

## **CABINET**

**22 NOVEMBER 2016**

# **6 MONTHLY REVIEW OF THE COUNCIL'S CORPORATE BUSINESS RISK REGISTER AND ANNUAL REVIEW OF THE STRATEGIC RISK FRAMEWORK**

Portfolio Holder: Councillor Rupert Turpin, Business Management

Report from: Richard Hicks, Director of Regeneration, Culture, Environment and Transformation - Chair of Strategic Risk Management Group

Author: Anna Marie Lawrence, Head of RCET Performance & Intelligence

### **Summary**

In accordance with paragraph 4.1 of the Council's Risk Management Strategy, this report is to discuss the 6 monthly review of the Council's Corporate Business Risk Register and the annual review of the Strategic Risk Framework.

The Cabinet is invited to consider this report, including the comments of the Business Support Overview and Scrutiny Committee which considered the report on 27 October 2016.

### **1. Budget and Policy Framework**

1.1 The Risk Management Strategy underpins all aspects of Council work and is fundamental to the Council Plan in terms of "giving value for money".

### **2. Background**

2.1 Risk management is an integral part of good governance. The council recognises that it has a responsibility to identify and manage the barriers to achieve its strategic objectives and enhance the value of services it provides to the community.

2.2 This Risk Management Strategy incorporates and:

- promotes a common understanding of risk;
- outlines roles and responsibilities across the council;
- proposes a methodology that identifies and manages risk in accordance with best practice thereby seeking to prevent injury, damage, loss and reducing the cost of risk.

- 2.3 The strategy is reviewed annually to ensure that it remains up-to-date and continues to reflect the council's approach to risk management.
- 2.4 The Corporate Risk Register, which accompanies the strategy, ensures that all relevant key risks are recorded and this is reviewed and managed every 6 months by both management and Members.
- 2.5 **The Corporate Risk Register** - was last reviewed by the Strategic Risk Management Group on 8 January 2016, Extended Management Team (EMT) on 27 January 2016, Business Support Overview and Scrutiny Committee on 14 April 2016 and Cabinet on 10 May 2016.
- 2.6 At that time the Cabinet agreed the following proposed amendments to the Council's Risk Register from Corporate Management Team:
- a) The narrative for Risk SR03b (Finances) has been amended.
  - b) SR17 Regeneration the new homes and population figures have been amended and an additional mitigating action of the Local Plan has been added.
  - c) Briefing notes on risk SR25.01 and SR26.06 have also been completed.
- 2.7 Extended Management Team (EMT) reviewed these amendments and additional proposals and changes to the Risk Register in Appendix A and B.
- 2.8 This included an additional risk of Welfare reform the risk is the responsibility of the Head of Finance.
- 2.9 **The Strategic Risk Framework** - was last reviewed by the Strategic Risk Management Group on 7 July 2015, Extended Management Team (EMT) on 22 July 2015, Business Support Overview and Scrutiny Committee on 8 October 2015 and Cabinet on 27 October 2015.

### **3. Advice and analysis Corporate Risk Registers**

- 3.1 Risk owners have reviewed their risks and updated them taking account of the amendments made on 10 May 2016. Strategic Risk Management Group reviewed these amendments on 22 July 2016 and Corporate Management Team 10 August 2016. July 2016 amendments to the Risk Register are detailed in Appendix A and B and are for consideration (additions/amendments are highlighted GREY).

### **4. Advise and analysis – Risk Management Strategy**

- 4.1 The Risk Management Strategy has completed its annual review. The following amendments have been made and were agreed by the Strategic Risk

Management Group on 22 July 2016 and Corporate Management Team on 10 August 2016:

- The document has been formatted i.e. front cover, contents page
- Minor amendments have been made to the wording
- Pictures have been updated to aid understanding
- At the request of the Portfolio Holder the risk matrix has been developed with descriptions for likelihood and impact
- Appendix D has been added to aid understanding of how risk is incorporated into the Councils governance arrangements

## **5. Advice and analysis – Risk Management Audit**

5.1 The operational risk management audit for 2014/15 was published on 1 June 2015. The conclusion of the audit was that the council was broadly compliant with the agreed strategic framework and therefore is **sufficient**.

5.2 There was one material recommendation for EMT to consider:

5.3 A) Service managers should be reminded of the importance of identifying risks to service objectives, and mitigating actions, during the service planning process, and that these should be recorded in the service plan.

5.4 B) Risks identified in service / divisional plans should be monitored, and updated if necessary, as part of the AD quarterly reporting process.

## **6. Consultation**

6.1 Risk owners have been consulted on the proposed amendments to the risk register. Strategic Risk Management Group on 22 July 2016 and Corporate Management Team on 10 August 2016 reviewed the amendments and revised framework. Members will be consulted on the Corporate Risk Register via Business Support Overview and Scrutiny on 27 October 2016 and Cabinet on 22 November 2016.

## **7. Business Support Overview and Scrutiny Committee – 27 October 2016**

7.1 The Committee commented as follows:

- **Risk SR26 (Children's Social Care)** – A Member commented that in his opinion the narrative did not recognise the current situation whereby budgets were being continually increased, followed by regular overspends.
- **Proposed new risk (Shape of Local Government in Kent)** – A Member referred to ongoing discussions about the shape and structures of local government in Kent. While this was probably a low risk, it was suggested that Cabinet consider adding it to the risk register given the inevitable impact on Medway.

- **Risk SR03b (Finances)** – referring to the risk surrounding the Council’s ability to deliver a balanced budget without recourse to reserves, a Member asked what actions were being taken to mitigate against this risk. The Chief Finance Officer replied that a number of mitigating actions were contained in the Medium Term Financial Plan, including the opportunities the digital transformation agenda would bring, addressing pressures in social care, alternative delivery models, income generation and property rationalisation. The details behind these would be reported through the budget setting process. In response, another Member queried the value of the risk management process if the information about what was being done to mitigate risks was held elsewhere. He suggested that a better approach would be to combine risks and mitigations in one place so that Members could see the current position regarding a risk, what was being done to mitigate it, what the timescales were and what the residual risk would be at the end of the process. The Chief Finance Officer commented that officers recognised this issue and were looking to embed financial risks into the corporate risk register so there was a more joined up approach to risk.

Referring to the budget setting process, a Member commented that a weakness of the system was that details of the budget were not made known to non-executive Members until too late in the process with the result that proper scrutiny was not possible and the budget was out of date and inadequate at the point it was agreed.

- **Risk SR25 (Adult Social Care Transformation)** – Noting the high risk rating for this, a Member queried whether the Council had the resilience or the capacity to deal with the Sustainability and Transformation Plan and the need to pool budgets and also commented that the details about mitigation seemed light.
- **Risk SR17 (Delivering Regeneration)** – A Member asked what the Council was doing to ensure there was sufficient affordable housing for workers in Medway. Reference was made to the recommendations from the Housing Task Group and it was noted that a report on progress in implementing these would be considered by the Committee in January 2017.

7.2 The Committee agreed to note the report and forward to Cabinet the comments made in respect of Risk SR26 (Children’s Social Care), Risk SR03b (Finances), Risk SR25 (Adult Social Care Transformation) and the suggested new risk regarding the shape of local government in Kent.

## 8. Director’s comments

8.1 In response to the comments of the Business Support Overview and Scrutiny Committee as set out above, advice from the Chair of the Strategic Risk Management Officer Group (who is the Director of Regeneration, Culture, Environment and Transformation) is as follows:

- **Risk SR26 (Children's Social Care)** - While pressures in children's social care continue, which impact on the placements and staffing budgets, the total spend is being controlled and the overspend is reducing (2015/16 outturn was £37.5m, latest 2016-17 forecast outturn is £36.2m). Thresholds are being closely monitored and the number of open cases is less than it was during 2015/16. Average monthly referrals in 2015/16 were 260 per month. For the first six months of 16/17 it has been 206 per month. As at the 31 March 2016, the caseload in children's services was 2210 cases. This has reduced to 1595 at the end of September 2016.
- **Proposed new risk (Shape of Local Government in Kent)** - There are currently no formal discussions about the shape of Kent that affect Medway and therefore this is not considered a risk at this time but will be monitored if any such discussions occur.
- **Risk SR03b (Finances)** – For Cabinet to note the Chief Finance Officer's comments made at the Business Support Overview and Scrutiny Meeting.
- **Risk SR25 (Adult Social Care Transformation)** – The Directorate's Partnership and Commissioning Service has been restructured to support the delivery of the Sustainability Transformation Plan (STP). In addition the Council have established a Programme Management Office to deliver the Adults Strategic Plan including the savings identified through the assessment. The alignment of the Adults Social Care Operational teams alongside those of the Hubs which are emerging through the STP will support the delivery of the changes required in relation to out of hospital care. Close negotiations in relation to the investments of the better Care Fund and the outcomes that have been achieved in relation to service transformation and efficiencies will inform future planning the pool budgets.

## **9. Financial, legal and risk implications**

- 9.1 This report brings forward the annual review of the Strategic Risk Framework and six monthly review of the Council's risk register, which is integral to the Council's approach to risk management.
- 9.2 There are no direct financial or legal implications arising from this report although clearly the inability to control or mitigate risks could have a financial or legal impact.

## **10. Recommendations**

- 10.1 The Cabinet is asked to consider the comments of the Business Support Overview and Scrutiny Committee, as set out in section 7 of the report.
- 10.2 The Cabinet is asked to approve the amendments to the Council's Risk Register as detailed in Appendices A and B to the report.

10.3 The Cabinet is asked to approve the revised Strategic Risk Framework, as set out in Appendix D to the report.

## **11. Suggested reasons for decision**

- 11.1 The establishment of a corporate framework for risk management is recommended by CIPFA and SOLACE and will complement and support the work already being carried out within each directorate to manage risks.

### **Lead officer contact**

Anna Marie Lawrence: Head of RCET Performance & Intelligence

Ext 2443 /email [annamarie.lawrence@medway.gov.uk](mailto:annamarie.lawrence@medway.gov.uk)

**Appendices:** Appendix A – Corporate Record of Amendments  
Appendix B – Corporate Risk Register  
Appendix C – Current Strategic Risk Framework  
Appendix D – Revised draft Strategic Risk Framework

### **Background papers**

None





## SUMMARY OF CORPORATE RISK REGISTER – RECORD OF AMENDMENTS

Risk Ref	Rating Jul 14	Rating Jan 15	Rating Jul 15	Rating Jan 16	Rating Jul 16	Move ment	Risk Description	Owner	Portfolio Holder	Link to Corporate Priority	Link to Corporate Commitment
3b	AI	AI	AI	AI	AI	→	Finances	Chief Finance Officer	Alan Jarrett	Giving value for money	Ways of working
26	AII	AII	AII	AII	AII	→	Children's Social Care	Director Children and Adults Services	Andrew Mackness	Supporting Medway's People to Realise Their Potential	All children achieving their potential in schools
9b	BII	BII	BII	BII	BII	→	Keeping vulnerable young people safe and on track	Director Children and Adults Services	Andrew Mackness Martin Potter	Supporting Medway's People to Realise Their Potential	All children achieving their potential in schools
25	BII	BII	BII	BII	BII	→	Adult Social Care Transformation	Director Children and Adults Services	David Brake	Supporting Medway's People to Realise Their Potential	Older & disabled people living independently
27	CII	CII	CII	CII	CII	→	Government changes to Local Authority's responsibility for schools	Director Children and Adults Services	Andrew Mackness Martin Potter	Supporting Medway's People to Realise Their Potential	All children achieving their potential in schools
17	CII	CII	CII	CII	CII	→	Delivering Regeneration	Director Regeneration, Culture, Environment & Transformation	Rodney Chambers	Maximise Regeneration and Economic Growth	<ul style="list-style-type: none"> <li>A strong diversified economy</li> <li>Residents with jobs and skills</li> <li>Delivering new homes to meet the needs of Medway's residents</li> <li>Getting around Medway</li> </ul>
21	CII	CII	CII	CII	CII	→	Procurement and Tendering	AD Legal and Corporate Services	Adrian Gulvin	Giving value for money	Ways of working
2	DII	DII	DII	DII	DII	→	Business Continuity & Emergency Planning	Director Regeneration, Culture, Environment & Transformation	Rupert Turpin	ALL	ALL
32			DII	DII	CII	→	Data and Information	AD Legal and Corporate Services	Adrian Gulvin	Giving value for money	Ways of working
33				DII	DII	→	Impact of Welfare reform	Chief Finance Officer	Alan Jarrett	Supporting Medway's People to Reach Their Potential and Giving Value for Money	Ways of working



CORPORATE RISK REGISTER

RISK MATRIX - STRATEGIC PROFILE FOR JULY 2016

↑ Likelihood	A			26	3b
	B			9b, 25	
	C			17, 27, 21	
	D			2, 32, 33	
	E				
	F				
		IV	III	II	I
	Impact	→			

**Likelihood:**

- A Very high
- B High
- C Significant
- D Low
- E Very low
- F Almost impossible

