

TELFORD & WREKIN COUNCIL

CABINET – 23RD JULY 2015

DRIVING DELIVERY OF THE COUNCIL'S PRIORITIES: 2014/15 YEAR END PERFORMANCE ANALYSIS

REPORT OF THE MANAGING DIRECTOR

LEAD CABINET MEMBER – CLLR RICHARD OVERTON

PART A) – SUMMARY REPORT

1. SUMMARY OF MAIN PROPOSALS

1.1. To present an overview of 2014/15 performance against the Council's priorities and present the Council's Strategic Risk Register for review.

2. RECOMMENDATIONS

That the Council's:

- performance for 2014/15 is noted; and the
- Strategic Risk Register June 2015 is agreed.

3. SUMMARY IMPACT ASSESSMENT

COMMUNITY IMPACT	Do these proposals contribute to specific Co-operative Council priority objective(s)?	
	Yes	<i>All Priorities</i>
	Will the proposals impact on specific groups of people?	
	Yes	<i>The Council's priorities impact across all communities</i>
TARGET COMPLETION/DELIVERY DATE	<i>This is part of the on-going monitoring of delivery of the Council's priorities.</i>	
FINANCIAL/VALUE FOR MONEY IMPACT	Yes	The Council had a net revenue budget of £129m and a capital programme of £142m in 2014/15 which represented the core funding available to meet its priorities and plans for the year. The outturn position for 2014/15 was very positive with a final net underspend of £1.145m being reported to Cabinet on 25 June 2015. This position was achieved after delivering £17m of budget savings in 2014/15, on top of

		<p>£53m made in the previous 5 years.</p> <p>The key financial pressures experienced during 2014/15 were the cost of purchasing care packages in Adult Social Services and the cost of Children in Care placements.</p> <p>The funding outlook for the Council will undoubtedly continue to be challenging and it is currently anticipated that we will need to identify further savings of between £10m and £12m each year for at least the next 3 years. The positive outturn in 2014/15 places us in the best possible position as we move into 2015/16.</p> <p>The Service & Financial Planning Strategy for 2015/16 meets not only the challenge of delivering further savings but also sets out key areas for investment which align with the Council's priorities and focuses on the underlying requirement for financial sustainability.</p> <p>Further details about the strategy for 2015/16 and the 2014/15 financial outturn can be found on the Council's web site.</p> <p>Strategic risks are considered as part of the budget setting process.</p> <p style="text-align: right;">PH 25.6.2015</p>
LEGAL ISSUES	Yes	<p>The Council has statutory responsibilities to undertake functions which are, in many cases, subject to central government regulations and guidance. Some of the Council's priorities listed in this report at Appendix 2 are additional objectives which add to, but don't replace, the Council's statutory responsibilities.</p> <p>Any changes to corporate priorities, the risk register and/or performance indicators to meet our priorities must ensure that the Council also continues to fulfil its statutory duties.</p> <p>It should be noted that the risk register and the controls mentioned therein do not replace the statutory requirement for internal control contained in the Accounts and Audit Regulations 2015.</p> <p>Changes in legislation such as the introduction of the provisions of the Care Act 2014 this year</p>

		(and further provisions to be introduced next year) demonstrate how new legislation causes the need for a review of how new responsibilities will affect the way in which the Council needs to adapt its strategy regarding its corporate priorities and risks. <i>MC 24.06.2015</i>
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	The report identifies key areas that require improvement to the delivery the Council's priorities
IMPACT ON SPECIFIC WARDS	No	Borough-wide impact

