

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR2	The council is not financially sustainable	Chief Finance Officer	Policy & Resources Committee	26/01/22	Threat	Treat	Red L5 x I4	Red L4 x I4	Revised: Uncertain

Causes

Link to Corporate Plan 2020-23: Attributes 7. 'How will the plan be delivered' actions to achieve 'A well run council'.

Reductions in central government funding continued through to 2020 under various Comprehensive Spending Reviews. The changes to local government funding introduced in 2013/14 also transferred greater risks to the council, particularly in relation to Business Rate valuation appeals. There is a cumulative impact of reductions in government funding to other public agencies in the city. The greatest risks are from the potential ongoing economic impacts of Covid-19, increasing cost and demands across demand-led services such as social care and homelessness, and rising inflation and cost of living implications. Medium Term Service and Financial Planning was introduced in 2016/17 but two successive one-year local authority financial settlements in 2019 and 2020 made longer term planning difficult. A 4-year planning period has been re-introduced following the 2021 Spending Review announcement and a more comprehensive MTFs will be developed in 2022/23. However, forecasting the Medium-Term Financial Strategy will remain challenging given the continuing uncertainty in funding and taxation levels and the added dimensions of the pandemic and rising inflation. There is also increased uncertainty until HM government determines its long-term approach to Local Government Finance, including the Fair Funding Review, potential reform of business rates and Council Tax, and the funding of social care.

Potential Consequence(s)

The council will need to adapt to the financial impact of Covid-19 and the emerging cost of living increase and continue robust financial planning in a highly complex environment. Failure to do so could impact on financial resilience and mean that outcomes for residents are not optimised.

Existing Controls

First Line of Defence: Management Controls

1. Ongoing review of the adequacy of risk provisions and reserves to support the medium-term budget strategy and to ensure financial resilience.
2. Medium term resource projections (MTFS) and estimates of demographic and other changes in costs to ensure that budget shortfalls (gaps) are identified at the earliest opportunity and planning can begin at an early stage to address predicted gaps including identification of taxation strategies and savings programmes and options.
3. Consultation and engagement with the Leadership (member oversight), cross-party Budget Review Group and partners (particularly the Clinical Commissioning Group 'CCG') for development and approval of the annual budget led by the Executive Leadership Team (ELT) and the Chief Finance Officer (CFO).
4. Targeted Budget Management (TBM) Month 7 (October) and month 9 (December) projections are undertaken to accompany the draft (Nov/Dec) and final (Feb) budget reports to Policy & Resources Committee to ensure in-year trends and pressures are reflected in resource projections and budget setting.

5. Taxbase forecasts and projections are updated and reflected in the Medium-Term Financial Strategy (MTFS) and annual budget proposals and reported by the statutory deadline (31 January).

6. Investment requirements are reviewed and funding flexibility identified to ensure delivery of modernisation and invest-to-save proposals.

* Key control: annual revenue and capital budgets approved by Budget Council in February with a balanced budget and 'funded' capital programme;

* TBM Monitoring regime includes RAG rating of budget performance with an escalating scale of scrutiny and intervention where continued overspending is evident. Interventions focus on development of Financial Recovery Plans approved and monitored by the CFO but can ultimately include 'special measures' such as specific financial management or vacancy controls.

Second Line of Defence: Corporate Oversight

1. Modernisation portfolio monitored by the Corporate Modernisation Delivery Board (CMDDB).

2. Close alignment of Corporate Plan priorities with the annual budget and Medium-Term Financial Strategy (MTFS) demonstrated by aligning investments to the 6 Corporate Plan priorities and testing savings against a prioritisation matrix.

3. Regular monitoring and review by Policy & Resources (P&R) Committee of the MTFS assumptions, the impact of legislative changes; cost and demand pressures; savings programmes; and income, taxation and grant assumptions through TBM reporting and various budget reports (Jul, Nov/Dec, Jan and Feb).

4. RE-adoption by P&R of a longer term planning approach following announcement of a 3-year Comprehensive Spending Review in 2021. Plans will cover a 4 year period and identify investment requirements, including capital investment, to ensure delivery.

5. Ongoing review and challenge of value for money primarily supported by the external audit review and other independent advice (LGA) where appropriate..

6. The cross-party Budget Review Group periodically reviews TBM performance and Treasury Management performance.

7. The Administration's Leader and Finance Lead/s provide challenge and steer for the development of budget proposals by officers.

8. Oversight of pooled funds and integrated arrangements through separate governance arrangements including Health & Wellbeing (HWB) Board and BHCC - CCG officer meetings.

Third Line of Defence: Independent Assurance

1. Annual review of Value for Money (VfM) arrangements by the External Auditor leading to an opinion in the annual audit report. The last review (2019/20) concluded there were no governance issues to report and arrangements to secure VfM and the council's use of resource were reasonable. Next External Audit VFM report (on 2020/21 arrangements) is due at Audit & Standards Committee on 19 April 2022.

2. Internal audit reviews:

Internal Audit reviews on all aspects of financial management, governance and reporting are undertaken on a rolling basis to provide management with assurance and recommendations for improvements.

* 2021/22: Accounts Payable (Reasonable Assurance), City Clean Expenditure (Reasonable Assurance), Capital Programme (Reasonable Assurance)

* 2020/21: Budget Management (Substantial Assurance), Payroll (Reasonable Assurance), Business Rates (Reasonable Assurance), Accounts Receivable (Partial Assurance), Council Tax (Reasonable Assurance).

* 2019/20: Main Accounting System (Substantial Assurance), Treasury Management (Reasonable Assurance), Purchasing Card System (Reasonable

Assurance), BACS Payment Arrangements (Reasonable Assurance), Care Payments (Substantial Assurance), Adult Social Care Income (Reasonable Assurance), Housing Rents (Reasonable Assurance).

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Continue to monitor impact of health sector reforms, including development of the Integrated Care System (ICS) and associated financial implications.</p> <p>Comments: Apr-22: Meetings with the CCG Chief Executive and Chief Operating Officer and the council's Chief Executive and Director of Adult Services (DAS) are in place to ensure alignment of resource and budget planning processes as far as possible. Agreement for pooling COVID-19 resources was approved by Policy & Resources Committee (27 May 20) to ensure an integrated response to hospital management and this is ongoing through to Summer 2022. Monthly reporting of the council's element of the risk share of S31 partnerships is provided via the Targeted Budget Management framework. Agreement to S117 Mental Health Act funding has been reached. covering a 3 year period. Further development of joint funding arrangements has started in relation to the local Integrated Care System (ICS).</p>	Chief Finance Officer	50	31/03/24	01/04/20	31/03/24
<p>Corporate Modernisation Delivery Board includes monitoring and RAG rating of critical VFM and other savings programmes that support the council's current and medium term financial position. Reporting links to TBM reporting which also monitors savings delivery.</p> <p>Comments: March 22: Corporate Modernisation governance arrangements are in place. Corporate Modernisation Delivery Board (CMDDB) continues to provide support and challenge to project/programme managers and Senior Responsible Owners. All budget figures reported link to the TBM budget monitoring process. A revised RAG guidance has been prepared which is resulting in more accurate reflection of the progress. A revised Modernisation Investment programme was agreed by Budget Council in February 2020 and will underpin modernisation programmes and activity over the next 4 years to support achievement of identified savings requirements to address budget gaps in the MTFs. Covid-19 has resulted in some delays to deliver modernisation plans and therefore there are unachieved savings in 2020/21. Officers are working with relevant stakeholders to bring these plans back on track in 2021/22. One of the key corporate modernisation programmes is 'Fair & Inclusive - workforce and services' to strengthen our support for customers and staff from protected characteristics.</p>	Assistant Director, Customer, Modernisation and Performance Insight	50	31/03/24	01/04/20	31/03/24
<p>Meet Targeted Budget Management (TBM) reporting timetable and identify risk mitigation and corrective action where necessary</p>	Chief Finance Officer	50	31/03/24	01/04/20	31/03/24