**Impact:**

- I Catastrophic (Showstopper)
- II Critical
- III Marginal
- IV Negligible

## CORPORATE RISK REGISTER

SR 03b	Finances	Owner	Chief Finance Officer	Leader's Portfolio	Current Risk Score	A	I	Reviewed	July 2016
<b>Link to Corporate Priority</b>		<b>Giving Value for Money</b>							
<b>Vulnerability</b>			<b>Trigger</b>		<b>Consequences</b>				
<p>There continues to be a major risk over the Council's ability to deliver a balanced budget without recourse to reserves, whilst at the same time delivering good quality services to the people of Medway.</p> <p>The move away from central support from Government and greater reliance on local taxation through council tax and retained business rates, whilst providing local authorities with the opportunity to benefit directly from growth, also brings with it significant risks to overall funding.</p> <p>Continuing pressure in the area of social care, particularly in relation to children and younger people with disabilities, has exacerbated the financial difficulties facing the Council.</p>			<p>The provisional settlement announced on 17 December, indicated reductions in Revenue Support Grant of 85% for Medway over the next four years and was reasonably consistent with the assumptions made in the Medium Term Financial Plan, which forecast a 'gap' of around £40 million by 2019/20.</p> <p>This may to some extent be mitigated by the ability to raise a further 2% pa from council tax via the 'social care precept' and in future years by the opportunity offered from 100% retention of business rates, however this reliance on local taxation for the majority of its revenue funding also exposes the local authority to significant risk.</p>		<input type="checkbox"/> Very difficult decisions around funding allocation <input type="checkbox"/> Service cuts <input type="checkbox"/> Quality of service compromised. <input type="checkbox"/> Cutback in staffing on an already lean organisation <input type="checkbox"/> VFM Judgement <input type="checkbox"/> Negative local publicity. <input type="checkbox"/> Damage to reputation.				
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring			
SR 03b.01	Need to ensure effective response to the spending review, but also lobbying for greater local powers to raise revenues.	Chief Finance Officer	Co-ordinate responses with members, brief MP's, agree media campaign, solicit support from peer authorities/partnerships.	VFM Judgement - adequacy of financial planning, effective budget control. Increased devolution of tax raising powers to the Council.	On-going	Six monthly			
SR 03b.02	Align priorities and activity of the Council to resource availability through MTFP process.	Corporate Management Team	Co-ordinate responses with members, agree media campaign, solicit support from peer authorities and partners.	VFM Judgement - adequacy of financial planning, effective budget control, balanced budget and adequacy of reserves.	Medium Term Financial Plan in September. Capital and revenue budget agreed by Council in February	Quarterly budget monitoring			
SR 03b.03	Create resources for investment priorities.	Corporate Management Team	- Track funding opportunities - Maximise asset values for disposal - Consider prudential borrowing	- External investment - Asset release - Revenue cost associated with prudential borrowing.	On-going	Six monthly			

## CORPORATE RISK REGISTER

SR 26	Children's Social Care	Owner	Director of Children and Adults	Children's Services (Lead Member) Portfolio	Current Risk Score	A	II	Reviewed	July 2016
Link to Corporate Priority		Supporting Medway's People to Realise Their Potential							
Vulnerability			Trigger		Consequences				
<p>The continuing A high level of historical demand for services for children in need, including the need for protection and looked after children puts pressure on the Council's resources.</p> <p>Increased Expectations by Regulator in relation to standard of care and provision provided across a range of services.</p> <p>Challenges in recruiting to key posts would impact on the Council's ability to deliver good quality and consistent practice.</p> <p>Improvements to Children's Social Care services will continue to require corporate support and there is a risk that a lack of organisational capacity and resilience may slow progress.</p>			<p>Numbers of children in care and those with high level child protection needs increase do not reduce.</p> <p>Increased Managing high caseloads impact on quality of work being undertaken with children in need, including the need for protection and looked after children.</p> <p>Partner agencies not fulfilling their role in supporting the most vulnerable failing to identify families that need targeted support through the early help outcomes framework.</p>		<ul style="list-style-type: none"> <li>- Budget pressures with consequences across the Council.</li> <li>- Limits ability to divert resources to early help which ultimately must be part of the solution to increasing numbers of looked after children and preventing children and young people from becoming subject to child protection plans.</li> <li>- Poorer outcomes for children and young people.</li> <li>- Impact on statutory responsibilities and regulatory judgement.</li> </ul>				
Code	Description	Managed By	Desired Outcome	Output	Milestones/Pis	Monitoring			
SR 26.01	Recruitment & retention & workforce development strategy for children's social workers developed implemented.	Children's Service Social Care (AD DD); Human Resources Service Team	Well trained & supported workforce.	Permanent staff numbers.	As per strategy and plan.	Reviewed bi monthly via Medway Safeguarding Children's Board (MSCB). Council Plan monitoring and CADMT.			
SR 26.02	Implement improvement plan strategy for action in response to Ofsted recommendations to strengthen quality of practice.	Children's Service Social Care (AD DD)	Improved outcomes for vulnerable children.	<ul style="list-style-type: none"> <li>-Reduced drift</li> <li>-Less children subject to CP plans for 2 yrs plus</li> <li>-Improved educational outcomes for LAC -Voice of child clear and heard.</li> <li>Reduction in timescale between placement order and moving in with adoptive family</li> <li>Effectiveness of early help</li> </ul>	<ul style="list-style-type: none"> <li>Children subject to CP plan 2 yrs plus.</li> <li>Educational outcomes LAC.</li> <li>Reduce delays in care proceedings.</li> <li>Percentage of families who have had a CAF/Early help Assessment, who have achieved desired outcomes at end of their intervention.</li> </ul>	CSCMT, Council Plan monitoring, CADMT & Corporate Parenting Board and MSCB			
SR 26.04	Implementation of the Children's Social Care Quality Assurance	Deputy Interim Director for Children and Adults	Good quality and consistent practice.	Learning and thematic Audits and other quality assurance tasks are completed as per the QA framework.	The learning points from completed auditing activity are aggregated so as to	Reviewed bi monthly in line with QA framework schedule			

## CORPORATE RISK REGISTER

Code	Description	Managed By	Desired Outcome	Output	Milestones/Pis	Monitoring
	Framework				inform learning.	
SR 26.05	Strengthen MSCB.	Interim Director of Children and Adults	Strengthened partnership arrangements for supporting vulnerable children.	Stronger focus on core business.	Multi agency attendance at CP conferences.	CADMT & MSCB
SR 26.06	Implementation of projects to better manage demand around edge of care and early help.	Partnership Commissioning (AD), Children's Services Social Care (AD DD)	Safely reduce C&YP entering and staying in the care system.	Edge of care response. Early help.	Reduced demand for CSC services.	Council plan monitoring CSCMT, CADMT, and MSCB

## CORPORATE RISK REGISTER

SR 09b	Keeping vulnerable young people safe and on track	Owner	Director of Children and Adults	Children's Services (Lead Member) Portfolio Educational Attainment and Improvement Portfolio	Current Risk Score	B	II	Reviewed	July 2016
Link to Corporate Priority		Supporting Medway's People to Realise Their Potential							
Vulnerability			Trigger		Consequences				
Changes in the demographics and in the legislative requirements affect SEN and YOT.			The Council is unable to address these issues with cost effective, innovative solutions.		<input type="checkbox"/> Poorer outcomes for children and young people. <input type="checkbox"/> Budget pressures with consequences across the Council. <input type="checkbox"/> Impact on statutory responsibilities and regulatory judgement.				
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs		Monitoring		
SR 09b.04	The additional demands of the SEND reforms and increase in the number of children with complex needs and those excluded from school place significant pressures on the DSG High Needs Block	School Effectiveness and Inclusion (AD)	Improved outcomes for C&YP as per strategy.  Ensuring service delivered within budgetary constraints.	Good management information to inform commissioning and robust challenge. Provision made within budget. SEN Strategy developed and implemented.	Less out of area SEN placements; more children being educated in mainstream schools with outreach; Increased local specialist provision.		SEN data is reviewed quarterly.		
SR 09b.05	Ensure practitioners are equipped to be compliant with changes in the Youth Justice system and that monitoring systems are in place to track this. <del>Development of intensive interventions that can be used as an alternative to custody – DfE bid submitted to research needs and most effective interventions to support young people on edge of offending.</del> Alternatives to custody being developed and the functional family therapy (FFT) work. YOT will be outsourced from Jan 2017 with other IYSS programmes.	School Effectiveness and Inclusion (AD)	- Lower numbers of first and repeat entrants to the YJS. - Lower number of custodial and repeat custodial sentences. - Effective analysis of data to inform practitioners input. - Ensuring service delivered within budgetary constraints. - Magistrates have confidence in interventions. Suitable placements are developed for vulnerable children which keep them safe and enable magistrates to impose an order as an alternative to secure remand.	Performance is monitored monthly (proxy figures) and quarterly (YJB information) 4: 1 meetings with Head of Service; business case for preventative support. YOT Board meets quarterly to oversee provision, steer development and monitor progress.	Grant provided by MoJ for developing alternatives to custodial remand is used effectively for innovative support and budget not exceeded by custody bill.  Successful bid to DfE.  Needs assessment was completed.  We currently have an intern working with the Council to specify different alternatives to custody. That piece of work will be completed by end of April.  New provider appointed with experience and /or understanding of youth offending arrangements and		The improved outcomes, confidence of YJB and partners, and the security of the monitoring arrangements by the YOT management board indicate a strong service which can respond to any expected changes. Consequently, it is recommended that this risk be removed from the register  New provider held accountable through YOT Board run by Council		

## CORPORATE RISK REGISTER

Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring
					effective delivery	Contract subject to quarterly monitoring.
SR 09b.06	<p>A comprehensive strategy in place to ensure that partner agencies work cooperatively to identify and deal with CYP who are identified as, or at risk of becoming, victims or perpetrators of CSE and missing.</p> <p>All professionals, voluntary groups and the wider community including hard to reach groups are aware of, and have an understanding of CSE and missing.</p> <p><del>Establishment of CSE Unit alongside police – multi agency co located to manage CSE in Medway</del></p> <p>Implement findings of review of CSE unit.</p>	<p><del>Deputy Director, Interim Director</del> Children &amp; Adults</p>	<p>- Ensure that we have a comprehensive strategy in place for CSE and missing.</p> <p>- All professionals working directly with CYP have an understanding and knowledge of CSE and missing; and develop appropriate skills.</p> <p>- Increase the awareness and understanding of CSE and missing by all professionals, voluntary groups, wider community including hard to reach groups.</p> <p>Improvement of identification, prevention, support disruption and prosecutions</p> <p>Development of a reliable multi-agency data set.</p>	<p>Comprehensive joint K &amp; M LSCB strategy for CSE has been signed by the MSCB and missing protocols in place via CSC</p> <p>Multi agency and single agency approved consistent training is completed by all staff.</p> <p>All child protection courses make direct reference to CSE and missing</p> <p>Awareness raising campaign agreed and implemented.</p> <p><del>Co location of social worker managed by CSE Operational lead within co location with police MASE Group and Risk management panel</del></p>	<p>The K &amp; M CSE strategy has been reviewed and recommendations operationalised. Any review will be signed by the MSCB in the forward plan</p> <p>All relevant staff complete available CSE training.</p> <p>Case management systems capable of recording CSE cases.</p> <p>Analysis and identification of victims through data analyst within CSE Unit; social work pathways for identified victims; themes and early identification to safeguard young people in Medway</p>	<p>Kent &amp; Medway CSE Subgroup MSCB MASE Panel (Strategic)</p> <p>MSCB/Workforce development</p> <p>P &amp; I /CSC AD</p> <p>MSCB MASE</p>
SR 09b.07	<p>A comprehensive strategy in place to ensure that partner agencies cooperate to identify and deal with CYP who are identified as, or at risk of becoming, victims or perpetrators of CSE, missing, have been radicalised or are at risk of radicalisation.</p> <p>Other professionals and community groups have an understanding and an awareness of the Governments Prevent agenda</p>		<p>An area wide group – Community Safety Partnership, Medway YOT Board and MSCB - co-ordinates and monitors Prevent work.</p> <p>Vulnerable young people are safeguarded and risks to the community are minimalized</p> <p>Medway agencies share information on vulnerable young people at risk of radicalisation.</p>	<p><del>Prevent training and awareness is provided to all key staff, schools and governors.</del></p> <p>Child Protection courses cover the risk of radicalisation</p> <p>Community groups are offered training to raise awareness of the Prevent agenda and to identify young people who might be at risk of radicalisation.</p>	<p>- <del>By December 2015</del></p> <p>- From January 2016</p> <p>- From January 2016</p>	<p><del>By YOT Board of Community Safety Partnership and MSCB</del></p> <p>MSCB</p> <p>MSCB</p>