PART B) – ADDITIONAL INFORMATION

4. Driving Delivery of the Council's Priorities

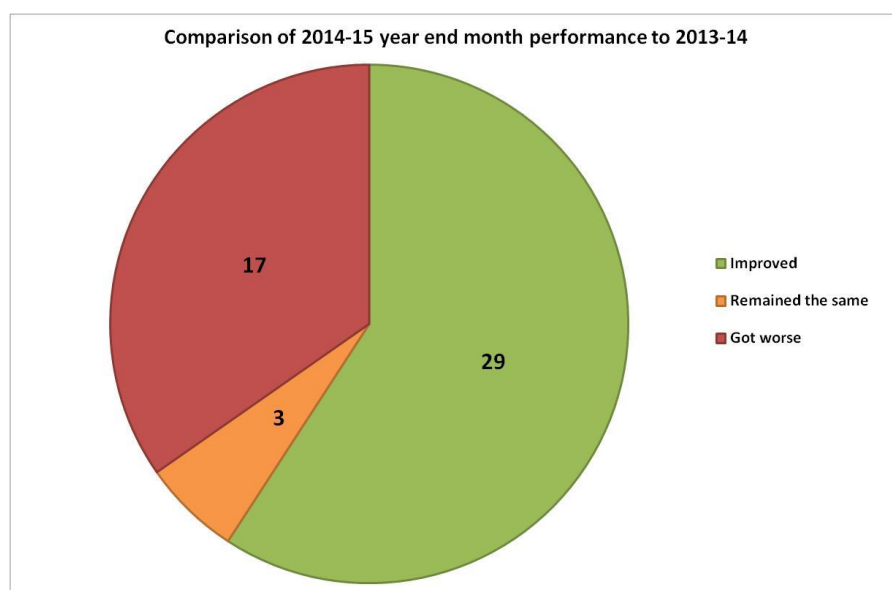
4.1. Telford & Wrekin – our vision and priorities	
	<p>4.1.1. As part of the Council's governance arrangements and driving improvement and value for money, performance against its priorities is reported at 6, 9 and 12 months. This report concludes the performance reporting against the 2013/14 to 2015/16 Medium Term Council Plan's priorities. As the new medium-term plan of the new administration is developed, these performance measures will be reviewed too.</p> <p>4.1.2. This report sets out the progress against the priorities for 2014/15 as measured by a set of performance indicators presented in Appendix 1. Priority 1, 'Putting our Children and Young People first', is an overarching priority and as such does not have any specific performance indicators.</p> <p>Headline Messages</p> <p>4.1.3. The Council continues to drive economic growth. The Council's programme to tackle youth unemployment continues to pay dividends with youth unemployment falling by 2,100 people in the last 12 months (an improvement by 27% from 28.4% to 12.9%). Similarly, unemployment has fallen by 27% (from 8.1% to 5.9%) over the last 12 months, with both now lower than regional and national rates. Although there has been a reduction in the number of young people not in education, employment or training (from 8.5% to 7.9%, equating to 428 young people) further work is needed to bring it in line with the national average (4.8%).</p> <p>4.1.4. The Council continues to support the development of the Borough's future workforce with improved attainment at Early Years Foundation Stage, Key Stage 1 and Key Stage 2. However, further work is needed to improve progress of children from Key Stage 2 to Key Stage 4 and for vulnerable groups of children.</p> <p>4.1.5. Safeguarding children performance has continued to see some areas of improvements, especially around the long-term stability of our children in care. Similarly, there are emerging improvements seen within adult safeguarding due to the impact of the increased number of dedicated adult safeguarding social workers. For example, there is an increase in the percentage of cases where the level of risk was reduced at point of</p>

closure from 81.5% (110 cases) at the end of September to 90.4% (369 cases) at the end of March 2015, an improvement of 10.9%.

4.1.6. Against a national trend of increasing numbers of people becoming homeless the number of homelessness acceptances in the Borough has fallen by 36% (from 119 to 78 households). This is due to improved preventative and supportive interventions offered to households presenting with housing “pressures” to the Council. This is shown by the 123% increase in the rate of cases that have been prevented or relieved (from 153 to 227 cases). The number of 16-24 households who were homeless has increased by two in the last year (from 54 to 56 households). Because of these changes, when looking at the age profile of homelessness acceptances young people account for a larger proportion than at any time in the past (71.8%).

4.1.7. As reported previously, since the introduction of the Veolia recycling contract in April 2014 improvements have been seen in waste services. At year end there has been an improvement in recycling rate of 6.3% (from 44.8% to 47.6%) and has exceeded the target for 2014/15.