Comments: Apr-22: The current annual TBM reporting timetable has been produced and agreed. TBM Month 2 is the first reporting period each year to July P&R. TBM reports are regularly shared with the cross-party Budget Review Group (BRG) to ensure additional member oversight of the financial position. TBM reporting will identify risk mitigation and corrective action for overspending areas identified by RAG ratings. The TBM regime ensures that escalating interventions apply where continued overspending (RED RAG) is evident. Interventions focus on additional scrutiny by the CFO and/or Chief Executive Officer (CEO), CFO approval of Financial Recovery Plans, and ultimately potential 'special measures' interventions where overspending persists. All savings programmes will also be monitored through the TBM report and via the Corporate Modernisation Delivery Board (CMDDB). The council maintains a Working Balance of £9m to mitigate general financial risks.

The impact of COVID-19 on the council's finances has been substantial and continues to have limited impacts on income streams as well as costs. The medium term impact will be dependent on the speed of recovery of the visitor and business economies, both of which have direct links to the levels of taxation, fees and charges, and commercial rents receivable by the council.

The COVID-19 impact continues to be monitored closely and is reported regularly to Policy & Resources Committee through TBM reports which separately identify COVID-19 impacts. However, this distinction will be discontinued for 2022/23 reporting.

The current in-year position (Month 9) indicates a forecast underspend of £1.1m on the General Fund, while there are projected overspends on the HRA (£1.7m) and DSG (£0.4m) budgets.

Update and maintain an MTFS and 4-year Budget Planning timetable and process.	Chief Finance Officer	75	31/03/24	01/09/19	31/03/24
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Comments: Apr-22: Medium Term Budget Planning will continue over the current political term and beyond. The budget for 2022/23 was approved by Budget Council in February 2022 and included the annual budget and 4-year projections. MTFS updated are provided, as a minimum, each July and February to P&R to ensure resource projections and predicted budget gaps continue to be identified as early as possible to ensure that the associated savings requirement and proposals can be developed in good time. An updated MTFS identifies potential budget gaps for the following 3 years of around £20m, however, this is highly uncertain and depends on ongoing financial impacts of the pandemic, current inflationary pressures, and government funding support provided beyond 2022/23.

The council has a well-defined budget setting process which begins early in the financial year (May) and works iteratively through to draft proposals in November/December and final proposals and approval of the budget in February. The budget process is designed to ensure that MTFS estimates and assumptions are kept under review using latest information to inform the position for at least the next 3 years with a primary focus on the next financial year which is the only period requiring formal approval by full Council. The budget process includes the following iterative elements:



- Assessment of underlying demographic demands and cost pressures and forward projections of these based on current activity and current financial monitoring trends;
- Assessment of current income collection & recovery performance trends;
- Updated estimates of resources based on latest government information and announcements, and anticipated legislative changes including transfers of services in (new burdens) or out of local government;
- Updated estimates of taxation resources based on latest monitoring information and government information and announcements, including consideration of any expected in-year surplus or deficit;

- Estimates of inflationary pressures based on latest information and announcements, for example, from Local Government Employers (LGA) pay negotiations, reports from the Actuary on Pension Fund liabilities, tracking of indicators including RPI/CPI and other inflationary indicators, and consideration of legislative changes (e.g. known changes to employers National Insurance);

- Iterative development and review of savings proposals to meet the latest estimated 'budget gap'. This is achieved by allocating 'indicative targets' to each directorate as a guideline for developing savings – normally taking some account of the relative scale of budgets and corporate priorities (e.g. providing relative protection to budgets for services to vulnerable people). Proposals are regularly reviewed by ELT and by members of the Administration through agreed and regular member oversight processes (usually led by the Lead Finance member/s). This ensures that member prioritisation and alignment with corporate priorities is built into the process.

All elements are updated at least 3 times, often more regularly, throughout the annual budget setting process.

The ongoing impact of Covid-19 and current inflationary pressures may change the financial planning outlook in future years. The situation is being monitored closely and updates are taken regularly to P&R Committee. Estimated impacts of Covid-19 in 2022/23 have been included in the budget for approval by Budget Council on 24 Feb 2022.

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR13	Not keeping adults safe from harm and abuse	Executive Director Health and Adult Social Care	Health & Wellbeing Board	26/01/2022	Threat	Treat	 L4 x I4	 L3 x I4	Revised: Uncertain

Causes

- The council has a duty to keep adults, for whom they have statutory responsibility for, safe from harm and abuse. Brighton & Hove City Council has a statutory duty to co-ordinate safeguarding work across the city and the Safeguarding Adults Board. This work links partnerships across the Police and Health and Social Care providers.
- Under the Care Act, since 2015, the Local Authority has a statutory duty to enquire, or cause others to enquire, if it believes a person with care and support needs is experiencing or is at risk of harm and abuse and cannot protect themselves.
- There has been an increase in safeguarding concerns received, increase in complexity of adult social care packages and unknown demand in the context of Covid-19 recovery
- There is not enough appropriate accommodation and services in the city for those with significant and complex needs or specific needs such as ABI, Physical Disability, Learning Disability or Mental Health
- Due to workforce shortages in the domiciliary care market, challenges to commercial viability and increased pressure for council's responsibility on quality monitoring, there is higher risk of provider failure
- Changes to government legislation and funding, pressures on the health and care system as a whole and pressures on resourcing and budgets across the sector with rising costs in the provider market

Potential Consequence(s)

- Failure to care for and safeguard adults properly could result in death, abuse, neglect or injury to individuals.
- Failure to meet statutory duties could result in legal challenge and reputational damage to the organisation and public trust
- Inequalities could be created in terms of how disadvantaged groups of our community i.e. multiple and complex needs can access care and support services
- Provider market costs continue to rise which could lead to overspend of budget to meet statutory responsibility
- Service users may need to move out of the city to receive services required
- People are placed in inappropriate accommodation which may present a danger or risk to them or others and people may not get the appropriate services and support to address their needs
- Any failure of delivery across the health and care system could impact on costs and pressures throughout the system and frustrate attempts to release efficiency savings and improve system performance.