## CORPORATE RISK REGISTER

SR 25	Adult Social Care Transformation	Owner	Deputy Director, Interim AD Children's & Adults Social Care	Adult Services Portfolio	Current Risk Score	B	II	Reviewed	July 2016
Link to Corporate Priority		Supporting Medway's People to Realise Their Potential							
Vulnerability			Trigger		Consequences				
<p>The local population of older people and disabled adults is increasing significantly - Joint Strategic Needs Analysis, POPPI and PANSI intelligence.</p> <p><del>New responsibilities for the LA resulting from the Care Act will increase pressure on Adult Social Care services.</del></p> <p>The ambition of the Better Care Fund (BCF) is to describe Medway's potential for the integration of Adult health and social care and then to deliver the agreed integration.</p> <p>The achievement of these ambitions represents a significant challenge to the local authority and our health partners (The Council only controls a small proportion of the system, alongside the CCG and Medway Foundation Trust). The development and delivery of the Kent and Medway Sustainability and Transformation Plan may have an impact on our ability to ensure better out of hospital care and improved integration.</p> <p>There is a risk that the changes needed across the system will take longer to implement than our current ambitions state. The transformation of Adult Social Care will continue to require corporate support and there is a risk that a lack of organisational capacity and resilience may slow progress.</p>			<p>Demographic impact.</p> <p><del>Care Act implementation in April 2015.</del></p> <p>The current timeframe for BCF is to have described the roadmap for integration by 31 March 2017. In addition there are national ambitions for further integration by 2020.</p> <p>Whilst the overall national ambition for integration remains same, the priorities and timescales for delivery within that overall ambition may shift at a national level. Uncertainty around national policy and budget in relation to integration/NHS/Council</p>		<p>Potentially significant increase in spend on Adult Social Care.</p> <p>Potential impact on ASC resources.</p> <p>Potential risk around supporting wider health economy.</p>				
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs		Monitoring		
SR 25.01	<p>Personal Budgets giving people more choice and control.</p> <p>Commissioning sufficient capacity and a suitably wide</p>	<p><del>Deputy Director, Children &amp; Adults</del> Interim AD Adults Social care  Assistant Director</p>	Best outcomes for people (as per their support plans) and best value for the Local Authority as statutory body and commissioner.	<p>All clients are offered Personal Budgets/Direct Payments.</p> <p>Joint strategies and commissioning plans with NHS.</p>	<p>Personal Budgets performance as per KPI.</p> <p>Category Management project on high cost placements.</p>		<p>Monthly.</p> <p>As per star chamber and procurement forward plan.</p>		

**CORPORATE RISK REGISTER**

Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring
	<p>range of services to meet need.</p> <p>Prevention, including technology enabled care services, early help and rehabilitation short term services to maximise independence.</p> <p>Close management oversight, and action as required, to manage the budget. Short term management actions are being taken to reduce any overspend.</p> <p><del>New responsibilities arising from Care Act, for example, providing assessments and services for carers and self funders.</del></p>	Partnership Commissioning	A safe and stable local sector of providers that can meet our local needs and provide high quality care and support to older people, disabled adults and carers.	<p>The Provider Forum engages the sector and assists us to work in partnership in a meaningful and effective way.</p> <p>ASC Strategy and associated key projects.</p> <p>Monthly scrutiny of budgets at AMT and audits of practice and Personal Budgets/Direct Payments. Management action as required.</p> <p><del>Implementation of Care Act changes.</del></p>	<p>End of year spend within budget.</p> <p>Programme developed and underway.</p> <p>Dynamic Purchasing System.</p> <p>Increase the number and effectiveness of reviews.</p> <p>Reduction in delayed transfers of care</p>	<p>Monthly at AMT and quarterly at CADMT.</p> <p>Adult Social Care Improvement Board.</p> <p>Gateway process as per procurement forward plan.</p> <p><del>Council plan monitoring – implementation of Care Act is a key project.</del></p>

## CORPORATE RISK REGISTER

SR 25.02	<p>Deprivation of Liberty Safeguards (DoLS) post Cheshire West judgement, resulted in a rapid increase in the number of applications for DoLS, challenging several parts of the system – administration, Best Interest Assessors, Advocacy services.</p> <p>Risk of legal challenge and breaching statutory timeframes.</p>	<p><del>Deputy Director, Interim Director</del> Children &amp; Adults</p>	<p>People in a care home or hospital are not deprived of their liberty illegally.</p>	<p>DoLS applications to Medway as a Supervisory Body are processed and assessments carried out within timeframes.</p> <p>Establish DoLS Review Group to examine processes, digitization and other workflow improvements.</p>	<p><del>Setting up of Medway DoLS office – complete.</del></p> <p><del>Communication to care homes and other relevant settings to ensure compliance with the Mental Capacity Act 2005.</del></p> <p><del>Recruitment and training of the required number of Best Interest Assessors.</del></p> <p><del>Reduction in the number of DoLS cases awaiting authorisation</del></p>	<p>Breaches monitored weekly.</p> <p>Updates to AMT.</p> <p><del>DoLS Review Group report to CADMT.</del></p> <p>DH Quarterly monitoring report.</p> <p>DH annual statutory return.</p>
SR 25.03	<p>Risk that the introduction of the Care Act 2014 will result in a significant rise in the cost of provision and implementation costs from April 2020. Still too early to tell what impact will be on current social care budgets or plans.</p>	<p>Deputy Director for Children and Adults</p>	<p>To be care act compliant in line with national timescales.</p>	<p>Introduction of a cap on the costs of care, means testing and new appeals process</p>	<p>Phase 2 of Care Act from April 2020 <b>Note:</b> The original implementation date for phase 2 was April 2016. The Care and Support Minister announced in July 2015 that the cap will now be delayed until April 2020. Full modelling and financial implications have not yet been undertaken. The final statutory regulations and guidance are not however expected until October 2015.</p>	<p>We have undertaken an initial impact assessment of the effects of the Care Act, are carrying out further financial modelling and will continue to refine our assumptions as we develop our final Better Care Fund response.</p>
SR 25.04	<p><del>Shifting of resources to fund new joint interventions and schemes might destabilise current service providers, particularly in the acute sector</del></p> <p>To work with Health colleagues to develop a vision for integration at a Medway level.</p>	<p>Assistant Director, Partnership Commissioning</p>	<p>To describe Medway's potential for integration by nationally set timeframes</p>	<p>Working closely with MFT and CCG to bring in agreed programmes that will manage the channel-shift process</p>	<p>To describe the route-map for integration by 31 March 2017 <b>Note: We are working to national timescales that are currently under review and the council is one third of the triangular partnership so not able to exercise overall control.</b></p>	<p><del>A Transition Plan will be developed and implemented with Medway NHS Foundation Trust to ensure areas of concern are identified early and appropriate actions implemented in a timely fashion.</del></p> <p>Contingency plans</p>

CORPORATE RISK REGISTER

						put in place Joint Commissioning Management Group (JCMG) and Health and Wellbeing Board
SR 25.05	Operational pressures on the workforce will restrict the ability to deliver the required investment and associated projects to make the vision of care outlined in our Better Care Fund submission a reality, including workforce recruitment, skills analysis and change management. To ensure that all integrated commissioning e.g. Home First and Intermediate Care does not put a pressure on ASC budget and workforce	Assistant Director, Partnership Commissioning	A review of the services within the "ring-fenced" / pooled budget will identify those services that require additional resource, additionally it will identify those services not performing or where need has moved forward.  Efficiencies are achieved across ASC as well as health	The ambition for the partnership for 2016 and beyond needs to be developed in line with rapidly changing needs, central policies (yet to be formalised) and available resources.  Delivery of Integrated Commissioning activity.	To describe the route map for integration by 31 March 2017. <b>Note: We are working to national timescales that are currently under review and the council is one third of the triangular partnership so not able to exercise overall control:</b> New intermediate care service in place from 1st October. Reduction in number of intermediate care beds. Reduction in delayed transfers of care	Our 2014 schemes include specific non-recurrent investments in the infrastructure and capacity support of the overall organisational development including workforce.  CADMT and JCMG

SR 27	Government changes to Local Authority's responsibility for schools	Owner	Director of Children and Adults	Children's Services (Lead Member) Portfolio Educational Attainment and Improvement Portfolio	Current Risk Score	C	II	Reviewed	July 2016
Link to Corporate Priority		Supporting Medway's People to Realise Their Potential							
Vulnerability			Trigger		Consequences				
<p>Councils are accountable for the outcome of performance of all schools but have reduced levers to drive action and change. In academies the only lever is to refer the school to the Regional Schools Commissioner. In maintained schools, poor inspection judgements or coasting schools are expected to be subject to intervention by the Regional Schools Commissioner. The Government's expectation is for all schools in special measures to become academies</p> <p>The OFSTED school inspection framework replaces 'satisfactory' with 'requires improvement'. Any school with 2 consecutive 'requires improvement' will be in a category.</p>			<p>A failing OFSTED inspection for a maintained school for which the Council has a statutory responsibility or a coasting judgement on the basis of pupil progress.</p>		<ul style="list-style-type: none"> <li>- Impact on children and families of being in a school that fails to provide quality provision.</li> <li>- Performance ratings as measured through Ofsted reports and Performance tables impact on parental and community confidence.</li> <li>- Financial consequences.</li> <li>- The DfE will expect that the school becomes a sponsored academy with further financial consequences to Medway including an expectation that the LA pays the legal costs for the transfer and writes off deficits.</li> <li>- Damage to reputation.</li> <li>- Impact on statutory responsibilities and regulatory judgement.</li> <li>- Progress and progression for children &amp; young people are</li> </ul>				

## CORPORATE RISK REGISTER

				impacted negatively.		
Code	Description	Managed By	Desired Outcome	Output	Milestones/Pis	Monitoring
SR 27. 01	Analysis of school data is used to agree a school partnership rating so that appropriate support can be put in place. Analysis of academy data is used to refer an academy to the regional Schools Commissioner	School Effectiveness and Inclusion (AD)	Schools results in line with or exceed nationally expected progress measures.	<ul style="list-style-type: none"> <li>- School Challenge and Improvement Team support schools to identify actions needed to improve pupil progress.</li> <li>- Data shows progress to be in line with similar schools nationally and then to be in upper quartile.</li> <li>- Implementation of School Improvement Strategy.</li> </ul>	<ul style="list-style-type: none"> <li>- Number of schools below floor threshold reduces</li> <li>- Number of schools in an OFSTED category reduces and remains low.</li> <li>- Number of coasting schools is low</li> </ul>	<p>RAMP meetings with head and Chair of Governors.</p> <p>CADMT performance reports.</p> <p>Council Plan monitoring.</p> <p><del>School Effectiveness Strategic Board.</del></p>
SR 27.02	The proportion of schools in Medway with an OFSTED judgement requires improvement (3) is currently higher than national; and the proportion of schools with good and outstanding judgements is currently lower than national.	School Effectiveness and Inclusion (AD)	Schools move up from requires improvement to Good and from Good to Outstanding.	<ul style="list-style-type: none"> <li>- Core SCI training developed and delivered in a targeted way.</li> <li>- OFSTED preparation in place for Senior Leadership Team (SLT) and Governors.</li> <li>- NLES and LLEs linked to schools to give additional experience to draw on for delivering good and better practice.</li> <li>- Work closely with the teaching school alliances to develop leadership and improve the quality of teaching across subject areas.</li> </ul>	OFSTED judgements place more schools in the Good or Outstanding categories.	<p>SCI team meetings.</p> <p>OFSTED liaison and monitoring.</p> <p>CADMT performance reports.</p> <p>Council Plan monitoring.</p> <p><del>School Effectiveness Strategic Board.</del></p>

## CORPORATE RISK REGISTER

SR 17	Delivering regeneration	Owner	Director of Regeneration, Culture, Environment & Transformation	Inward investment, strategic regeneration and partnerships Portfolio	Current Risk Score	C	II	Reviewed	July 2016
Link to Corporate Priority		Maximise Regeneration and Economic Growth							
Vulnerability			Trigger		Consequences				
<p>Medway's regeneration plans to regenerate the area with 50,000 people to Medway up to 20,000 jobs and 29,000 new homes in the next 20 plus years.</p> <p>There are challenges for the provision and maintenance of effective infrastructure. Particular areas of concern are flood protection, highways and water capacity.</p> <p>It is vital the benefits are felt by the population of Medway, so that the new jobs are not filled by only people from outside the area.</p> <p>Economic uncertainty could delay regeneration and growth, impacting on strategic decisions and inward investment.</p>			<p>The Council fails to achieve the economic, social and infrastructure regeneration agenda.</p> <p>House/property building companies start to delay developments.</p> <p>Potential lack of companies wanting to locate in Medway.</p>		<input type="checkbox"/> Regeneration projects not completed. <input type="checkbox"/> Potential damage to Council's reputation. <input type="checkbox"/> Not able to meet member, government and the public's expectations. <input type="checkbox"/> Deteriorating physical and infrastructure assets. <input type="checkbox"/> Investment wasted. <input type="checkbox"/> Young people are not catered for in the 'new world'. <input type="checkbox"/> Low skills base among some residents remains. <input type="checkbox"/> Disconnect between skills and employment opportunities. <input type="checkbox"/> Maintenance of low aspiration culture. <input type="checkbox"/> Increased commuting and pressure on transportation. <input type="checkbox"/> Negative impact on community cohesion.				
Code	Description	Managed By	Desired Outcome	Output	Milestones/Pis	Monitoring			
SR 17.01	Outline infrastructure needs identified.	Director of Regeneration, Culture, Environment & Transformation	Identification of inward investment priorities.	Progressing key regeneration sites and infrastructure plan jointly with KCC.	- Generation of funds to carry out the work and investors confidence; - 20 year development programme.	Quarterly			
SR 17.02	Homes and Communities Agency (HCA) alerted to the impact of lack of funding and dialogue opened with External Partners.	Director of Regeneration, Culture, Environment & Transformation	HCA confirm any funding commitment to projects and plans for HCA sites	Funding identified to continue regeneration.	Regeneration projects agreed with Members.	Quarterly			
SR 17.04	Regular meetings with stakeholders including developers to lever in external funding and bring forward transformational programmes.	Director of Regeneration, Culture, Environment & Transformation	External financial arrangements to fund transformational programmes and deliver plans that are implemented on time and to budget.	Investors come forward for regeneration sites.	As detailed in individual delivery plans.	Quarterly			