4.1.8. Of the 79 performance measures set out in Appendix 1, 3 do not have any 2014-15 data (due to data not being released until later in 2015) and 27 have data that is not comparable to the previous year. Of the remaining 49 measures, 29 have got better (59%), 17 have got worse (35%) and 3 have remained the same (6%).



4.2. Protect and create jobs as a ‘Business Supporting, Business Winning Council’ *App 1, p1*

4.2.1. The Council manages the development of the Borough and wants to ensure that it creates jobs for local people and ensure that growth is both sustainable and protects the Borough’s reputation as a ‘green town’.

4.2.2. Supported by the Council’s investment in programmes such as Job Box, apprenticeships and work placements, the Borough’s overall unemployment rate (16-64 year olds) has decreased from 8.1% to 5.9% (a reduction of 27.0%). Similarly, the youth unemployment rate has decreased from 28.4% to 12.9% (a reduction of 54.5% and 2,100 people). Over the last 12 months Job Box has assisted a total of 468 young people into employment, training or volunteering.



4.2.3. The number of jobs and inward investment secured through the complete sales of Homes

and Communities Agency (HCA) land has not changed since the end of December. This is because there have not been any completed sales of HCA land in the last three months of 2014-15; however, a number of deals are under offer subject to planning.

4.3. Improve local people's prospects through education and skills training App 1, p1

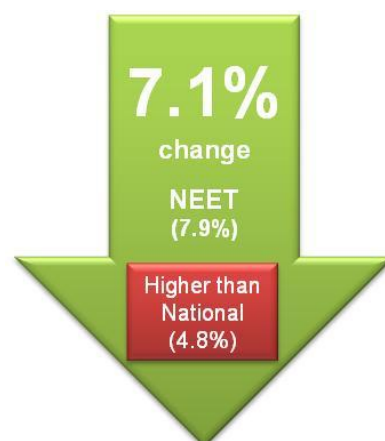
4.3.1. Due to the changes in Key Stage 4 methodology it is not possible to directly compare progress levels to previous years. The progress of all children from Key Stage 2 (10/11 year olds) to Key Stage 4 (15/16 year olds) is lower than both national and regional averages:

- 67% of Telford & Wrekin pupils made the expected progress in English, compared 70% nationally.
- 57% of Telford & Wrekin pupils made the expected progress in Maths, compared to 65% nationally.

4.3.2. The progress of vulnerable learners from Key Stage 2 to Key Stage 4 are lower than the national rates:

- For those of a Pakistani Heritage in Telford and Wrekin 49.1% have achieved the required levels of progress in Maths and 62.3% in English (compared to 65% in Maths and 71% in English nationally).
- For those pupils eligible for Free School Meals in Telford and Wrekin 38.5% achieved the required levels in Maths and 51.3% in English (compared to 48% in Maths and 58% in English nationally).

4.3.3. At year end both the percentage of the workforce (16-64 years old) with Level 3 (21.6%, 17,500 people) and Level 4 (29.1%, 23,600 people) qualifications has reduced (by 0.5% and 5.2% respectively). Telford & Wrekin remain higher than the national and regional averages (17.6% and 18.4% respectively) for Level 3 but lower than national and regional averages (40% and 33.8% respectively) for Level 4.



4.3.4. Although the percentage of young people not in education, employment or training (NEET) has decreased, from 8.5% to 7.9% (428 young people), it remains higher than the regional and national averages (5.3% and 4.8% respectively).

4.4. Protect and support our vulnerable-children and adults App 1, p6

4.4.1. The Council recognises that the best place for most vulnerable children, young people and adults is with their families in their own communities where resources allow. We continue to strive, through service and partnership improvements, to improve the outcomes for our most vulnerable residents.