Existing Controls

First Line of Defence: Management Controls

1. Performance management across adult social care enables a more informed view on current activity and planning for future service changes and reviewed monthly by Finance & Performance Board. A BHCC Safeguarding Adults performance dashboard is provided monthly and has been brought to the HASC Performance Board in October 2021 for dedicated discussion. Post Eclipse database implementation this dashboard is being reviewed and rebuilt to ensure a strategic overview of safeguarding response is held.
2. Directorate Management Team (DMT) oversee developments and monitor risks.
3. Brighton and Hove Safeguarding Adults Board (BHSAB) work plan and multi-agency partnership commitment. Multi agency safeguarding adult procedures are in place, for preventing, identifying, reporting and enquiring into allegations of harm and abuse, in line with Care Act requirements, endorsed by all 3 Sussex Safeguarding Adults Boards and last reviewed in January 2021. Front line practitioner and manager events are provided within every Safeguarding Adults Review and our senior management team ensure attendance for reflective and systemic learning and engagement.
4. Dedicated resources for: safeguarding adults S.42 decision making; oversight, specialist advice and guidance of complex people in a position of trust; input into Domestic Homicide multi agency review panel; co-ordination of all Deprivation of Liberty Safeguards (DoLS) referrals in line with statutory requirements; continuous professional development requirements in line with Social Work Professional Capabilities Framework
5. Safeguarding referrals can be made by anyone including other professionals, GPs, Police, neighbours, friends. Safeguarding referrals are assessed by Social Workers. Online reporting tool for professionals has been improved and is due to go live.
6. BHCC Quality Monitoring Team oversee process in place to monitor quality of adult social care providers, in partnership with Clinical Commissioning Group (CCG), and Care Quality Commission (CQC), which supports quality and preventative safeguarding objectives. A monthly Service Improvement Panel which is multi agency, meets to discuss emerging themes and preventative responses and is a robust effective risk mitigating factor.
7. Audit Moderation Panel reviews impact of assessment staff training and uptake as well as governance of any emerging safeguarding practice themes for social work staff. This has been on hold for the last quarter due to support of front line operations but is planned to restart. A new Practice Development Assurance Board is in place and meeting quarterly to consider practice development and assurance areas of focus bringing updates from internal partners and data share (for example workforce development strategic SW training dashboard - quarterly).
8. Project boards are set up for any Modernisation projects and governed by the HASC Modernisation Board to oversee progress and monitor benefits and risks.
9. Learning from Safeguarding Adult Reviews (SARs), monitored through SARs subgroup of BHSAB and a dedicated Safeguarding Lead post who ensures we are involved in responding, liaising and prompting other internal partners and in contributing to learning and development within our system. Accessibility to service provision is a key consideration in learning from SAR, systemic change where needed and improvement for adults experiencing risk and disadvantage at the fore of the shared multi agency approach.
10. Homelessness Transformation Programme
11. Housing Allocations Policy framework
12. The Health and Wellbeing Strategy is delivering the Joint Strategic Needs Assessment on people with multiple and complex needs as part of its Living Well and Ageing Well Workstreams. Several internal partners will join the conversation on the Changing Futures Programme (Sussex wide) with external partners and organisations to consider this area and systemic change, development and training needs to bring the system together to consider development needs in this area.
13. Commissioning Intentions

14. Provider failure business continuity plans
15. Provider partnership working through forums, working groups and partnership boards
16. Panels to provide support and challenge – Resource Panel, Transitions, Extra Care, SOAMHs Authorisation, ATS Authorisation, Community Equipment (BHISEP)
17. Covid-Response working groups i.e. Vulnerable People’s Cell, Homelessness & Housing Recovery & Renewal Working Group

Second Line of Defence: Corporate Oversight

1. Pan Sussex Safeguarding Adults procedures group - robust partnership group producing specialist procedural guidance across the Sussex area and protocols and meets quarterly with working groups between to complete multi agency tasks together. Strong multi agency working together is featured consistently and is Sussex wide so takes a broader view. Protocols and guidance designed and issued is often across the County which provides a stronger collaborative approach.
2. Health & Wellbeing Board oversees Joint Health & Wellbeing Strategy and BHSAB annual report.
3. Adult Social Care & Pub Health Subcommittee oversees effective social care commissioning.
4. Care Governance Board oversees quality monitoring of care services and attended by CQC.
5. Learning Disability Governance Group ensures robust links between directorates for LD services.
6. Service Improvement Panel – with multiagency partners, including CCG, to share inspection results, complaints and other issues for care provider quality.
7. Mental Health Oversight Board
8. Housing Committee
9. Strategic Accommodation Board meets to focus on vulnerable adults and children within the housing strategy
10. Homelessness Reduction Board (HRB) promotes reduction and prevention of homelessness, it is chaired by the Chair of the Housing Committee.
11. Practice Development Assurance Board now meets quarterly to focus on Social Work Quality Assurance. The Principal Social Worker chairs this and the Safeguarding Adults Lead will attend on Safeguarding assurance matters.
12. The Audit & Standards (A&S) Committee reviewed previous risks “SR13: Not keeping vulnerable adults safe from harm and abuse” in March 2021 and September 2019, “SR20: Failure to achieve health and social care outcomes due to organisational and resource pressures on the Clinical Commissioning Group (CCG) and Brighton & Hove City Council (BHCC)” in July 2021 and September 2019, and “Not providing adequate accommodation and support for people with significant and complex needs” in September 2019. These risks were merged in November 2021 and due to go to A&S committee in April 2022.

Third Line of Defence: Independent Assurance

1. For the council's in-house registered care services Care Quality Commission (CQC) Inspections on an on-going regular basis. 2021/22: Care Home – WA (Good); 2020/21: Care Home – IL (Requires improvement); 2019/20: Care Homes – CV, BV, TBH (Good); 2018/19: Care Homes – PD, WR, LV (Good), Supported Living – FR (Good), Shared Lives (Good); 2017/18: Supported Living – CR (Good), Home Care (Good)
2. CQC's programme of inspections of all registered care providers are published weekly and available on CQC's website www.cqc.org.uk. These are monitored for local relevance by the council's Quality Monitoring team.
3. Brighton & Hove Safeguarding Adults Board (BHSAB) is independently chaired and meets quarterly with the three statutory agencies for city wide safeguarding assurance. The subgroups are always attended by HASC. The Safeguarding Lead is a member of the SAR panel (multi agency, chaired by

independent sector) where referrals for reviews are discussed in depth. Input is provided in a robust manner for all reviews and related pieces of work for example multi agency audits and action plan reviews required by SAB.

4. Internal Audit

- * 2021/22: HASC Modernisation Programme (Reasonable Assurance), Direct Payments (Partial Assurance), Home Care (Reasonable Assurance)
- * 2020/21: Hospital discharge arrangements (Reasonable Assurance), Care System Replacement Project – Eclipse (Reasonable Assurance)
- * 2019/20: Joint Commissioning (Reasonable Assurance), HASC Temporary Accommodation (Reasonable Assurance), Extra Care Housing (Partial Assurance)

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Ensure there are appropriate services and support for people with care needs in the city</p> <p>Comments: There are a number of projects currently underway to recommission a range of services including care homes, home care & extra care, supported living, community support, mental health provision and equipment services. These contracts are due to be over the next 24 months. There is specific work being completed to understand the need in the city and engage with key stakeholders. The Resource Panel meets three times a week and consists of staff across Adult Social Care and the commissioning and assessment teams meet regularly to understand any current gaps in services and where further commissioning activity is required.</p>	<p>Acting Assistant Director of Commissioning and Partnerships</p>	<p>50</p>	<p>31/03/24</p>	<p>18/11/21</p>	<p>31/03/24</p>
<p>Ensure there is appropriate accommodation and support for vulnerable homeless and rough sleepers</p> <p>Comments: Our Rough Sleeper and Single Homeless Service continues to support vulnerable homeless and rough sleepers across the city.</p> <p>In the latest Rough Sleeper count, which took place in November 20221, 37 people were found sleeping rough. This is down 57% compared to the 2019 count.</p> <p>The service is currently providing 891 bed spaces to vulnerable homeless and rough sleepers, and the majority of these bed spaces are in supported accommodation where residents receive additional support with their needs, such as mental health.</p> <p>Alongside this the service is also:</p> <ul style="list-style-type: none"> • Increasing its Housing First stock to 90 units • expanding its team of Welfare Officers to support people in emergency accommodation • purchasing 30 new homes for rough sleepers as part of its Rough Sleeper Accommodation Programme (RSAP) • leasing 30 properties from private landlords for rough sleepers with a lower level of need 	<p>Assistant Director Housing</p>	<p>50</p>	<p>31/03/24</p>	<p>18/11/21</p>	<p>31/03/24</p>