## CORPORATE RISK REGISTER

Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring
SR 17.05	Working with the Local Enterprise Partnership to attract funds to Medway.	Director of Regeneration, Culture, Environment & Transformation	External financial arrangements to fund transformational programmes and deliver plans that are implemented on time and to budget. Create and protect long-term jobs in the private sector, and programmes which will deliver sustainable jobs.	<u>Growing Places Fund (GPF)</u> : £4.4m Rochester Riverside; £2.99m Chatham Waterfront. £4m for Strood Flood Defences £29m Local Growth Funding from the Local Enterprise Partnership.	As detailed in individual delivery plans.	Quarterly
SR17.06	Working towards the adoption of the new Medway Local Plan	Director of Regeneration, Culture, Environment & Transformation	New Local Plan and Planning Policy Guidance adopted	To complete the development of the Local Plan and Planning Policy Guidance as outlined in the Local Development Scheme published 2015	<ul style="list-style-type: none"> <li>• Preferred options consultation completed in Jan/Feb 2016</li> <li>• Publication Nov/Dec 2017</li> <li>• Submission March 2018</li> <li>• Anticipated adoption Dec 2018</li> </ul>	Development Plans Advisory Group Meetings
SR17.07	To seek additional external funding opportunities	Assistant Director Physical and Cultural Regeneration	Ensuring Medway's Regeneration programme is delivered.	Additional funding streams identified and secured.	<ul style="list-style-type: none"> <li>• To seek funding opportunities to develop innovative public service solutions</li> <li>• Facilitating the delivery of the Inward Investment Strategy by March 2017</li> <li>• Encouraging the delivery of homes through investigation of new financial models and release of Council owned sites.</li> </ul>	Council Plan Qtr monitoring

## CORPORATE RISK REGISTER

SR 21	Procurement and Tendering savings – capacity and delivery	Owner	Legal and Corporate Services (AD)	Resources Portfolio	Current Risk Score	C	II	Reviewed	July 2016
Link to Corporate Priority		Giving Value for Money							
Vulnerability			Trigger		Consequences				
<p>Strategic Sourcing Plans and standard procurements do not realise the savings predicted and included in budget projections.</p> <p>Contracts are not appropriately and consistently managed such that the potential for regular reviews and annual reductions are not taken.</p> <p>Inability to continue identifying contract and commissioning savings.</p> <p>Agreed contract and commissioning savings identified in the budget are not delivered.</p> <p>Insufficient capacity to deliver savings to the agreed timetable</p>			<ul style="list-style-type: none"> <li>- Budget pressures</li> <li>- Audit reviews reveal weaknesses.</li> <li>- Market inflationary pressure on prices</li> </ul>		<ul style="list-style-type: none"> <li>- Council does not achieve value for money.</li> <li>- Damage to reputation.</li> <li>- Increased costs of purchasing services.</li> <li>- Not achieving cost efficiencies.</li> <li>- Overspend on budget allocation.</li> <li>- Failing to achieve Members' expectations.</li> </ul>				
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring			
SR-21.01	Member chaired Procurement Board with the Council's Monitoring Officer responsible for the strategic procurement direction that meets every four weeks.	Legal and Corporate Services (AD)	To deliver the Procurement Strategy.	Procurement Board meets every four weeks.	On-going.	Every four weeks.			
SR-21.02	Forward Procurement Plans in place for each category theme (people, place and corporate).	Category Management	Timely commencement of procurement ensuring contracts are in place.	Plans monitored by the Procurement Board every four weeks.	Taken over by Category Management team after "go-live" in December 2012.	Every four weeks.			
SR-21.03	Strategic Sourcing Plans which are agreed with the relevant service and monitored regularly.	Category Management	Predicted savings that are sensible and achievable and the ability to take alternative action if under performance occurs.	Regular savings reports to the Portfolio Holder and to the Finance team.	Completed and due to be monitored in 2015/16.	Procurement Board strategic oversight with Category Management team day-to-day management.			
SR-21.04	Building capacity in contract management including the	Category Management	Good regular engagement with suppliers. Regular	Identification of contract management savings.	Commenced and to be reported throughout 2015/16.	Portfolio Holder strategic			



## CORPORATE RISK REGISTER

	use of external support.		discussions about performance and savings.			oversight with Category Management team day-to-day management.
SR 21.01	Cabinet and Corporate Management Team joint review of agreed budget savings and timetable	Chief Finance Office Chief Legal Officer	To deliver budget savings to an agreed timetable	Budget quarterly monitoring	Budget out-turn	Regular
SR 21.02	Member chaired Procurement Board which meets regularly	Chief Finance Officer Chief Legal Officer & Category Management team	Timely delivery of procurement ensuring mobilisation of contracts and delivery of savings	Procurement Board governance reports Forward Procurement Plans Commissioning team plans	Budget savings	Regular
SR 21.03	Regular updates to Leader and other relevant Portfolio Holders	Chief Finance Officer Chief Legal Officer Partnership Commissioning (AD)	Predicted savings that are sensible and achievable and the ability to take alternative action if under performance occurs.	Regular savings reports to the Portfolio Holder and to the Finance team.	Due to be monitored throughout 2016/17.	Regular
SR 21.04	Good liaison between Category Management team and Joint Commissioning team and other Council teams	Chief Legal Officer Partnership Commissioning (AD)	Good regular engagement with teams. Regular discussions about performance and savings.	Procurement Board reports Procurement Board governance report Updates to Cabinet/CMT Agreed programme of commissioning procurements	Due to be monitored throughout 2016/17.	Regular
SR21.05	Good liaison with suppliers to continue to identify realistic savings.	Chief Legal Officer Partnership Commissioning (AD)	Good regular engagement with suppliers. Regular discussions about performance and savings.	Contract management data	On-going	Regular

## CORPORATE RISK REGISTER

SR 02	Business continuity and emergency planning	Owner	Director of Regeneration, Culture, Environment & Transformation	Business management (cross cutting) Portfolio	Current Risk Score	D	II	Reviewed	July 2016
Link to Corporate Priority		ALL							
Vulnerability			Trigger	Consequences					
<p>Duties under the Civil Contingencies Act require councils to have an Emergency Plan. The Emergency Management and Response Structure may not be robust enough to respond to a major emergency.</p> <p>Every business activity is at risk of disruption from a variety of threats, which vary in magnitude from catastrophic through to trivial, and include pandemic flu, fire, flood, loss of utility supplies and accidental or malicious damage of assets or resources.</p>			A significant adverse event occurs and the Council is found wanting or negligent in its planning and/or operational response	<input type="checkbox"/> Response to event is not rapid, adequate nor effective. <input type="checkbox"/> Lack of clear communication lines <input type="checkbox"/> Essential service priorities not clearly understood. <input type="checkbox"/> Communication between agencies and the public is poor. <input type="checkbox"/> Residents expect more from their Council <input type="checkbox"/> Local press quick to seize issue. <input type="checkbox"/> Comparisons made with other local authorities and resilience groups <input type="checkbox"/> A death, or deaths, in the community <input type="checkbox"/> Legal challenge under the 'Civil Contingencies Act 2004'					
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring			
SR 02.01	Continue to develop the Council's Emergency Plan.	Director of Regeneration, Culture, Environment & Transformation	<ul style="list-style-type: none"> <li>- Revised plan agreed by CMT</li> <li>- Continued engagement with Kent Resilience Forum</li> <li>- Staff trained in emergency response management</li> </ul>	<ul style="list-style-type: none"> <li>- Existing plan in place - Programme of on-going review of COMAH plans - Emergency response operations room in place.</li> </ul>	<ul style="list-style-type: none"> <li>- Draft plan update in place.</li> <li>- Relevant staff training during 2015.</li> </ul>	On-going			
SR 02.02	Business continuity plans completed to implement the actions.	Director of Regeneration, Culture, Environment & Transformation	All services will have an up-to-date and tested Business Continuity Plan.	<ul style="list-style-type: none"> <li>- BCM Policy agreed.</li> <li>- BCM principles and project aims communicated to divisional management teams across the Council.</li> <li>- A Corporate Recovery Plan.</li> <li>- IT Recovery Plan in place.</li> <li>- Draft flu plans in place.</li> <li>- Winter preparedness plans in place.</li> </ul>	Plans tested.	Quarterly reports to Strategic Risk Management Group			

## CORPORATE RISK REGISTER

SR 32	Data and Information	Owner	Legal and Corporate Services (AD)	Resources Portfolio	Current Risk Score	D	II	Reviewed	July 2016
Link to Corporate Priority		Giving Value for Money							
Vulnerability			Trigger		Consequences				
<p>Moves to implement the Digital Strategy with innovative collaborations about "Big Data" open the Council to increased information risk particularly regarding personal and health data.</p> <p>Conversely not sharing information with partners and others minimises the Council's ability to improve service delivery and reduce costs.</p>			<ul style="list-style-type: none"> <li>- Budget pressures</li> <li>- ICO Audit reveals areas for improvement</li> <li>- Digital Strategy</li> <li>- Big Data project with academics</li> </ul>		<ul style="list-style-type: none"> <li>- Data loss leads to damage to reputation.</li> <li>- Not achieving cost efficiencies through Digital Strategy changes</li> <li>- Failing to achieve Members' expectations.</li> <li>- Failing to find new innovations</li> </ul>				
Code	Description	Managed By	Desired Outcome	Output	Milestones/PIs	Monitoring			
SR32.01	Digital Strategy Officer Board includes the Senior Information Risk Owner	Legal and Corporate Services (AD)	To ensure that appropriate safeguards are in place for sharing information.	Privacy Impact Assessments (PIAs) ISAs and Standards Operating Procedures (SOPs) detailing roles and responsibilities.	On-going.	Regular			
SR32.02	Information Sharing Agreement (ISA) for Kent	Legal and Corporate Services (AD)	Provides the basis for ISAs within Kent organisations and outside	PIAs, ISAs and SOPs and where appropriate Data Licence Agreements.	On-going	Kent ISA reviewed annually			
SR32.03	Security and Information Governance Group	Legal and Corporate Services (AD)	Providing a corporate overview of all information risk across projects and initiatives	Minutes of SIGG meetings attended by representatives from Public Health, RCC and C&A Departments	On-going	Regular			
SR32.04	Meetings between Senior Information Risk Officer and Caldicott Guardian (Deputy Director C&A) on specific risks	Legal and Corporate Services (AD)	Good regular engagement to discuss risk areas	PIAs, ISAs and SOPs co-signed where relevant	Ad hoc as and when required.	Regular			
SR32.05	New Information Governance (IG) team created to augment the Council's response to IG	Legal and Corporate Services (AD)	A team dedicated to increasing control around IG and other related issues.	FOI and SAR statistics Periodic ICO audits	On-going	Regular			