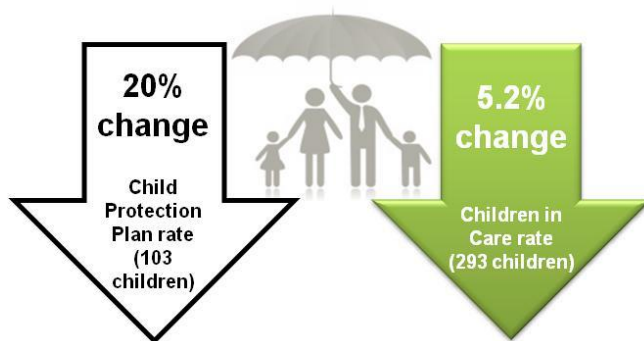
Vulnerable children and young people

4.4.2. The child protection plan rate, 26.4 per 10,000 population (103 children) has reduced considerably since the end of December and is lower than both the national (42.1) and regional rates (44.7). This change equates to 39 less children subject to a child protection plan. The drop was partly due to a number of large sibling groups no longer

being in need of a child protection plan and a number of cases being escalated through to care proceedings. At the time of writing this report the number of children subject to a plan has increased to 119 at the end of May 2015. Work is being undertaken to quality assure activity around child protection plans.

4.4.3. The percentage of repeat child protection plans (within two years of previously being on a plan) has decreased by 29% since last year (from 12% to 8.5%). This equates to 7 less children being subject to a plan for a subsequent time. This area continues to be monitored and one contributing factor to the decreased number partly due to better management oversight.

4.4.4. The number of children in care has increased by 1 (to 293) since the end of December 2014 and remains lower than the previous year end (308). At 2014-15 year end 293 children are in the care of the local authority and of these 221 are placed with foster carers. 34 of the 221 (15.4%) are placed over 20 miles from their home address (8 are placed with relative carers) whilst 141 (63.8%) are placed within the Borough.



4.4.5. At the beginning of the reporting year, long term placement stability of children in care had shown a drop in performance; however, throughout the year the performance has improved to 70.3% and is better than the most recent national average of 67%. The Council continues to analyse the children involved and is progressing work to improve the long term stability for our most vulnerable children.

4.4.6. Since the 6 month performance report in October 2014 work around care leavers has taken place. At the end of 2014-15 there is a much improved picture in terms of the number of care leavers who are "in touch", with 85 out of 91 in the cohort. Of these 92.9% (79) are in suitable accomodation and 47.1% (40) are in a 'positive destinations' (education, employment or training, EET). Further work is being undertaken by several teams and agencies to improve the number of care leavers in EET and progress is being monitored through an action plan.

Vulnerable Adults

4.4.7. Since the presentation of the Council's performance in October 2014 there have been significant changes to the Adult Safeguarding Service structure including the addition of dedicated safeguarding social workers within the safeguarding team. This has resulted in a more consistent approach and quality of safeguarding practice and regular recording of risk outcomes. As a consequence there has been increase in the percentage of cases where the level of risk was reduced at point of closure from 81.5% (110 cases) at the end of September to 90.4% (369 cases) at the end of March 2015, an improvement of 10.9%.



4.4.8. The number of clients that receive long term care who have received a review in the last

12 months has also improved, from 60% at the end of September to 71.8% at the end of March (an improvement of 19.7%). However, due to the change in the way this is measured the Council would expect a significantly higher proportion.

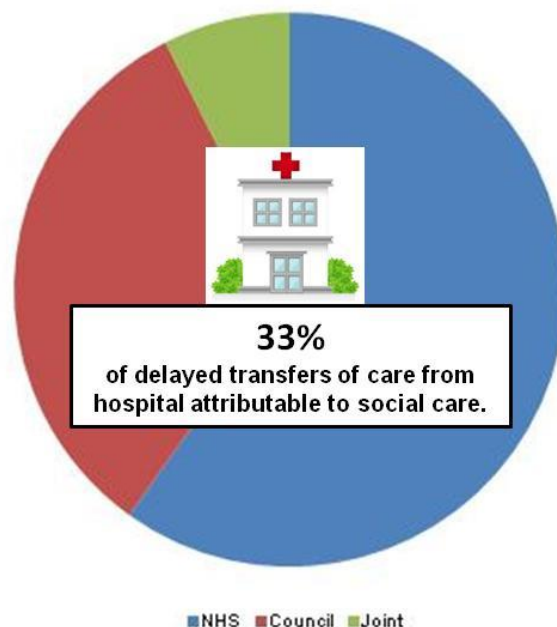
4.4.9. The rate of permanent admissions of people aged over 65 to residential/nursing care homes currently sits at 723.7. Due to a change in definition it is not possible to directly compare this year's outturn with last years.