- working with No Second Night Out and Off the Street Offer providers to help rough sleepers into settled accommodation
- continuing to deliver the Rough Sleeper Initiative (RSI) and revising our Homelessness and Rough Sleeping Strategy Action Plan

High quality social work is provided to ensure that adults are effectively safeguarded	Principal Social Worker	30	31/03/24	18/11/21	31/03/24
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Comments: The Practice Development and Assurance Board (PDAB) has been operational since December 2021. The Board is responsible for the oversight of all practice assurance and development needs, including the monitoring of training targets and identification of emergent gaps and need. The Board is convened bi-monthly and standing agenda items are:

- Resource Panel Learning & Development needs
- Operational Practice Feedback
- Practitioner Engagement Feedback
- Learning & Development Engagement Tracking
- Practice Audits
- Student Placement report
- Experts by Experience engagement report
- Assessed & Supported Year in Employment (ASYE) report

Other items relating to social work quarterly are tabled on an as required basis.

Provide assurance and support to reduce the risk of provider failure in the city	Acting Assistant Director of Commissioning and Partnerships	75	31/03/24	18/11/21	31/03/24
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Comments: Current provider failure plans are being reviewed with an aim to update these over the next 3 months. Alongside this continued governance arrangements are in place through the use of incident management meetings and the role of our public health and quality monitoring and commissioning teams to support providers both in terms of covid related activity and ongoing provider quality issues. Care Governance meetings also provide strategic oversight of quality and provider failure issues jointly with health partners and regulators of services.

Provide assurance of safeguarding adults arrangements across the council and with our partners	Safeguarding Lead	55	31/03/24	01/04/21	31/03/24
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Comments: Risk Response Actions:

1. Ensure meaningful learning across the directorate and with our partners from Safeguarding Adults Reviews, Domestic Homicide Reviews, Coroner's inquests and case reviews

March 22 – 90% completed. All work of the BHSAB continues with the Local Authority a statutory partner. The James SAR (ABI) action plan/Reg 28 progress continues with most areas moving towards completion and some more challenging areas (ABI commissioning pathway for SW undertaking MCA Mental Capacity Act Assessment) being taken forward by the Safeguarding Adults Lead over a period of months and being escalated through the SAB and CCG. SAR Andrew (LD) has been completed and is moving towards an action plan with key themes around a need for increased clinical support of residential care providers of LD to be a focused area of discussion, and communication between clinical and residential care. An increase of SAR referrals has been made locally showing an increased awareness of this process.

The thematic review regarding women with multiple complex needs continues and is expected in the next quarter with high relevance to the safeguarding needs and challenges of the city. The practitioner event and senior management events having now been completed with meaningful engagement observed and the overall review report moving towards completion. Updates and requests for involvement from and for HASC directorate will be fed into the Practice Development Assurance Board to ensure awareness engagement in SAB partnership development work and collaborative oversight.

A multi-agency audit on the role of the Lead Professional is being completed currently with cross directorate BHCC participation being provided.

There are challenges noted in completing the actions of the SAR Christopher action plan around supporting housing needs and transience and further input from across the Local Authority is required with the SAB on this and has been taken forward this quarter which is positive.

2. Provide Assurance that mandatory PREVENT training is embedded in all training induction and development plans within the organisation to support effective identifiers and that the referral pathway is known

March 22: 30%. Strategic training updates on this area are now included in a set of workforce development mandatory training dashboards (quarterly) % accessed training remains low but efforts will continue to monitor this and work on improvements regarding take up. Communication messages (learning and development and in the loop newsletters) have requested staff completion and highlighted the mandatory nature of this training completion and request)

Jan 22: Progress is being made in this area which is positive. A pathway for Prevent information coming into HASC has been mapped out by the Safeguarding Adults Lead with key internal stakeholders in recent months and agreed/now in place. The Channel Lead has provided bespoke training sessions on Prevent to front line assessment teams identified by the Safeguarding Adults Lead which will raise the % training completed figures and importantly, awareness. A Prevent and Safeguarding chapter has been written by the Safeguarding Adults Lead for inclusion in the Sussex wide safeguarding adults procedures which should support multi agency awareness of this important area. A request will be made for strategic training updates on the area of Prevent.



3. Provide Assurance that recognising reporting and responding to abuse and neglect is embedded and that safeguarding training (appropriate to role and task) is being provided to staff across the organisation and offered to partners

March 22: 40% completed. Strategic training quarterly update continues to be provided with key focus on safeguarding with high levels of attendance and courses being used as a refresher, particularly with providers across the city and moderate uptake of safeguarding training in other areas such as

social work. There is increased oversight of this through the quarterly PDAB Practice Development Assurance Board (Social Work) Training uptake in some areas continues to be impacted by operational covid response needs through the winter period.

4. Seek Assurance and post acute COVID review to assure there is a comprehensive clear Disclosure and Barring Service (DBS) check and recheck process in place which reduces risk to the organisation and to the community

March 22: 20% completed this is a relatively new objective and a work in progress. Discussions have been held with HR Colleagues and DMT group and resources allocated to support. A quarterly update has been requested by the Safeguarding Adults Lead.

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR15	Not keeping children safe from harm and abuse	Executive Director, Families, Children & Learning	Children, Young People & Skills Committee	26/01/22	Threat	Treat	 L4 x I4	 L3 x I4	Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 4: 'A growing and learning city' and actions linked to 'Ensure that no child or family are left behind'

Keeping vulnerable children safe from harm and abuse is a legal responsibility of the Council. Legislation requires all local authorities to act in accordance with national guidance (Working Together 2018) to ensure robust safeguarding practice. This includes the responsibility to ensure an effective multi-agency safeguarding response. In Sept. 19 the Brighton & Hove Safeguarding Children Partnership (BHSCP) was established led by the three key statutory partners – Brighton & Hove City Council; Sussex Police & Brighton & Hove CCG.

Potential Consequence(s)

The complexity of circumstances for many children presents a constant state of risk which demands informed and reflective professional judgement, and often urgent and decisive action, by all agencies using agreed thresholds and procedures. Such complexity inevitably presents a high degree of risk. Children subject to abuse, exploitation and/or neglect are unlikely to achieve and maintain a satisfactory level of health or development, or their health and development will be significantly impaired. In some circumstances, abuse and neglect may lead to a child's death.