## CORPORATE RISK REGISTER

SR 33	Impact of Welfare Reform	Owner	Chief Finance Officer	Leader's Portfolio	Current Risk Score	D	II	Reviewed	July 2016
<b>Link to Corporate Priority</b>		Supporting Medway's People to Reach Their Potential and Giving Value for Money							
<b>Vulnerability</b>			<b>Trigger</b>		<b>Consequences</b>				
A wide range of changes in Government policy under the broad banner of 'Welfare Reform' could have a significant impact on the Council's resources. Some could impact directly on the Council's resources, such as the introduction of the living wage and the 1% per annum reduction in social rents, whereas others impact adversely on a cohort of the more vulnerable members of the community, which in turn increases demand for some the Council's core services – social care, housing and revenues and benefits. As the changes are implemented on a phased basis the Council not able to fully predict the impact they will have on its resources.			Since 2012 the Government has embarked upon a major programme of welfare reform, with the broad aims of encouraging people back into work and addressing a perceived 'dependency culture' in Britain. These measures have included: - Changes to tax allowances and thresholds - Reform of benefits (eg. Universal Credit, the cap) - Changes in eligibility for social housing - Introduction of the living wage - An influx of both identified and unidentified customers		<input type="checkbox"/> Impact on some of the most vulnerable citizens. <input type="checkbox"/> Consequent impact on demand for core council services. <input type="checkbox"/> Transfer of additional responsibilities to local authorities. <input type="checkbox"/> Direct and indirect impacts on council staffing resources. <input type="checkbox"/> Direct Impact on Rent Income Stream to HRA <input type="checkbox"/> Increase in homelessness/Evictions <input type="checkbox"/> Negative local publicity and reputational damage. <input type="checkbox"/> Unidentified customers impacted by the welfare reform presenting to the Council too late to prevent homelessness.				
<b>Code</b>	<b>Description</b>	<b>Managed By</b>	<b>Desired Outcome</b>	<b>Output</b>	<b>Milestones/PIs</b>		<b>Monitoring</b>		
SR 33.01	Provide direct financial support for the most vulnerable members of the community.	Phil Watts	Customers are able to sustain tenancies and mortgages. Families remain resilient and less likely to need Council care services.	Implementation of the following <ul style="list-style-type: none"> <li>• Council tax reduction scheme;</li> <li>• Discretionary relief;</li> <li>• Enhanced housing benefit;</li> <li>• Welfare provision.</li> </ul>	The number of customers receiving a housing duty presenting with the following reasons for their homelessness <ol style="list-style-type: none"> <li>1. Mortgage arrears (repossession or other)</li> <li>2. Rent arrears on: <ol style="list-style-type: none"> <li>a) Local authority or other public sector dwellings;</li> <li>b) Registered social landlord /other housing association;</li> <li>c) Private sector dwellings.</li> </ol> </li> </ol> KPI rent arrears as % of rent debit.		Government P1E quarterly returns (homelessness)		
SR 33.02	Establishment of the Welfare Reform Officer Group, to take forward the recommendations of the Welfare Reform Members Task Group.	Phil Watts	Staff from different services and directorates provides a joined up approach, meeting the challenges the welfare reform poses for our customers. In addition as many of our residents as possible are delivered a	Establish a Welfare Reform Officer Group incorporating members from relevant services.  Produce and deliver an action plan to implement the recommendations of the Welfare Reform Members Task Group.	Monitor action plan and provide six monthly update reports to O&S Committee:  August 2016 February 2017 August 2017		Welfare Reform Officer Group  Six monthly updates to BSD O&S		

## CORPORATE RISK REGISTER

			consistent message.	Regular reporting.	February 2018	
SR 33.03	The direct provision of and referral to money advice services.	Various	Customers are clearly signposted to free and independent money and debt advice, which will help them in budgeting and managing debts.	Produce specification for service provision and tender. Tender service and award service contract. Brief staff on procedures. Launch service and undertake wide publicity campaign for our customers.	Number of referrals made Number of referrals made where debt in line with Council tax arrears and rent arrears reduce	Quarterly
SR 33.04	Closer working with the DWP in relation to implementation of Universal Credit.	Phil Watts	Deliver the Council's commitments in terms of the Delivery Partnership Agreement.	Undertake joint meetings and working arrangements with DWP. Undertake joint publicity campaign to signpost customers to the DWP and where appropriate support them with online access to the application process. Formalise debt advice services.	Number of joint events held with partners to promote Universal Credit	Welfare reform Officer group Six monthly updates to BSD O&S
SR 33.05	Review of the HRA business plan to address the impact of the 1% reduction in rents and the high value subsidy figure which is being legislated in the proposed Housing Bill.	Marc Blowers	The Council has a clear understanding of future viability of HRA business plan and delivery of services, allowing the Council to plan effectively for the future provision of the service	Review the business plan once the Housing and Planning Bill has been passed and the high value subsidy figure is announced (expected June 2016) Consult on the plan with HRA tenants and present to BSD O&S.	Monitoring of Business Plan annually Quarterly budget monitoring. O&S report on revised HRA business plan – October 2016	O&S Committee Quarterly budget monitoring



## Medway Council Risk Management Strategy

### 1. Introduction

1.1 Risk management is an integral part of good governance. The Council recognises that it has a responsibility to identify and manage the barriers to achieve its strategic objectives and enhance the value of services it provides to the community.

1.2 This strategy incorporates and:

- promotes a common understanding of risk;
- outlines roles and responsibilities across the Council;
- proposes a methodology that identifies and manages risk in accordance with best practice thereby seeking to prevent injury, damage, loss and reducing the cost of risk.

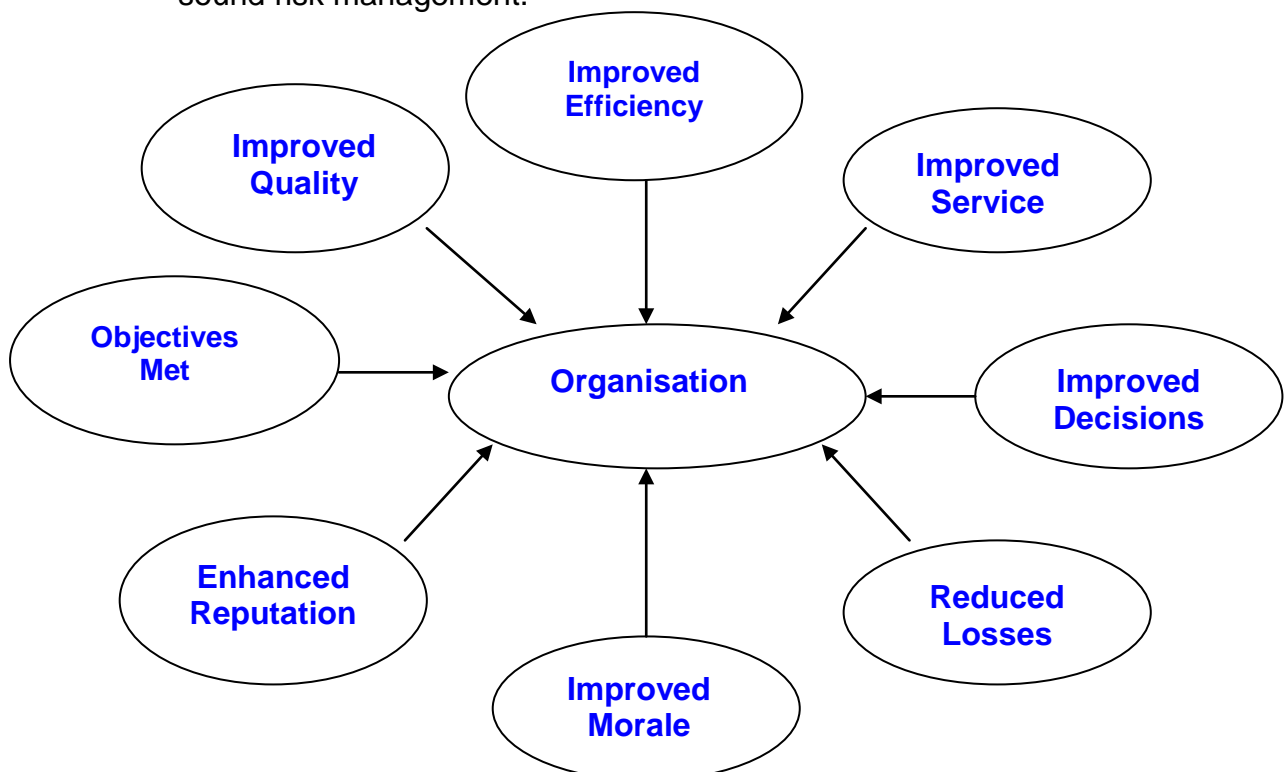
1.3 The strategy sets out:

- a definition of risk and what is meant by risk management.
- actions that need to be taken.
- roles and responsibilities.

1.4 The strategy will be reviewed annually to ensure that it remains up-to-date and continues to reflect the Council's approach to risk management.

### 2. The Benefits of Risk Management

2.1 The following diagram sets out the benefits that are associated with sound risk management.

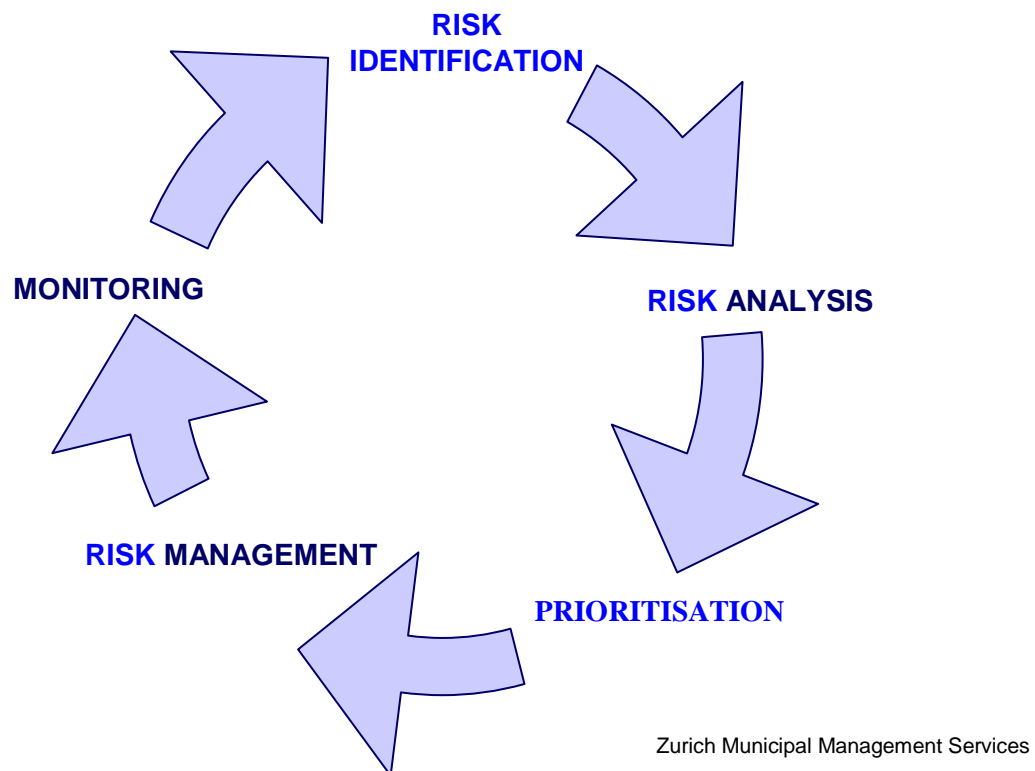


## Medway Council Risk Management Strategy

### 3. What is Risk Management?

3.1 Risk management is a focus on the risks facing the Council, making the most of opportunities (making the right decisions) and achieving objectives once those decisions are made.

3.1.1 The process of risk management can be illustrated through the risk management cycle:



3.2 Risk helps to deliver performance improvement and is at the core of decision-making, business planning, managing change and innovation. It needs to be practised at both management and service delivery level. It enables the effective use of resources, secures the assets of the organisation and its continued financial and organisational well-being.

3.3 There are two types of risks:

**direct threats** (damaging events/issues) which could lead to a failure to achieve objectives. An example might be severe flooding in Strood affecting the local economy and residential properties.



## Medway Council Risk Management Strategy

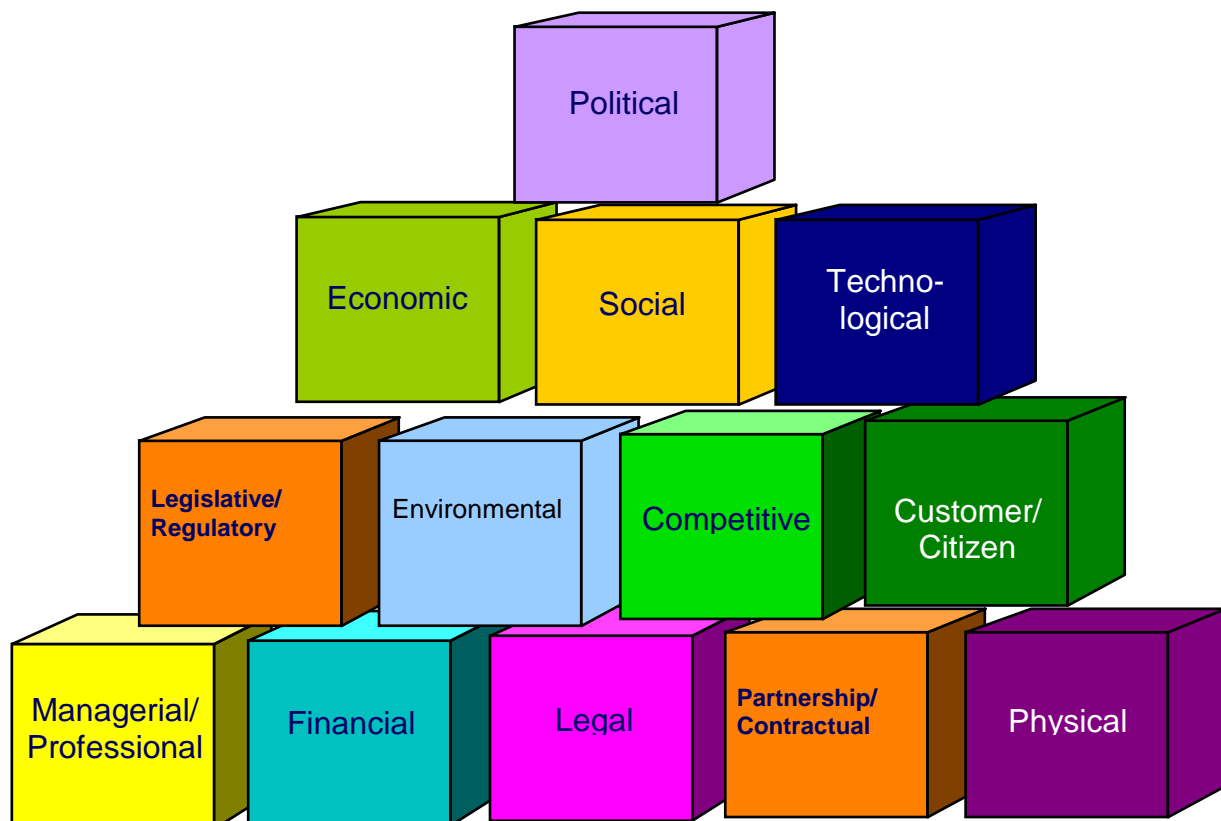
**opportunities** (constructive events/issues) which if exploited could offer an improved way of achieving objectives, but which are surrounded by threats. An example was the move to the new Corporate HQ with all ICT in one building. Having established a potential risk there is a need to work on a strategy to mitigate the risk. This particular risk has been successfully dealt with.