4.4.10. The rate of delayed transfers from hospital is 295 per 100,000 population, which equates to 4,585 days delayed. At the same point last year the number of 'days delayed' was 2,327 (equating to a rate of 150.7). This rate includes delayed transfers of care as a result of both the NHS and the Council:

- the Council's rate has continued to increase from 483 days at end 2013/14, to 1,498 at the end of 2014-15;
- those that are joint responsibility of both the Council and NHS has increased from 7 at the end of 2013/14 to 341; and
- the NHS's rate has also continued to increase significantly from 1,837 days at the end of 2013/14 to 2,746 days.

4.4.11. The rate of avoidable admissions to hospital has increased every year since 2011/12. At the end of March 2015 the rate was 1557.3 per 100,000 population, a 4.9% increase upon the previous year. This goes against the national trend of decreasing rate of avoidable admissions (from 1204.3 to 1180.5).

4.4.12. The Council continues to work in partnership with the Telford & Wrekin Clinical Commissioning Group, through the Better Care Fund Plan, to reduce both delayed transfers and avoidable admissions.



4.5. Ensure that neighbourhoods are safe, clean and well maintained

App 1, p10

4.5.1. Through partnership working, the Council continues to work to improve the physical condition of our neighbourhoods and reduce the level of crime and anti-social behaviour in the Borough to improve neighbourhood pride.

4.5.2. Following the introduction of the new kerbside recycling service (Veolia) in April 2014, improvements have been seen across the service. With the percentage of household waste (47.6%) being recycled exceeding its estimate (46%) and the rate of dry recycling in the Borough improving from 23.6% at the end of 2013-14 to 26.4% at the end of 2014-15.



<p>4.5.3. The average journey time on Telford and Wrekin roads during rush hour has remained stable at around 39mph. This remains significantly higher than the national average of 24mph. The percentage of road network where maintenance should be considered has decreased from 8% in 2013/14 to 5% in 2014/15.</p> <p>4.5.4. The overall crime rate in the Borough has increased slightly from 59.2 to 60.5 per 1,000 population as has the percentage of residents with a fear of crime (from 38.1% to 41%). Conversely the anti-social behaviour rate has decreased from 54.4 to 50.3 per 1,000 population.</p>	<p>The infographic features a central silhouette of a person. Three arrows point towards it: a large red arrow pointing up with '2.2%' and 'Crime rate (60.5 per 1,000 population)', a smaller red arrow pointing up with '7.6%' and 'Residents fear of crime', and a large green arrow pointing down with '7.5%' and 'ASB rate (50.3 per 1,000 population)'.</p>
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<p>4.6. Regenerate those neighbourhoods in need and work to ensure that local people have access to suitable housing</p>	<p><i>App 1, p11</i></p>
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<p>4.6.1. In 2014-15 1055 new homes were built and there remain 219 stalled housing units within the Borough.</p> <p>4.6.2. As noted in 4.1.6 against a national trend of increasing numbers of people becoming homeless the number of homelessness acceptances in the Borough has fallen by 36% (from 119 to 78 households) due to improved preventative and supportive interventions offered to households presenting as homeless to the Council. This is shown by the 123% increase in the rate of cases that have been prevented or relieved (from 153 to 227 cases). The number of 16-24 year olds who were homeless has increased by two in the last year (from 54 to 56 households). Because of these changes, young people now account for a larger proportion of homelessness acceptances than at any time in the past.</p>
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<p>1.1. Improve the health and wellbeing of our communities and address health inequalities</p>	<p><i>App 1, p12</i></p>
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<p>1.1.1. As reported in previous performance reports, health inequality is a long standing challenge within the Borough. The Living Well and the Early Help Partnerships have been working to address these challenges. Where outturn data is available, a mixed picture of progress can be seen.</p> <p>1.1.2. “Excess weight” continues to show a worsening picture. The percentage of reception children that are classed as having ‘excess weight’ has increased from 24.2% to 25.9% and the percentage in Year 6 has increased from 35.0% to 37.3%. This is higher than the national averages. A ‘Healthy Weight Pathway’ has been agreed for the Health Visiting Service to support earlier identification of families requiring support and onward referral to support services; outcomes for children attending these services are good. The</p>	<p>The infographic shows two red arrows pointing upwards. The left arrow is labeled '7.0% change' and 'Reception children with excess weight (25.9%)'. The right arrow is labeled '6.6% change' and 'Year 6 children with excess weight (37.3%)'. Silhouettes of children are visible behind the arrows.</p>
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information sharing agreements are being reviewed to improve information sharing between key partners to effectively target resources and provide timely support for children and their families. For the older age group, the Healthy Families Team is delivering activity to assist in the improvement of this measure; simultaneously the provision of timely and effective interventions for those children identified as having excess weight in reception will have an impact on this measure in the future.