Existing Controls

First Line of Defence: Management Controls

1. Robust quality assurance and performance management framework embedded and reported quarterly to Directorate Performance Board and onto the Corporate Performance Board bi-annually.
2. Single point of access ('Front Door for Families') for support and safeguarding issues relating to children. The Front Door is multi-agency and has responsibility for and oversight of both the Multi-Agency Safeguarding Hub (MASH) and early help referrals to provide robust risk assessments and information sharing between partner agencies
3. Brighton & Hove Safeguarding Children's Partnership (BHSCP) Work Plan established with strong leadership by the Independent Scrutineer with aligned BHSCP sub-group work plans
4. Safeguarding Practice, Local Management and Child Death Reviews identify learning and action for improvement
5. A strong focus on working with CYP at risk of being missing from care, home and education
6. The local Supporting Families (was Troubled Families) programme targets support to the most vulnerable families
7. Continuous professional development (CPD) and training opportunities offered by the council and BHSCP.
8. In line with the Government's Prevent Strategy, on-going work with the Police, Statutory Partners, Third Sector Organisations and Communities to reduce

exploitation of young people into extremism.

9. BHSCP Threshold document, agreed by all agencies, reviewed in 2021.

10. Relationship based model of social work practice embedded, with Pods (social work teams) in place to provide stability to service users

11. Performance Management information across children's social work enables a more informed view on current activity and planning for future service changes

12. Adolescent Vulnerability Risk Meetings held weekly to consider individual cases where it is considered there is a higher risk of exploitation (sexual; criminal and radicalisation).

Second Line of Defence: Corporate Oversight

1. Early Help system in place and being reviewed throughout 2021

2. Multi agency safeguarding quality assurance processes in place, monitored by the BHSCP Monitoring & Evaluation Subcommittee, meets quarterly

3. Corporate Parenting Board meets quarterly with opportunity for cross-party Members, to receive information on children in care and children leaving care.

Attended by Heads of Service, Assistant Directors and the ED FCL,

4. Cross directorate Annual Practice Week developed where senior leaders meet with front line staff to discuss individual cases, picking up best practice examples of positive impact plus discussing any barriers faced by both workers and families

5. Council appointed VVE co-ordinator who reports regularly to the Community Partnership

6. The A&S Committee reviewed this risk in March 2020 and March 2021.

Third Line of Defence: Independent Assurance

1. Ofsted inspections of social work practice under the ILACS arrangements. Full inspection July 2018 - overall judgement was 'Good'. Action plan developed to take forward recommendations, most recently reported to CYPS Committee in September 2021.

2. Ofsted Focused visit under ILACS framework February 2020 looking at services to children in need and children with child protection plans. Ofsted noted continued improvement made since 2018 inspection.

3. National Probation Inspectorate statutory inspection of the city's Youth Offending Service April 2021 - Outstanding grading across every domain.

4. Annual Engagement Meeting (AEM) with Ofsted HMI for social care and education. Held in February 2021 and covered social care, special educational needs and education, including early years and further education & skills. AEM for 2022 scheduled for June

5. Local Government Association (LGA) review of Early Help processes January 2020. Recommendations will be taken forward as part of a wider city wide Early Help review during 2021/22.

6. The Brighton & Hove Safeguarding Children's Partnership (BHSCP) commissions Independent Scrutiny (IS) for the partnership, whose role and function is to provide external challenge to the business of the partnership, its meetings, subgroups and priorities.

7. Internal audit:

* 2021/22: Child Disability Agency Placements (Reasonable Assurance)

* 2020/21: Education, Health and Care Plans (Reasonable Assurance), Care System Replacement Project – Eclipse (Reasonable Assurance)

* 2019/20: Care Leavers (Reasonable Assurance), Joint Commissioning (Reasonable Assurance).

Reason for Uncertainty in Effectiveness of Controls: The city council has arrangements in place to manage this potential risk which are regularly reviewed; however, despite efforts there are no guarantees that there will not be incidents.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
High quality social work is provided to ensure that Children & Young People (CYP) are effectively safeguarded	Assistant Director - Children's Safeguarding and Care	75	31/03/24	01/04/19	31/03/24
<p>Comments:</p> <ul style="list-style-type: none"> • Audits were not undertaken in Q3 due to the move from CareFirst to Eclipse, however a number of dip sample audits have been undertaken in relation to s.47 work; a review of abandoned assessments and a multi-agency audit at the front door. While each of these has delivered learning and areas of improvement, they have also shown areas of good practice. Regular audit activity will recommence for Q4. • Despite the impact of Covid, the timeliness of SFAs completed on time has continued to remain at a rolling year figure of c. 90% above the national average of 87%. The annual re-referral rate has been maintained at 24%, above the national average of 22.7%. • Work continues on delivering on the action plan following the Ofsted visit in Feb 20. Missing children and CIN remains the main focus of the improvement plan. Since introducing a measure in June 20 on strengthening family plans written in 45 days, there has been steady improvement from 45% to a rolling year figure of 60%. The monthly figure for October 21 was 70%. • The Eclipse roll out took place at the end of November 21. The system is still being embedded and while staff are beginning to feel more confident, they are having to learn a new system. A client overview report enables managers to have an overview of individual cases, this is being used for the day-to-day management of cases. <p>Next Steps:</p> <ul style="list-style-type: none"> To undertaken audits in Quarter 4 Continue to monitor the Eclipse roll out and development of reporting- PSW April 2022 To understand the high use of strategy meetings – Head of Service FDF April 2022 					
Continue to offer a range of family support to our most vulnerable families and complete and implement the city's early help review	Head of Early Years, Youth and Family Support	75	31/03/24	01/01/21	31/03/24
<p>Comments: A range of family support continues to be delivered across the city and there is focused work with vulnerable families where needed. For family coaches this work is delivered to just below the social work level of intervention. Demand for this work is still very high for this service and there is not enough capacity to take step across cases from social work or cases with a lower level of need. The LGA review in 2020 found this work to be effective. The demand for cases and budget pressure for next year is being factored into the current Early Help review. Funding from the Supporting Families programme will continue next year and it has been confirmed that the city will retain its Earned Autonomy status until March 23. The funding will remain the same.</p>					

A full Early Help review has been scoped and is currently being worked through. The first phase is completed, and the initial findings and recommendations have been presented to DMT members, Early Help Partnership Board, cross party working group and partners. A bid for £1m was submitted to the Family Hub Transformation Fund; the outcome will be known in March 2022. A full report will be available early February and a full business case presented to the cross-party working group later in the spring for discussion.

Deliver on a directorate wide performance and quality assurance framework to ensure that safe and effective services are provided.	Head of Safeguarding & Performance	75	31/03/24	01/01/22	31/03/24
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Comments: Children and Learning has an effective QA framework that aims to ensure safe and effective services are delivered.

Within the Directorate Plan there is a target for 85% completion with regular social work audits. This target is currently met and surpassed.

QA Managers support social workers and managers with quality assurance and where they have been unable to physically attend group supervisions, support is provided via video and voice calls. Likewise, support to Pod Managers and Heads of Service on grading and scaling has been provided.

The QA team regularly review the social work audit tool to ensure that it is compliant with social work practice standards, procedures and policy.

Audits regularly also take place in FDF, FPP, Family Coaching and EHCP.

A QA briefing is presented to each DMT Performance Board.

Thematic Audits are completed twice a year. The themes are identified from current practice issues and other sources such as Serious Case Reviews, performance data and regular quarterly audits. Themes have included Anti-Racist Practice, Residential Placements, Child in Need work, JTAI preparation and Re-referrals.

The findings are shared with SLTs and DMT as appropriate.

Annual audit reports for ITF&P and Fostering, Placements & Permanence, Children's Disability Service, EHCP and Safeguarding and Review Service are in place.