### 3.4 Business v Operation risks

**Business/service risks:** Those which have been identified as potentially damaging to the achievement of the Council's objectives and departmental/ service business plans. An example might be a major fire in a Council School.

**Operational risks:** Risks which managers and staff are likely to encounter in the day-to-day work situations. An example might be a loss of key staff.

3.5 Risk is a condition, an act, situation or event with the ability or potential to impact on customers, units/departments by either enhancing or inhibiting corporate/departmental performance, attainment of corporate/departmental objectives or meeting customers and stakeholders' expectations. The Scope of Business Risk model below shows the number of areas that can be affected.



Zurich Municipal Management Services

**Medway Council  
Risk Management Strategy**

3.6 Risk are benchmarked against corporate goals:

**a) Impact:** To what extent the issue, assuming it were to manifest itself to the degree defined in the consequences, would impact on the organisation’s ability to achieve its vision, aims and priorities? These are measured as:

- I Catastrophic (Showstopper)
- II Critical
- III Marginal
- IV Negligible

**b) Likelihood: (resource allocation)**: Taking into account existing measures to manage issue (not those planned or not yet in operation), how likely is the ‘impact’ to occur within the timeframe of the corporate plan. These are measured as:

- A Very high
- B High
- C Significant
- D Low
- E Very low
- F Almost impossible

3.7 It may not be cost-effective to manage all risks – even significant ones. In these circumstances the Council may decide to tolerate the risk.

To help the Council make that decision, all risks will be categorised using the measures detailed at 3.6 and plotted against the Council’s Strategic Risk Profile shown below:

<b>A</b>				
<b>B</b>				
<b>C</b>				
<b>D</b>				
<b>E</b>				
<b>F</b>				
	<b>IV</b>	<b>III</b>	<b>II</b>	<b>I</b>

The Council have agreed the tolerance line be drawn at CII (Significant & Critical). The Council will then decide what action to take to monitor such risks.

## Medway Council Risk Management Strategy

- 3.8 Risks will be regularly monitored using service planning and AD Quarterly Reports and the Council's performance management system (Covalent). Risks above the tolerance line (CII) will be escalated to the next management level as detailed in Appendix 1.
- 3.9 Effective risk management includes regularly reviewing our emergency planning programmes and service continuity management to maintain a high standard in our response to potential crises. This means developing, implementing and maintaining an action oriented process for responding to any emergency, managing major incidents and recovering the service level to the local community.

### 4. Roles & Responsibilities

- 4.1 The following details the roles and responsibilities for delivering risk management.

Who	Roles & Responsibilities
Members	<ul style="list-style-type: none"> <li>• commit to the Risk Management Strategy.</li> <li>• review risks through the 6 monthly reports on key strategic risks and information contained in the Council Plan, Cabinet reports and AD Quarterly Reports.</li> </ul>
Management Team (MT)	<ul style="list-style-type: none"> <li>• review and manage the Council's key strategic risks every 6 months.</li> <li>• provide leadership and support to promote a culture in which risks are managed with confidence at the lowest appropriate level.</li> </ul>
Strategic Risk Management Group  (Membership shall be: A chairman who is a nominated director and appropriate representation from each Directorate with an overall responsibility for risk issues.)	<ul style="list-style-type: none"> <li>• chair of group to sponsor risk management at MT (currently Director of Regeneration, Community and Culture).</li> <li>• ensure the Council's key strategic risks are reviewed, updated and presented to MT every 6 months.</li> <li>• regularly review the risk management and control process employed across the Council.</li> </ul>

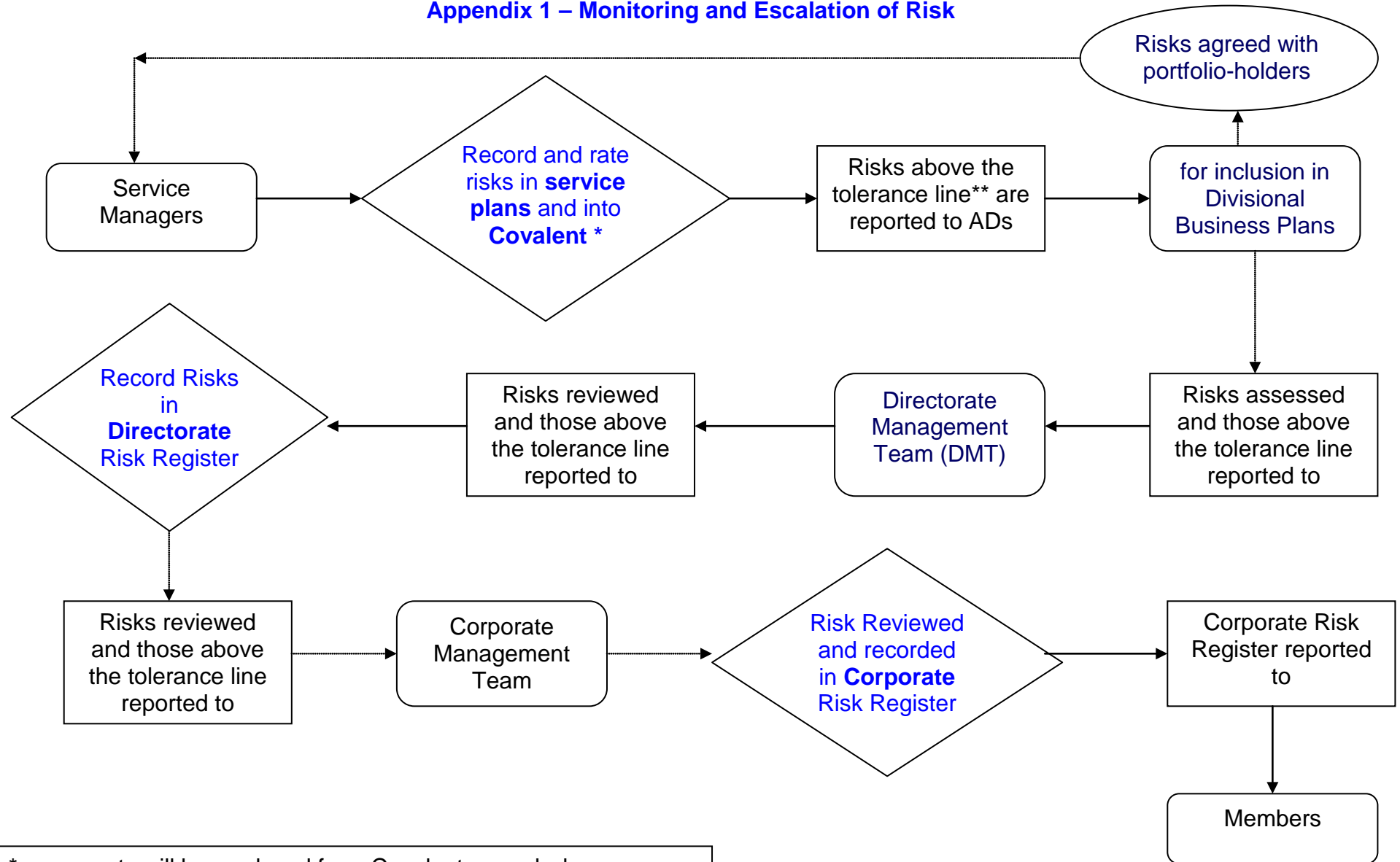
**Medway Council  
Risk Management Strategy**

<b>Who</b>	<b>Roles &amp; Responsibilities</b>
Strategic Risk Management Group	<ul style="list-style-type: none"> <li>• review findings and recommendations of external auditors, internal audit or other relevant third parties in relation to risk management.</li> <li>• review the impact of any changes in the organisation on the risk management process and the response to these changes including the update of the risk register.</li> <li>• champion risk management, the practice, awareness and buy-in across the organisation.</li> <li>• provide strategic support to the development of service continuity plans and the emergency planning service.</li> </ul>
Directorate Management Teams (DMT)	<ul style="list-style-type: none"> <li>• ultimate responsibility for the management of all directorate risks and maintenance of a sound system of internal control within the directorate and across partnership working</li> <li>• review and monitor the effectiveness of the risk management actions relative to the significant key risks to the directorate on a quarterly basis.</li> <li>• reflect significant changes to business objectives and related risks and, where relevant, address them in the Directorate Business Plan.</li> </ul>
Assistant Directors	<ul style="list-style-type: none"> <li>• oversee the effective implementation of risk management within their service area within the agreed principles and framework.</li> <li>• discuss significant key risks and risk management actions with their portfolio holders and report on progress through the AD Quarterly Reports.</li> <li>• alert Directorate Management Team (DMT) if impact or likelihood of the risk increases.</li> </ul>

**Medway Council  
Risk Management Strategy**

<b>Who</b>	<b>Roles &amp; Responsibilities</b>
Service Managers	<ul style="list-style-type: none"> <li>• identify risks for their service areas, assess them for likelihood and impact, propose actions to mitigate them and allocate responsibility for the controls mitigating the risk.</li> <li>• record them into service plans.</li> <li>• discuss significant key risks and risk management actions with AD and reporting progress through the AD Quarterly Reports.</li> <li>• alert their line manager if impact or likelihood of the risk increases.</li> </ul>
Staff at all levels within the Council	<ul style="list-style-type: none"> <li>• identify, assess and report risks within their service areas.</li> <li>• practice risk management in their day to day activities.</li> <li>• alert their line manager if impact or likelihood of the risk increases.</li> </ul>

**Medway Council Risk Management Strategy  
Appendix 1 – Monitoring and Escalation of Risk**



\* – reports will be produced from Covalent as and when required.  
 \*\* - tolerance line is currently CII



***D R A F T***

*Risk Management Framework*

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Medway Council

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**1. Introduction**

1.1 Risk management is an integral part of good governance. The Council recognises that it has a responsibility to identify and manage the barriers and opportunities to achieve its strategic objectives and enhance the value of services it provides to the community.

1.2 This strategy incorporates and:

- promotes a common understanding of risk;
- proposes a methodology that identifies and manages risk in accordance with ISO31000
- outlines roles and responsibilities across the Council;

1.3 The strategy sets out:

- a definition of risk management.
- actions that need to be taken.
- roles and responsibilities.

1.4 The strategy will be reviewed annually to ensure that it remains up-to-date and continues to reflect the Council's approach to risk management.