- 1.1.3. The rate of teenage conceptions 35.1 (per 1,000 female 15-17year olds) has reduced since the previous year (36.8) by 4.6%. This equates to 9 fewer conceptions in 2014/15 (123 to 114) but remains significantly worse than the national average. The Early Help Partnership is reviewing evidence bases and best practice of services to improve this area to refresh the action plan.
- 1.1.4. The percentage of mothers smoking at time of delivery has reduced slightly since year end, from 22.4% to 21.2% with 50 less mothers smoking at time of delivery. Although this is a positive reduction, the rate is still significantly worse than the national average (12%). Significant work has been developed over the last year with the aim to decrease the percentage further. This includes auditing current practice, improvement in Co readings taken at bookings, training for all midwives, change in process to include Co readings taken at 24-28 week home visit and an opt out system for referring to stop smoking service at time of booking. Further plans are being developed for 2015-16 and will be monitored by the Early Help Partnership.
- 1.1.5. Breast feeding initiation rates are improving with 67% which is close to the national average (74%). The percentage of infants being breastfed at 6-8 weeks has dropped from 33.9% at 2013-14 year end to 30.9%. This is significantly worse than the national average of 45.8%. The Council and Shropshire Community NHS Trust are working in partnership to increase breastfeeding uptake through several initiatives and Shrewsbury and Telford NHS Hospital Trust are working towards the UNICEF Baby Friendly Initiative.
- 1.1.6. Although the number of people quitting smoking using our service has reduced since the previous year this is similar to the national pattern and considered to be in part due to the popularity of e-cigarettes. The service is successfully supporting those that come forward to quit with 57% of smokers quitting at 4 weeks compared to 50% in England as a whole. New contracts of the Stop Smoking Services commenced on 1st April 2015. The smoking quitter rate per head of population in the Borough remained significantly better than the England average during the first 3 quarters of the year.
- 1.1.7. NHS Health Checks are aimed at people aged between 40 and 74 to assess risk of heart disease, stroke, diabetes, kidney disease and certain types of dementia. In 2014/15 10,993 people were offered health checks (501 more than 2013/14) of which 4331 have taken up the checks (267 more than 2013/14).

5. MOVING FORWARD IN 2015/16

Strategic Risk Register 2015/16

- 5.1. The strategic risk register enables the Council to meet its statutory requirements under the Accounts and Audit Regulations 2015 Part 2 paragraph 3. *"A relevant authority must ensure that it has a sound system of internal control which – (c) includes effective arrangements for the management of risk"*.

5.2. The strategic risk register is a means for the organisation to identify and manage the substantive issues which could impact negatively on delivery of the Council's priorities. As part of the Council's governance arrangements the risk register is presented twice a year to Cabinet to demonstrate that the Council understands its key risks and how they are being mitigated. It is then provided to the Audit Committee as part of their assurance role, Appendix 2 sets out the key risks which have been identified for 2015/16 and the mitigating actions in place to manage these risks. The register is reviewed and updated as necessary on a regular basis to ensure appropriate management of these risks and mitigations and to make sure they are always current.

6. PREVIOUS MINUTES

- *"2013/14 end of year performance analysis and strategic risk register"* report to Cabinet on 24th July 2014
- *"Driving Delivery of the Council's Priorities: 2014/15 6 month performance analysis"* presented to Cabinet on 11th December 2014.
- *"Service & Financial Planning 2015/16-2017/18"* report presented to Cabinet 26.02.2015.