BHCC is a member of the SESLIP Quality Assurance Network which seeks to improve the effectiveness of existing quality assurance activities. The Network meets each quarter and the QA Manager, Performance & Safeguarding attends on behalf of the local authority. The group has developed a Common Components of a Quality Assurance Framework which aims to develop and share 'good quality assurance of practice and improve consistency across the region'.

The council continue to be compliant with all statutory reporting requirements.

The Performance Team provides data support to the Directorate to support its QA function. Providing structured reports for DMT Performance Board and regular reporting for all SLTs.

The Performance Team and the QA Team support the functions of the Brighton & Hove Safeguarding Children's Partnership with the multi-agency Dashboard Reports and regular multi-agency audits twice a year.

The team is ensuring that all statutory performance reporting for the directorate is compliant with requirements and returned in a timely way.

Current support to our new Children's recording system, Eclipse, from both the Performance Team and QA Managers is helping to ensure a good QA function continues in the new system.

Measures of Success:

- 85% compliance with QA activity
- Compliance with statutory performance reporting requirements
- Safeguarding and Review Service QA Programme implemented Oct 2020
- SEND QA Programme implemented April 2021
- Findings from QA activity are reported to SLT and FCL Performance Board (within the agreed timeframe)

The Brighton & Hove Safeguarding Children Partnership (BHSCP) will continue to monitor safeguarding delivery across all agencies in the city to ensure effective safeguarding is in place.

Head of Safeguarding & Performance 75

31/03/24 01/04/19 31/03/24

Comments: The Brighton & Hove Safeguarding Children Partnership (formerly the LSCB) launched its safeguarding arrangements on 29/09/19. A Steering Group comprising of the below meets quarterly.

- The nominated officers for the three lead safeguarding partners
- The independent scrutineer
- The designated professionals for the 3 lead safeguarding partners
- The chairs of the BHSCP subgroups
- A representative from the Community Safety Partnership (CSP)
- A professional to represent schools and early years
- People with expertise (including members of the Youth Reference Group) if required to discuss specific issues.

This group is responsible for the following:

- Analysis of multi-agency statistics, performance measures and outcomes
- Scrutiny of reports
- Section 11 self-assessments and challenge events
- Practitioner and partnership challenge events
- Oversight of Child Safeguarding Practice Reviews (CSPRs)
- Developing & overseeing the overarching strategic aims of the BHSCP

The current Business Plan runs from April 2020 - March 2023 and is the first plan under the new safeguarding children partnership arrangements. The priorities were determined via consultation and based on identified local and national areas of safeguarding concern. They are delivered by the BHSCP's subgroups.

Priority 1 - Partnership Engagement and Accountability Aims: Embed the principles of safeguarding children citywide.

Priority 2 - Safeguarding children from violence and exploitation: Objectives: Ensure there is a clear understanding of the scale of complex and contextual safeguarding within Brighton & Hove and that the needs of children and young people affected by any form of violence, from any source, are identified and assessed effectively resulting in timely and appropriate intervention.

Priority 3 - Neglect: Aims: The needs of children and young people affected by neglect are identified and assessed effectively resulting in timely and appropriate intervention

Priority 4 - Mental Health and Emotional Health and Wellbeing: Aims: Consistently good service provision for children who need support for emotional and mental health issues.

An annual programme of multi-agency thematic auditing to test the effectiveness of local safeguarding arrangements is in place. Learning from audit activity will continue to feed into the BHSCP learning and development offer and cascaded across the safeguarding partnership. A multi-agency audit programme is developed, agreed with partners and findings shared. This is supported by the Quality Assurance Programme Manager.

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR24	The council is unable to provide an effective welfare support response to households facing financial hardship.	Chief Finance Officer	Policy & Resources Committee	26/01/22	Threat	Treat	Amber L4 x I3	Amber L3 x I3	Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 2: A City Working for All and action 2.1 Build community wealth

Covid-19 has meant significant economic, business, social and welfare impacts on how Brighton & Hove City Council (BHCC) and its partners provide support and rollout Universal Credit (UC). There are increasing implications for staffing levels within services; rent collection; council tax collection, and pressures on social services and homeless services. The voluntary sector is also reporting a high level of strain on their resources. A government decision to discontinue the £20 pw Universal Credit top-up beyond September 2021, plus increases in fuel, food and rental costs led to a very difficult winter for low income households and high demand for welfare support. Crucially the Council response was significantly bolstered by the government's Household support Fund (£2.1m). With cost of living pressures exacerbated by the Ukraine crisis and escalating fuel costs the Council will need to ensure that more restricted funding in 2022/23 is effectively targeted to people and families in need. The council will be distributing the Council Tax Energy Payment (Rebate) (£16m), the associated discretionary element of the scheme (£0.6m), and a further tranche of the Household Support Fund (£2.1m) in 2022/23 alongside existing discretionary housing and Council Tax Reduction funds.

Covid-19 redefined the approach taken towards welfare support by BHCC and partners. The strategic medium and long term delivery arrangements are to be determined as the cost of living impacts evolve. A strategic report will be presented to committee in May 2022 but the more limited funding in 2022/23 does not coincide with a projected drop in demand, particularly looking ahead to next winter.

The lead agency for UC is the Department for Work and Pensions (DWP) who have adapted and streamlined their processes and brought in extra resources to process claims. However, they are now in the process of moving to a post-Covid model with an emphasis of reducing unemployment to pre-covid levels. The full working age Housing Benefit caseload is scheduled to transfer to UC by the end of 2024.

Potential Consequence(s)

Increased service pressures on housing, social services and voluntary sector providers such as food banks and money advice services. Greatly increased volume of Council Tax Reduction and Universal Credit claims during 2020-21 and 2021-22, and levels are still higher than before the pandemic.

Increase of food poverty, fuel poverty, money flow, property rent arrears, and growing Council Tax arrears
Significant extra pressure on local discretionary budgets and funds.
Decreased rent and Council Tax collection.

Existing Controls

First Line of Defence: Management Actions

- a) BHCC Local Discretionary Social Fund (LDSF) provides assistance with emergency food vouchers, fuel etc. (currently topped up by Household Support Funding).
- b) Community Hub deals with requests for help from the public. Referral routes now established to welfare rights, money advice, food banks, etc.
- c) Mature links with Community & Voluntary Sector (CVS) at a strategic and operational level ensure an appropriate city-wide response with additional funding from Household Support Funding.
- d) Contain Outbreak Management Funding (COMF) £610k to support projects regarding welfare managed by Welfare Support Manager (Strategy) some of which will carry forward to 2022/23 to ensure continued support.
- e) £2.1m Household Support Fund for specific support (50% households with children) managed through corporate cross-working group as established during Covid – providing multi-organisational support for residents from October 2021 to March 2022. The Household Support Fund is expected to be repeated for the 6 months April to September 2022 (£2.1m).
- f) The council's welfare support hub, including Welfare Rights, LDSF and benefit cap support, will deal with new cases coming in, as per current procedures.
- g) Report to committee in May 2022 presenting current mitigations and/or policy options in response to constantly changing demands including the cost of living increase.