2. **The Principles of Risk Management**

2.1 The following diagram (fig 1) sets out the eleven principles set out in ISO31000 associated with sound risk management, which if adopted, provides Medway Council with the following benefits:

- Improved efficiency
- Improved service
- Improved decisions
- Reduced losses
- Improved morale
- Enhanced reputation
- Meeting objectives
- Improved quality
- Helps identify priorities
- Helps deliver priorities
- Defines and manages expectations
- Maximises delivery within resource allocation
- Helps to increase resources

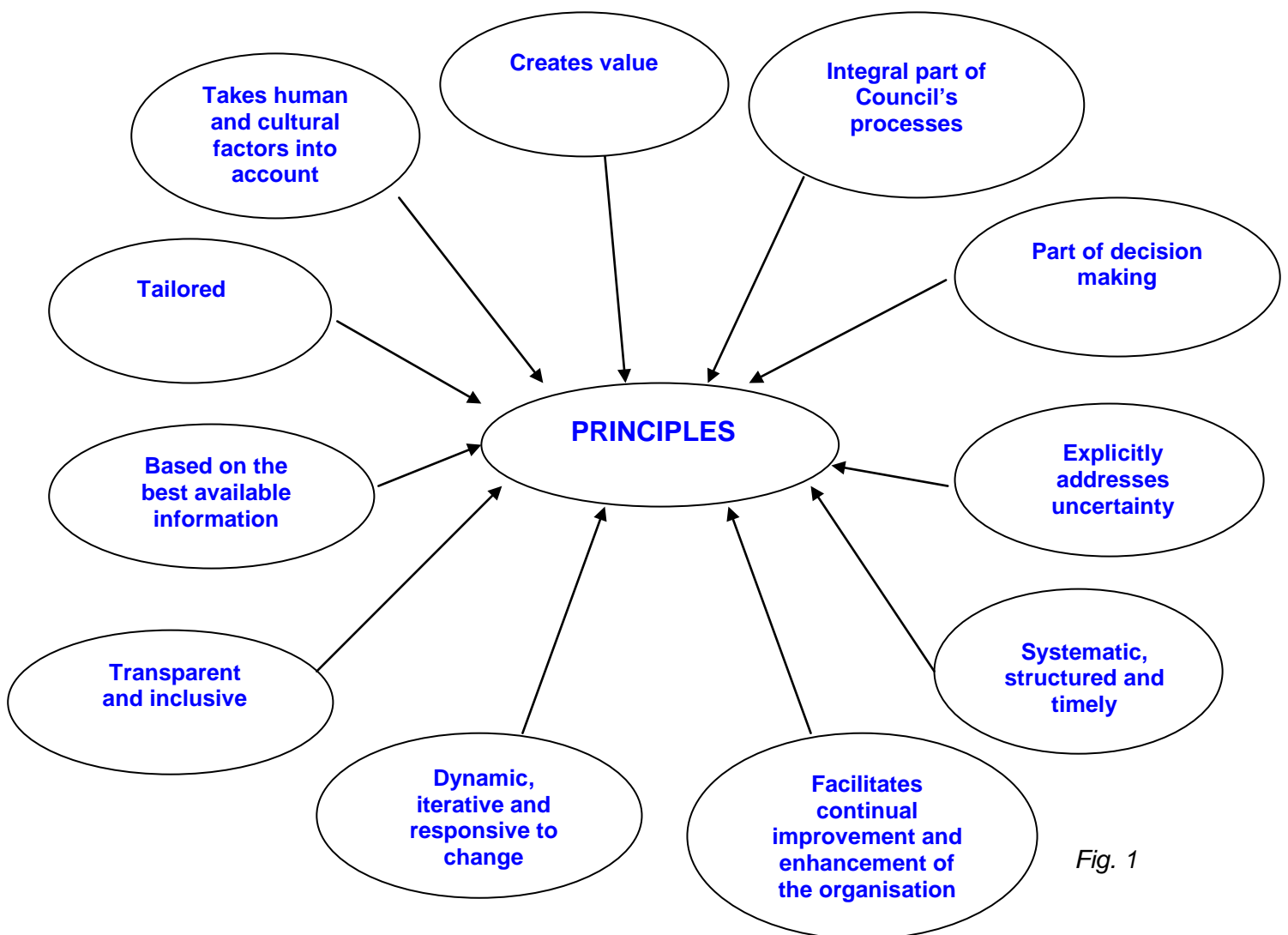
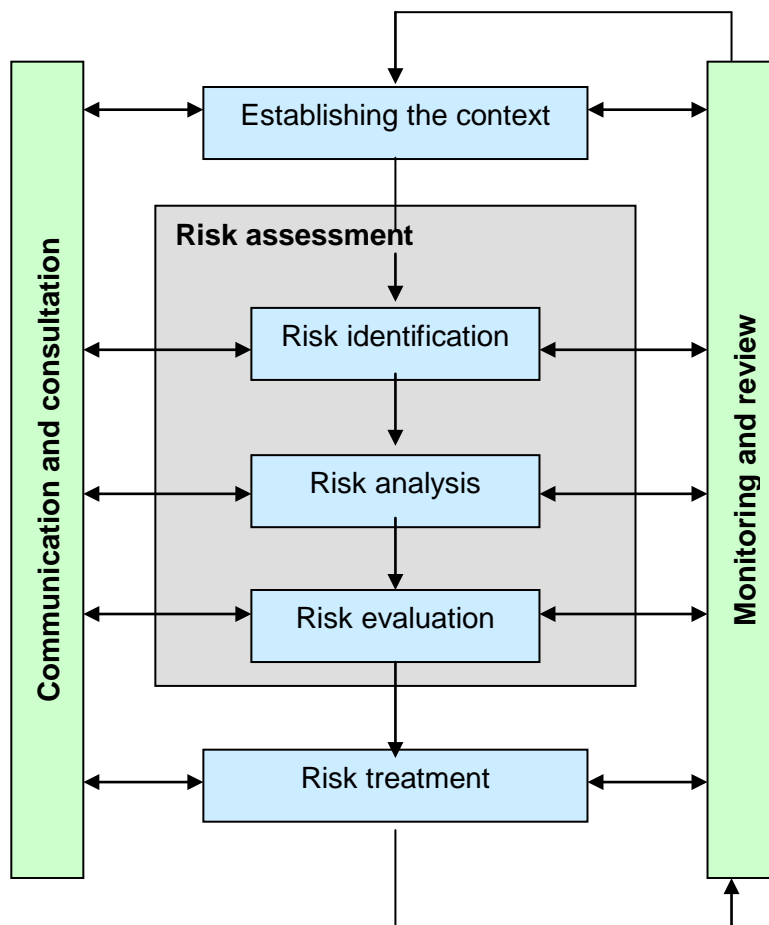


Fig. 1

**3. What is Risk Management?**

- 3.1 Risk management is a process which aims to help the Council understand, evaluate and take action on all their risks. It supports effective decision making, identification of priorities and objectives and increases the probability of success by making the most of opportunities and reducing the likelihood of failure.
- 3.2 Risk helps to deliver performance improvement and is at the core of good governance, business planning, managing change, innovation, budget setting, project management, equality and access, contract management. Risk Management also supports the delivery of Medpay and Investors in People accreditation. Risk Management needs to be practised at both management and service delivery level. This enables the effective use of resources; helps secure the assets of the organisation and continued financial and organisational well-being.
- 3.3 The process of risk management can be illustrated through the risk management cycle:



ISO 31000:2009

Fig. 2

3.4 The spine of the process is set out as follows:

- **Establish the context:** Defining the context (external and internal), setting the scope and agreeing the risk criteria.
- **Identify risks:** Identifying and describing the risks. Risk description includes understanding the causes, consequences and control measures for each risk.
- **Analyse risk:** Developing and understanding of the risk under different control scenarios. Key questions are:
  - What is the consequence of the risk?
  - What is the likelihood of the risk?
- **Evaluate risks:** This is the “so what?” question. With a given consequence and likelihood, is the risk tolerable to the organisation, given the risk criteria? The purpose of this stage is to support decision-making.
- **Treat risks:** One or more options are selected to manage risk. This stage incorporates both decision making and implementation. It also includes the decision to take no further action to manage the risk.

3.5 This process is continuous, with ‘monitoring and review’ at each stage (i.e. at any stage it is not too late to update or redefine an earlier stage).

3.6 ‘Communication and consultation’ with external and internal stakeholders should take place during all stages of the risk management process. Communication and consultation is required to ensure that stakeholders can input into the process, be engaged and help support the treatment of risk.

3.7 Medway Council already has a well defined financial and performance management structure including reporting arrangements via ‘the Golden thread’. Figure 4 on page 14 demonstrates how the risk management process should be embedded within this structure.

#### 4. Risk ranking

4.1 Risks need to be understood in relation to the level of controls applied:

4.1.1 Assuming there are no control measures in place. This is usually referred to as ‘**inherent risk**’. It is a useful indication of the total exposure that the Council may have to a particular risk, if no control measures are applied or if current controls are ineffective.

4.1.2 With control measures that are currently in place, taking into account their effectiveness. This gives the level of risk actually faced. This is usually referred to as ‘**residual**’ risk.

4.1.3 Assuming possible additional actions are implemented (such as adding control measures or gathering more information). This is the 'target' level of risk that might arise. Target risk is used to determine whether the level of risk will be acceptable in the future and whether sufficient actions are being taken

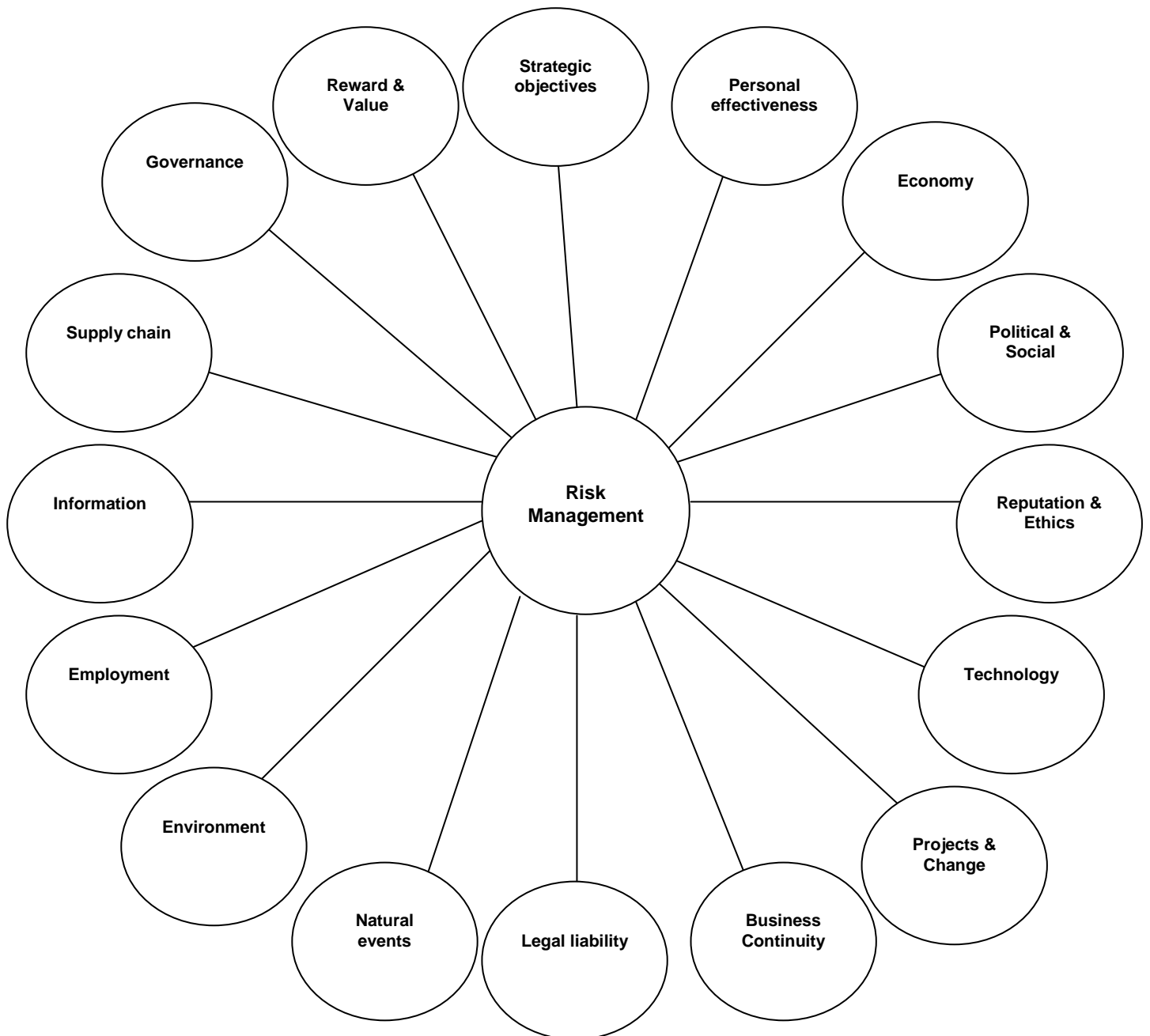
4.2 Strategic v Operation risks

**Strategic risks:** Those which have been identified as potentially damaging to the achievement of the Council's objectives and departmental/ service business plans. Hypothetical examples might be the Council not being able to meet statutory duties i.e. provision of Special Educational Needs or the Council fails to bid successfully for any European funds.

**Operational risks:** Risks which managers and staff are likely to encounter in the day-to-day work situations. Hypothetical examples might be health and safety risk for instance if it was deemed our highways were unsafe or waste collection arrangements were exposing the public (and staff) to life threatening risks i.e. chemical spills/asbestos etc.

**5. Risk identification**

5.1 Risk is a condition, an act, situation or event with the ability or potential to impact on customers, service/departments by either enhancing or inhibiting corporate/departmental performance, attainment of corporate/departmental objectives or meeting customers and stakeholders' expectations. The Scope of Business Risk model below shows the number of areas that can be affected and can be used to help identify risk.