7. BACKGROUND PAPERS

- Medium Term Council Plan 2013/14 to 2015/16.

Report prepared by Sarah Constable, Partnership and Planning Officer, Telephone: 01952 380599

Appendix 2: Strategic Risk Register

**Strategic Risk Register
Updated June 2015**

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
1.	Death or serious harm of a vulnerable child or vulnerable adult (Breach of duty of care)	<ul style="list-style-type: none"> • Safeguarding Children and Adult Boards (SABs became a statutory requirement of the Care Act from April 2015), Community Safety Partnership and Youth Offending Service Board scrutinise performance, call partners to account and drive practice improvement in the light of learning (e.g. from Serious Case, Safeguarding Adult & Domestic Homicide Reviews) • Created draw down budgets of £0.75m for children and £2.5m for adults for 2015-16 • Work to national inspection standards (Ofsted and Care Quality Commission) and respond to actions required from inspections <p>Children:</p> <ul style="list-style-type: none"> • Workforce development strategy – recruitment and retention, learning and development including Systemic Practice across the council’s children’s workforce • Children’s Services - Systematic quality assurance role for all managers from frontline team manager through to MD and DCS • No staff savings target for Children’s Social Workers <p>Adults:</p> <ul style="list-style-type: none"> • Review of Safeguarding Adult Board arrangements took place prior to April 2015 to ensure compliance with Care Act requirements and new Adult Safeguarding Guidance & Regulations. As a result a new T&W specific Board has been put in place with an Independent Chair • Adult Safeguarding – following review, new multi-agency strategy agreed, regional procedures are now operational and additional adult safeguarding 	LJ/PT

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<p>capacity put in place within Council.</p> <ul style="list-style-type: none"> • Regional Quality Surveillance Group chaired by Chief Officer of NHS England Area Team ensures co-ordination of quality & safeguarding issues across health & social care. 	
2.	Not managing the impact of organisational and culture change in the Council and partner organisations within the constraints of the public sector economy	<ul style="list-style-type: none"> • Engagement and communication with all staff through structured sessions and interactive sessions with Cabinet to support Co-operative working • Regular meetings with Trade Union representatives • Loss of service delivery performance and risk exposure monitored through SMT • New Organisational Development Strategy (see 8 below) • Constitution – assurance by AD's, Finance, Legal, Internal Audit and external reviews (i.e. External audit and government bodies) • Transparency • Codes of conduct • Maintaining communication channels with appropriate senior executives • LSP Executive • Health & Wellbeing Board and Community Safety Partnership • Commissioning and Transformation Partnerships 	RP
3.	Failure to match available resources (both financial , people and assets) with statutory obligations, agreed priorities and service standards	<ul style="list-style-type: none"> • Rigorous service and financial planning and regular monitoring and active management through S&FPG, SMT and Policy Review Group. • Savings programme, service reviews and restructuring • In-year savings exercise as necessary • Rationalisation of Council assets and accommodation • Delivery of capital receipts/rigorous monitoring of capital receipts realisation and impact on the budget 	RP
4.	Failure to deliver financial strategy: <ul style="list-style-type: none"> ○ capital receipts 	<ul style="list-style-type: none"> • If necessary contingency plans reviewing phasing of planned capital expenditure, schemes included in capital programme, alternative potential 	RP

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
	<ul style="list-style-type: none"> ○ delivery of Council savings 	<ul style="list-style-type: none"> disposals and further revenue budget cuts would be prepared • Review of reserves and balances against risk exposure and available contingency • Review of financial policies • Safeguarding Cost Improvement Plan • Adult Social Care Cost Improvement Plan • Commercial Strategy • “Culture Change” to budget management by managers • Specialist legal advice as required • Cabinet Members regularly briefed 	
5.	Failure to manage the impact of poverty and deprivation on future wellbeing of our residents	<ul style="list-style-type: none"> • Council has adopted a “Business Supporting, Business Winning” approach that will provide a joined up, business facing service that provides the conditions to enable businesses to start up, expand and to attract new investors. • Working through/with the LEP to drive economic growth • Community Loans • Telford Crisis Network/Food Bank • “Pride in your community” Project • Target Intervention Area programme • Public Health Grant to drive improvements in health of population/address health inequalities (Public Health outcomes) • Health & Wellbeing Board and Commissioning & Transformation Partnerships 	RP
6.	Major emergency affecting the community and/or ability to provide priority services	<ul style="list-style-type: none"> • Maintaining appropriate, risk based contingency plans (Civil Resilience Team) which are exercised and reviewed on regular basis • Individual Service Delivery Managers are responsible for maintaining and exercising their Business Continuity Plan. These plans would be coordinated 	PT