First Line of Defence: Management Controls

1. Cross service and multi-agency strategic meetings to co-ordinate full range of welfare responses.
2. BHCC Welfare Rights, Welfare Reform and Discretionary Help and Advice teams monitor welfare changes and coordinate a corporate response to them.
3. Ongoing meetings are held with Department for Works Pensions (DWP) about change to Universal Credit (UC) and how we respond to vulnerability.
3. Council Tax Reduction (CTR) rules can be set and changed by the BHCC. Revised scheme from April 2022 moving to an earnings banding scheme.
4. Provide case working support directly to customers most significantly affected by the changes, eg benefit capped, or contesting a DWP benefit decision, or being given benefit advice and support.
6. Regular links maintained with advice and voluntary sector so impacts on citizens can be judged and assessed.
7. Corporate Debt Policy has now been embedded and is being mainstreamed. As part of this, the welfare support function is linked in to ensure sensitive and ethical debt collection.
8. Various discretionary welfare funding streams are being carefully monitored and adjusted using temporary funding to respond to changes in demand.
9. £150 Energy boost payment via Council Tax Service from April 2022. Recommendations for associated discretionary scheme to committee in April 2022.
10. Next tranche of the Household Support Fund to be distributed following approvals at either April or May P&R depending on when guidance is received.

Second Line of Defence Corporate Oversight:

1. Executive Leadership Team (ELT)
2. Full Council
3. Policy & Resources Committee
4. Reviewed by A&S Committee in March 2021, March 2020, March 2019.

Third Line of Defence Independent Assurance:

1. Internal Audit:
 - * 2021/22: Welfare Discretionary Funding (Reasonable Assurance), Housing and Council Tax Benefits (Substantial Assurance).
2. Department for Work & Pensions (DWP) oversee distribution of the Household Support Fund
3. Department of Health & Social Care (DHSC) oversee the Contain Outbreak Management Funding (COMF)
4. Department of Levelling Up, Housing & Communities oversee the Energy Payment and associated discretionary fund.

Reason for Uncertainty of Effectiveness of Controls: The significant economic, business, social and welfare impacts of the recovery from Covid-19, the Ukraine crisis, global fuel costs, and national inflation. The existing known difficulties for BHCC and its partners to deliver welfare financial support, in terms of resourcing and identifying specific vulnerable households in the city. A government decision to discontinue the £20 pw Universal Credit top-up beyond September 2021, plus increases in fuel, food and rental costs, and the end specific welfare support funding from March 2022.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Consider the implications for any new Council Tax Reduction schemes for future years and a new model and to further simplify the approach.	Chief Finance Officer	100	31/03/22	23/04/20	31/03/22
Comments: New scheme approved and will be implemented for April 2022. The new scheme moves to an earnings banding approach, increases support by £0.4m, and enables some support to JAM (Just About Managing) households just outside of the welfare system.					
Continually review impact of Universal Credit (UC) and prepare for migration of remaining cases	Revenues & Benefits Manager	70	31/03/24	04/05/15	31/03/24
Comments: The pandemic has changed the situation with Universal Credit. Applications surged and the DWP broadly kept up with demand, ensuring that claims were assessed. Pre-Covid the DWP was piloting Managed Migration of legacy benefit cases onto Universal Credit (cases where for example, housing benefit was still in payment). This did present a risk to the council, as it was unknown how that process would impact on the claimants in the pilot area (Harrogate), or the broader timetable for national implementation. Since the pandemic, it is even less clear what the timetable will be, or indeed what stage the DWP's pilot is at. However, the government has confirmed that the pilot is now on hold until later in 2022. There is no indication					

of when bulk migration of remaining cases may happen but the commitment to complete the transfer by the end of 2024 remains unaltered. Ultimately, some cases are likely to remain on Housing Benefit, such as pension age, temporary accommodation and supported accommodation. The UC project in Brighton and Hove maintains a monitoring brief, and links up services strategically within the council, with the Community and Voluntary Sector and with other interested parties in the city (for example landlords in the private sector and Registered Social Housing). This ensures that that the council can identify issues of local or national significance. There is advanced DWP joint working embedded in the Welfare Support service, and as an ongoing outcome of the Covid Response.

Keep relevant staff and stakeholders up to date with information as it becomes available	Revenues & Benefits Manager	75	31/03/24	01/06/15	31/03/24
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Comments: The established working relationships on an operational level have strengthened during the pandemic, linking key teams in the Welfare, Revenues & Business Support service with others involved with supporting vulnerable people in maximising their finances, and maintaining their tenancies, for example Housing Income management, Housing options, Adult Social Care, Communities Equalities & Third sector and the Family Information Service. There are also strong links with the local Jobcentre Plus via a DWP partnership manager, Jobcentre managers and work coaches. Welfare Rights staff (in Revenues & Benefits) reach out via the Advisory Services Network into the voluntary advice sector and provide training for council teams and external advisors. There is also a strand of work exploring the pathways between debt and mental health services, and this is drawing together new stakeholders in a productive discussion. The risk end date has been extended because the government timetable for welfare reform (specifically UC) has been extended. Work will continue throughout 2022 and beyond.

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR29	Procurement non-compliance and ineffective contract performance management leads to sub-optimal service outcomes, financial irregularity and losses, and reputational damage.	Chief Finance Officer	Policy & Resources Committee	18/11/21	Threat	Treat	Amber L3 x I4	Amber L3 x I3	Revised: Adequate

Causes

Link to Corporate Plan 2020-23. Attributes 7 'How will the plan be delivered' actions to achieve 'A well run council' and action 2.1 Build community wealth. The City Council has recognised that there are some areas of weakness in contract performance management which have led to some serious failures in managing poorly performing contractors. There are over 200 contract managers throughout the council, of which less than 20% could be considered as 'professional'. Many of those identified manage contracts only as an 'add on' to their regular job, and often they are not budget holders. To address this, additional funding has been provided to maintain the core Corporate Procurement Team expertise, support delivery of a risk based and spend analysis approach which focuses resources and effort on high value, high risk contract areas. Procurement compliance to Contract Standing Orders requires a full understanding of legislation and internal governance procedures. In order to deliver sustainable culture change and improve efficiency we must continue to address:

- Historical sub-optimal contract specifications
- Initial failures to identify options for delivery, including reverting to 'what we've always done'
- Lack of willingness, time or capacity to test existing suppliers against the market.
- Significant reduction in resources in 'back office' functions and service management capacity reducing capability to effectively manage
- Lack of commercial skills and contract management skills / expertise throughout the authority combined with Contract Management often being viewed as an 'add-on' to normal duties rather than a core responsibility
- Failure by management to recognise the importance of an effective contract management team or officer
- Lack of willingness and/or negotiation skills to hold 'difficult conversations' with suppliers
- Low levels of senior engagement with suppliers.
- Poor understanding of markets, buying options and delivery models
- Lack of corporate oversight of contracting and commissioning as there is no corporate reporting mechanism compared with, for example, financial performance (TBM).
- Ongoing resource pressures in Procurement means this risk still exists. As demand increases, Procurement and Contract teams Performance are increasingly in reactive mode which may mean that contracts 'fall through the net'.

Potential Consequence(s)

1. Investigations into current contracting practice continues to show that outcomes are unlikely to be optimal, potentially resulting in lower Value for Money (VfM), inefficiencies, inconsistent levels of management oversight and a failure to achieve outcomes.
2. Legal challenge from suppliers / service users

3. Reputational damage for the council - both the administration and officers
4. Poor outcomes or failure of services and associated impact on service user
5. Diversion of scarce resources to resolve issues, currently resolution is only being performed by a small number of Contract Managers and through intervention of the Contract Performance Team.