Risk identification tool (A holistic model)

*Fig. 3*

**6. Risk analysis**

6.1 Risks are benchmarked against corporate priorities and are prioritised by using a risk scoring calculation for both the downside of risk and the opportunities that can be seized with a desirable outcome:

**a) Impact:** To what extent the issue, assuming it were to manifest itself to the degree defined in the consequences, would impact on the organisation’s ability to achieve its vision, aims and priorities? These are measured on two axis opportunity and threat:

<b>Opportunity</b>	<b>Threat</b>
I Transformative	I Catastrophic (Showstopper)
II Major	II Major
III Moderate	III Moderate
IV Minor	IV Minor

**b) Likelihood: (resource allocation):** Taking into account existing measures to manage issues (not those planned or not yet in operation), how likely is the ‘impact’ to occur within the timeframe of the corporate plan. These are measured as:

- A Very high
- B High
- C Significant
- D Low
- E Very low
- F Almost impossible

6.2 It may not be cost-effective to manage all risks – even significant ones. In these circumstances the Council may decide to tolerate the risk.

6.3 To help the Council make that decision, all risks will be categorised using the measures detailed at 3.6 and plotted against the Council’s Strategic Risk matrix shown above.

6.4 The Council have agreed the tolerance line be drawn at C2 (Significant & Moderate). The Council will then decide what action to take to monitor such risks.



## The Risk Matrix

<b>Likelihood</b>				
A Very high 1:2 probability				
B High 1:10 possible				
C Significant 1:50 possible				
D Low 1:80 possible				
E Very low 1:100 possible				
F Almost impossible 1:1000 possible				
	IV - Minor	III - Moderate	II - Major	I - Catastrophic
	<b>Negative impact</b>			
Objective driven (Customer, people, society or key performance)	Slippage and minor deviation	Failure to meet an objective	Failure to meet several objectives	Severe damage to the Council and its services
100% £500m	<b>Unforeseen expenditure</b>			
Budget driven (income, expenditure, contractors and budget allocation)	0.25%	2.50%	10%	25%
	£1.25m	£12.5m	£50m	£125m

- 6.5 Risks will be regularly monitored using service planning and Deputy / Assistant Directors Quarterly Reports and the Council's performance management system (Covalent). Risks above the tolerance line (C2) will be escalated to the next management level as detailed in Appendix B.
- 6.6 Effective risk management includes regularly reviewing our emergency planning programmes and service continuity management to maintain a high standard in our response to potential crises. This means developing, implementing and maintaining an action oriented process for responding to any emergency, managing major incidents and recovering the service level to the local community.

**7. Roles & Responsibilities**

7.1 The following details the roles and responsibilities for delivering risk management.

Who	Roles & Responsibilities
Members	<ul style="list-style-type: none"> <li>• commit to the Risk Management Framework.</li> <li>• review risks through the 6 monthly reports on key strategic risks and information contained in the Council Plan, Cabinet reports and AD Quarterly Reports.</li> </ul>
Portfolio holders	<ul style="list-style-type: none"> <li>• Agree and review risks treatments and escalation with Assistant Directors quarterly</li> </ul>
Corporate Management Team (CMT)	<ul style="list-style-type: none"> <li>• identify, review and manage the Council’s key strategic risks above the tolerance level every 6 months.</li> <li>• provide leadership and support to promote a culture in which risks are managed with confidence at the lowest appropriate level.</li> <li>• Agree the risk management framework for the Council</li> </ul>
<p>Strategic Risk Management Group</p> <p>(Membership shall be: A chair who is a nominated Director and appropriate representation from each Directorate with an overall responsibility for risk issues.)</p>	<ul style="list-style-type: none"> <li>• chair of group to sponsor risk management at CMT (Director of Regeneration, Community and Culture).</li> <li>• ensure the Council’s key strategic risks are reviewed, updated and presented to CMT every 6 months.</li> <li>• regularly review the risk management and control process employed across the Council including the risk management framework.</li> <li>• review findings and recommendations of external auditors, internal audit or other relevant third parties in relation to risk management.</li> <li>• review the impact of any changes in the organisation on the risk management process and the response to these changes including the update of the risk register.</li> <li>• champion risk management, the practice, awareness, buy-in across the organisation and identify training needs.</li> <li>• provide strategic support to the development of service continuity plans and the emergency planning service</li> </ul>

## APPENDIX D

Who	Roles & Responsibilities
Directorate Management Teams (DMT)	<ul style="list-style-type: none"> <li>• Ensure appropriate representation on the Strategic Risk Management Group</li> <li>• ultimate responsibility for the management of all directorate risks and maintenance of a sound system of internal control within the directorate and across partnership working</li> <li>• identify, review and monitor the effectiveness of the risk management actions relative to the risks to the directorate in the directorate risk register on a quarterly basis</li> <li>• reflect significant changes to business objectives and related risks and, where relevant, address them in the Directorate Business Plan</li> </ul>
Deputy / Assistant Directors	<ul style="list-style-type: none"> <li>• oversee the effective implementation of risk management within their service area within the agreed principles and framework</li> <li>• discuss significant key risks and risk management actions with their portfolio holders and report on progress through the AD Quarterly Reports</li> <li>• alert Directorate Management Team (DMT) if impact, opportunity or likelihood of the risk increases</li> <li>• Agree and review risks treatments and escalation with Portfolio Holders quarterly</li> </ul>
Service Managers	<ul style="list-style-type: none"> <li>• identify risks for their service areas, assess them for opportunity, likelihood and impact, propose actions to treat them and allocate responsibility for the controls treating the risk within the service risk register</li> <li>• record risk treatment into service plans</li> <li>• discuss risks and risk treatment actions with AD and report progress through the service managers quarterly update i.e SMQ</li> <li>• alert their Assistant Director if impact, opportunity or likelihood of the risk increases</li> </ul>
Staff at all levels within the Council	<ul style="list-style-type: none"> <li>• identify, assess and report risks within their service areas</li> <li>• practice risk management in their day to day activities</li> <li>• alert their line manager if impact, opportunity or likelihood of the risk increases</li> </ul>

8. Linking Risk Management to the 'Golden thread' and reporting

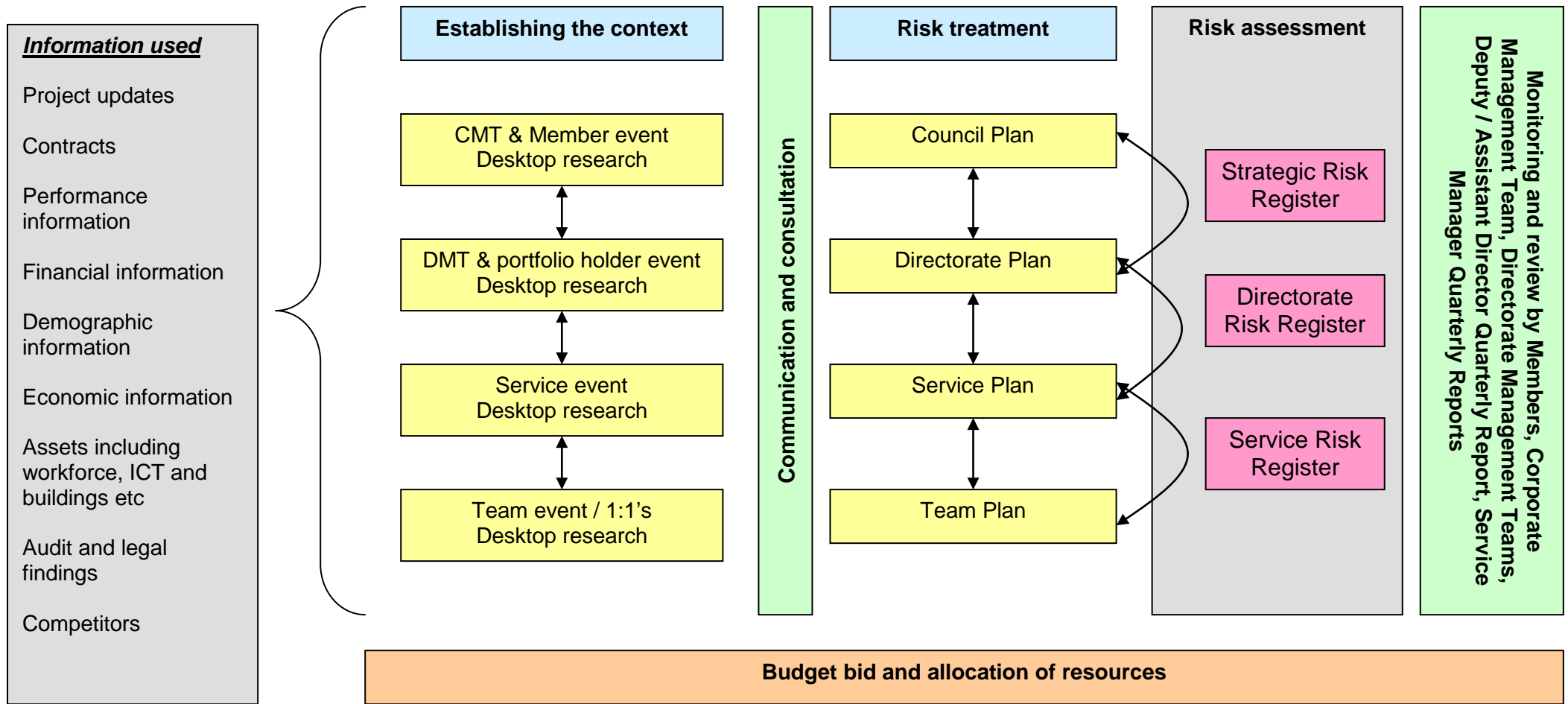


Fig. 4

**Medway Council Risk Management Strategy  
9. Monitoring and Escalation of Risk**

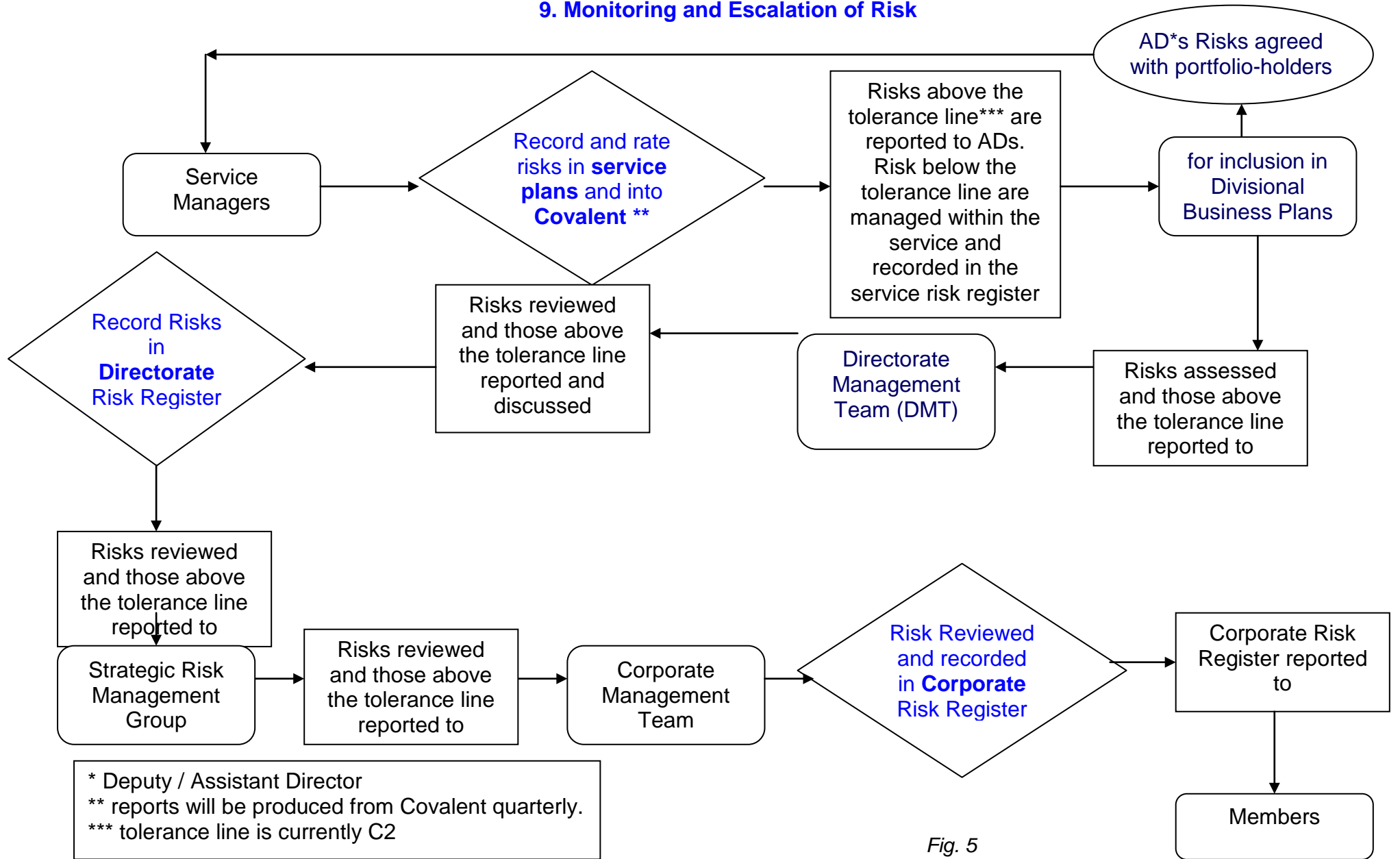


Fig. 5