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<p>corporately and the emergency plan activated if necessary.</p> <ul style="list-style-type: none"> • Maintain appropriate levels of trained staff to be able to respond to an emergency. • Work collaboratively with other LRF partner agencies, maintaining effective working relationships with the relevant bodies • Gorge - Additional funding with conditions received from DCLG which has enabled further stabilisation work in Jackfield which is on target for completion. Need to acquire further funding for other at risk areas within the Gorge. • Operation 'Tangent' – multi agency plan to respond to landslide in the Gorge is in place and is reviewed and exercised regularly 	
7.	Significant business interruption affecting ability to provide priority services	<ul style="list-style-type: none"> • ICT controls – Disaster Recovery facilities in place based on Priority Services in line with Business Continuity Plans • Investment in ICT infrastructure within the server room to provide business continuity • Each Service Delivery Team has Business Continuity Plans to enable them to respond appropriately, these are reviewed annually and updated following team changes and or incidents. • Improvement/upgrade/replacement of key ICT systems 	JR
8.	Key skills shortages (retention & recruitment)	<ul style="list-style-type: none"> • Organisational Development Plan e.g.: <ul style="list-style-type: none"> - skills gap analysis and needs - flexible working policy - staff benefit scheme • Council values, ethos, rewards and recognition 	RP

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
9.	Failure to manage the health & safety risks in delivering the council's functions.	<ul style="list-style-type: none"> • Reviewing, writing and monitoring of health and safety policies through SMT and Health and Safety Committee • Risk based health and safety audit process of service areas and local authority managed schools, which not only audit implementation of health and safety policies but also proactively identifies short comings, actions and controls that need to be in place to manage those risks. Significant findings of the audits are reported back though SMT and Health and Safety Committee. • Internal Health and Safety work to Health and Safety Executive (HSE) guidance and revise Policies and Procedures to ensure compliance with legal standards. Revisions reported back through SMT and Health and Safety Committee • There is a system in place for reporting all accidents, incidents and near misses. Non reportable accidents investigated by service area • All reportable accidents are investigated by Internal Health and Safety Team and significant findings reported to Health and Safety Committee. Other findings reported back to relevant Service area management • Training provided on Health and Safety through a mixture of OLLIE and face to face. • Regular meetings with Trade Unions • Coordination and management of Personal Safety Precautions Risk Register to ensure safety of employees. 	PT
10.	Information Governance	<ul style="list-style-type: none"> • The Council has an Information Governance Framework which includes the Corporate Information Security Policy (CISP) and other policies (Data protection, Information Sharing policies) • Small dedicated team promoting sound Information Governance within the Council and ensuring that good practise is shared across the Council • Training and awareness programme put in place annually and Information Governance module on OLLIE forms part of induction 	RP

Ref	Risk	What are we doing to manage the risk? (Controls)	Lead Director
		<ul style="list-style-type: none"> • Established procedures for investigating and recording data breaches including identifying and communicating lessons learnt • Information Governance compliance programme includes tasks to check on Council compliance with local and legal requirements • Secure Communication System in place • Compliance with Public Service Network (PSN) requirements • Governance includes regular review by Internal Audit and reporting to Audit Committee twice a year to provide assurance on Information Governance • ICT Security Group in place which considers Information Governance matters of new developments/issues arising 	

Existing Strategic Risks Being Managed Through Appropriate Significant Projects

- Single Status
- Better Care Fund and Care Act, Social Care Change Board
- Commercial project(s) for additional income generation
- Housing Investment Programme