Existing Controls

First Line of Defence: Management Controls

1. Utilise the Procurement function to ensure that appropriate and legally robust commercial delivery options are chosen and robust contracts are in place
2. Robust contract Key Performance Indicators (KPIs) in place so that contract performance and risks are understood
3. Requirement to comply with Contract Standing Orders supported by other procurement guidance and training
4. Declaration of Interest Processes (Members and Senior Officers)
5. Relevant paragraphs of the Employee and Member Codes of Conduct
6. Fraud Awareness Training e-learning delivered by Internal Audit.

Second Line of Defence: Corporate Oversight

1. Well-resourced corporate contract performance management oversight function to train and challenge contract managers and commissioners
2. Progress reviewed by Corporate Modernisation Delivery Board (CMDDB), Members Oversight Group and Members Procurement Advisory Board (PAB)
3. Audit & Standards Committee reviewed the risk in March 2021, March 2020, March 2019.

Third Line of Defence - Independent Assurance

1. Internal Audit:

* 2021/22: Procurement Compliance – Phase 1 & 2 (Minimal Assurance), Highways Contract Management (Reasonable Assurance), Highways Maintenance (Reasonable Assurance)?

* 2019/20: Contract Collusion (Reasonable Assurance), Grants to community and voluntary organisations (Reasonable Assurance)

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Continue to identify changes in staff structures to ensure that contract managers are identified, understand their role and deliver to the standards expected by the Council	Procurement Strategy Manager	75	31/03/22	14/03/19	31/03/22
<p>Comments: Procurement has a database of contract managers which is periodically updated every six months against contracts owned by budget holders. Reports from the finance system are available re budget holders and Corporate Procurement Team ask them for verification that the contract managers are still in place or any changes in staff. The Procurement Team's 'Forward Plan' is kept regularly updated and ensures that responsible officers are named in the plan which is regularly considered by Procurement Advisory Board.</p>					

Initiate mandatory procurement and contract management training linked to contract standing orders and contract management e-learning module	Procurement Strategy Manager	10	31/03/23	14/03/19	31/03/23
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Comments: The e-learning modules will be completed in 2021/22 and promoted throughout 2022/23. These will be targeted at all contract managers. Reports will be prepared for ELT. The reports will propose a) mandatory contract management training, including group sessions by service area b) contract officers will be required to have to complete the e-learning before attending which will be monitored c) the Procurement Team will report attendance to ELT.

Publicise importance of full compliance to contract standing orders when tendering, ensuring contracts are well managed and the development of contract management where performance has not met expectations	Chief Finance Officer	75	31/03/23	14/03/19	31/03/23
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Comments: Since October 2019 the CP Team has presented management information to ELT with the aim of cascading to service areas. This identifies areas for improvement and successful practice. These updates to ELT and DMT's will remain on-going.

Risk Code	Risk	Responsible Officer	Committee	Last Reviewed	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR37	Adverse impact on health outcomes and business continuity from high levels of Covid transmission and outbreaks in the city.	Executive Director Health and Adult Social Care	Health & Wellbeing Board	26/01/22	Threat	Treat	Red L4 x I4	Amber L3 x I4	Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 6 'A healthy and caring city', action 5.1 'Increase healthy life expectancy and reduce health inequalities'. The pandemic of COVID-19 represented unexperienced challenges to the city and the council's ability to work with its partners and others to deliver services, including statutory, to support service users, residents, businesses and employees of the council. COVID-19 is now part of our everyday life. The city has responded to COVID-19 since March 2020 through protective measures. The 'Living with COVID' policy and guidance has removed the majority of these protective measures from April 2022. There is still more clarity to be provided, although there is assurance that vulnerable people will be protected. Currently there are no regulations in place to investigate and take action regarding Covid. However, if national legislation is re-introduced officers within regulatory services would be able to undertake this work if required.

Potential Consequence(s)

1. increases in numbers suffering physical and mental illness; and deaths
2. increases health inequalities and outcomes
3. compromised ability to deliver statutory duties and business as usual
4. not delivering safe services and meet needs
5. trust and confidence and reputation of the council affected
6. damage to city economy and the wealth of citizens
7. capacity of staff, providers and contractors tested
8. health and wellbeing impact on those delivering services
9. emergency operating arrangements increase budget overspend
10. sustainability of local tax base affects council's financial position to deliver Corporate Plan
11. the council may have to retain 'surge response' which will require additional organisational capacity

Existing Controls

First Line of Defence: Management Action

1. Health Protection & Screening Forum for Infectious Diseases to monitor COVID-19

2. Monitor data on COVID-19 cases outbreaks in care homes and settings
3. Care Homes Incident Management Team meetings held regularly
4. Regular communications on the council's website and intranet and press releases
5. Government guidance is received, monitored and actioned
6. New partnerships formed as a result of the pandemic will be maintained
7. Monitor staff absences and impact on services due to COVID-19

Second Line of Defence: Corporate Oversight

1. ELT maintains oversight of Covid-19 figures and response measures
2. Health & Wellbeing Board
3. City Council continues to link with Local Resilience Forum (LRF), Public Health England and National Health England to address response to COVID-19
4. Emergency Resilience Team connected with work with neighbouring local authorities and blue-light services

Third Line of Defence:

1. The Local Government Association (LGA) Peer Review visit on 29 March 2021 included the council's arrangements to recover from the pandemic.
2. Internal Audit counter fraud work on Business Grants and certification of other Covid Grants in accordance with central government department requirements.

* 2021/22: Traffic Demand Management (Grant Certified), Covid-19 Emergency Active Travel (Grant Certified)

* 2019/20: Public Health (Reasonable Assurance)

Uncertainty of Effectiveness of Controls is that this is an unprecedented global incident and we have learnt and continue to learn from the experience.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Business Continuity Plans (BCPs) are quality assured and regularly updated with corporate oversight for any current and future pandemics	Head of Safer Communities	75	31/03/23	17/11/21	31/03/23
<p>Comments: Reports are completed for the Executive Leadership team (ELT). The last report was presented at the end of June 2021. This showed that 73% of business continuity plans are in place and are quality assured, with a further 10% partially complete. 17% of services have not completed business continuity plans. Officers are currently looking at a refresh of the reporting timetable to ELT. Requests for plans and updates are sent to relevant directors on a quarterly basis.</p>					
Maintain outbreak management plan in line with the latest Government guidance, including prevention measures in	Director of Public Health	5	31/03/23	01/04/22	31/03/23

high risk settings in partnership with other directorates that provide or commission those services and UKHSA and prevention messages for residents (in line with Living with Covid)

Comments: New guidance was released on 1st April 2022. We are currently reviewing this guidance and will reflect this in our outbreak management plan.

Ensure an appropriate service risk assessment is in place, reflecting Public Health/Government guidance which covers measures needed for the prevention of Covid transmission in the workplace

Interim Head of Health & Safety

90

31/03/23

01/04/21

31/03/23

Comments: Throughout the Covid-19 pandemic the Health & Safety team have worked to interpret government guidance and collate this into a Covid Risk Assessment, as required by the Regulations. This has included a Covid-19 template Risk assessment that services could adapt and a School specific Risk Assessment. It also involved advice and guidance around PPE usage which was incorporated into a PPE rationale. The H&S team also completed a Schoolwide audit and inspection of Covid Risk Assessments to determine legal compliance, as well as an inspection of a number of services/teams across the Council.

Since April 2022, under the Living Safely with Respiratory Infections advice, the Government guidance has changed to remove the specific need for Covid-19 to be referred to in Risk Assessments. The precise format of the guidance is currently being formulated.