re-open on the 12th April has a forecast deficit for April 1st 2021 to March 31st 2022 between £0.600m to £1,181m.</p> <p>Funding for the in-year cost pressure due to Covid has been identified and was approved by Cabinet in June to ensure continuation of provision up till March 2022.</p> | ↑ | 2 | 7 | 14 | <p>Finances are reviewed monthly to get actual figures.</p> <p>The design and procurement process and options are being scoped, including the investment strategy. This will be brought forward to Cabinet in September.</p> | 2 | 5 | 10 |
| Risk Owner: Executive Director People, Director Adult Social Care. | Action Owner: Director Public Health | Portfolio Flag: Adult Social Care. | | | Strategy Theme: Wellbeing. | | | | |

Risk Scoring Matrix

| | | Threat Impact (Negative risks) | | | | | Opportunity Impact (Positive Risk) | | | | | | |
|-------------------|----------------|-----------------------------------|------------|----------------|----------------|------------------|---------------------------------------|----------------|----------------|------------|---|----------------|------------------------|
| Threat Likelihood | Almost certain | 4 | 4 (Low) | 12 (Medium) | 20 (High) | 28 (Critical) | 28 (Significant) | 20 (High) | 12 (Medium) | 4 (Low) | 4 | Almost certain | Opportunity Likelihood |
| | Likely | 3 | 3 (Low) | 9 (Medium) | 15 (High) | 21 (High) | 21 (High) | 15 (High) | 9 (Medium) | 3 (Low) | 3 | Likely | |
| | Unlikely | 2 | 2 (Low) | 6 (Medium) | 10 (Medium) | 14 (High) | 14 (High) | 10 (Medium) | 6 (Medium) | 2 (Low) | 2 | Unlikely | |
| | Rare | 1 | 1 (Low) | 3 (Low) | 5 (Medium) | 7 (Medium) | 7 (Medium) | 5 (Medium) | 3 (Low) | 1 (Low) | 1 | Rare | |
| | | | 1 | 3 | 5 | 7 | 7 | 5 | 3 | 1 | | | |
| | | | Minor | Moderate | Major | Critical | Exceptional | Significant | Modest | Slight | | | |

Page 14

| Threat Level | Opportunity Level | Level of Risk | Actions Required |
|--------------|-------------------|------------------------|---|
| 1-4 | 1-4 | Low | May not need any further action / monitor at the Service level. |
| 5-12 | 5-12 | Medium | Action required, manage and monitor at the Directorate level. |
| 14-21 | 14-21 | High | Must be addressed - if Directorate level consider escalating to the Corporate Risk Report, if Corporate consider escalating to the Cabinet Lead. |
| 28 | 28 | Critical / Significant | Action required - escalate if a Directorate level risk, escalate to the Corporate Level, if Corporate bring to the attention of the Cabinet Lead to confirm action to be taken. |

Current and Tolerance risk ratings: The ‘Current’ risk rating for both threats and opportunities refer to the current level of risk taking into account any strategies to manage risk - management actions, controls, and fall-back plans already in place. The ‘Tolerance’ rating represents what is deemed to be a realistic level of risk to be achieved once additional actions have been put in place. On some occasions the aim will be to contain the level of the risk at the current level.

Positive Risks (Opportunities): Where the risk is an opportunity, a cost benefit analysis is required to determine whether the opportunity is worth pursuing, guided by the score for the matrix, e.g. an opportunity with a score of 28 would be pursued as it would offer considerable benefits for little risk.

LIKELIHOOD AND IMPACT RISK RATING SCORING

Likelihood Guidance

| Likelihood | Likelihood Ratings 1 to 4 | | | |
|-----------------------------|---------------------------------|--|--|--|
| | 1 | 2 | 3 | 4 |
| Description | Might happen on rare occasions. | Will possibly happen, possibly on several occasions. | Will probably happen, possibly at regular intervals. | Likely to happen, possibly frequently. |
| Numerical Likelihood | Less than 10% | Less than 50% | 50% or more | 75% or more |

Severity of Impact Guidance (Risk to be assessed against all of the Categories, and the highest score used in the matrix).

| Impact Category | Impact Levels 1 to 7 | | | |
|--|---|---|---|---|
| | 1 | 3 | 5 | 7 |
| Service provision | Very limited effect (positive or negative) on service provision. Impact can be managed within normal working arrangements. | Noticeable and significant effect (positive or negative) on service provision. Effect may require some additional resource, but manageable in a reasonable time frame. | Severe effect on service provision or a Corporate Strategic Plan priority area. Effect may require considerable /additional resource but will not require a major strategy change. | Extremely severe service disruption. Significant customer opposition. Legal action. Effect could not be managed within a reasonable time frame or by a short-term allocation of resources and may require major strategy changes. The Council risks 'special measures'. Officer / Member forced to resign. |
| Communities | Minimal impact on community. | Noticeable (positive or negative) impact on the community or a more manageable impact on a smaller number of vulnerable groups / individuals which is not likely to last more than six months. | A more severe but manageable impact (positive or negative) on a significant number of vulnerable groups / individuals which is not likely to last more than twelve months. | A lasting and noticeable impact on a significant number of vulnerable groups / individuals. |
| Environmental | No effect (positive or negative) on the natural and built environment. | Short term effect (positive or negative) on the natural and or built environment. | Serious local discharge of pollutant or source of community annoyance that requires remedial action. | Lasting effect on the natural and or built environment. |
| Financial Loss / Gain | Under £0.5m | Between £0.5m - £3m | Between £3m - £5m | More than £5m |
| Fraud & Corruption Loss | Under £50k | Between £50k - £100k | Between £100k - £1m | More than £1m |
| Legal | No significant legal implications or action is anticipated. | Tribunal / BCC legal team involvement required (potential for claim). | Criminal prosecution anticipated and / or civil litigation. | Criminal prosecution anticipated and or civil litigation (> 1 person). |
| Personal Safety | Minor injury to citizens or colleagues. | Significant injury or ill health of citizens or colleagues causing short-term disability / absence from work. | Major injury or ill health of citizens or colleagues may result in. long term disability / absence from work. | Death of citizen(s) or colleague(s). Significant long-term disability / absence from work. |
| Programme / Project Management <i>(Including developing commercial enterprises)</i> | Minor delays and/or budget overspend but can be brought back on schedule with this project stage. No threat to delivery of the project on time and to budget and no threat to identified benefits / outcomes. | Slippage causes significant delay to delivery of key project milestones, and/or budget overspends. No threat to overall delivery of the project and the identified benefits / outcomes. | Slippage causes significant delay to delivery of key project milestones; and/or major budget overspends. Major threat to delivery of the project on time and to budget, and achievement of one or more benefits / outcomes. | Significant issues threaten delivery of the entire project. Could lead to project being cancelled or put on hold. |
| Reputation | Minimal and transient loss of public or partner trust. Contained within the individual service. | Significant public or partner interest although limited potential for enhancement of, or damage to, reputation. Dissatisfaction reported through council complaints procedure but contained within the council. Local MP involvement. Some local media/social media interest. | Serious potential for enhancement of, or damage to, reputation and the willingness of other parties to collaborate or do business with the council. Dissatisfaction regularly reported through council complaints procedure. Higher levels of local or national interest. Higher levels of local media / social media interest. | Highly significant potential for enhancement of, or damage to, reputation and the willingness of other parties to collaborate or do business with the council. Intense local, national, and potentially international media attention. Viral social media or online pick-up. Public enquiry or poor external assessor report. |