

Strategic Risk Monitoring Report

Quarter Q4, 2022/23

RISK	IMPACT / CONSEQUENCE				
LIKELIHOOD	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Critical (5)
Almost certain (5)	5	10	15	20	25
Highly likely (4)	4	8	12	16	20
Probable (3)	3	6	9	12	15
Possible (2)	2	4	6	8	10
Rare (1)	1	2	3	4	5

Summary overview

Ref	Risk Owner	Strategic Risks	Residual risk score	Direction of travel
SR 10.8	Colin Chick	Dept for Transport's Covid Bus Recovery Subsidy (BRS) is withdrawn	High 20	⇨
SR 5.3	Sarah Scott	Adult Social Care provider failure	High 20	⇨
SR 2.4b	Paul Blacker	Changes to future funding	High 20	⇨
SR 8.1	Mandy Quayle	Difficulties in recruiting and retaining experienced workers	High 20	⇨
SR 7.6	Sarah Scott	Unable to support all those who can, to live independently at home	High 16	⇨
SR 14.1	Colin Chick	Implementation of the Community Infrastructure Levy	High 16	⇨
SR 7.1	Sarah Scott	Failure to protect vulnerable adults in Gloucestershire	High 15	⇦
SR 3.1	Mandy Quayle	Failure to ensure ICT remains fit for purpose.	High 15	⇨
SR 3.2	Mandy Quayle	Failure to protect the council's key information and data from Cyber Attack.	High 15	⇨
SR 10.4	Mark Preece	Insufficient Business Continuity Management	High 15	⇩
SR 7.5	Ann James	Insufficient workforce capacity in Children's services	Medium 12	⇨
SR 7.7	Ann James	Failure to develop sufficient placement capacity	Medium 12	⇨
SR 10.6	Mark Preece	Capacity and capability to deliver Fire Service improvement	Medium 12	⇨
SR 11.1	Rob Ayliffe	Failure to protect the confidentiality, integrity and availability of information.	Medium 12	⇨
SR 12.1	Colin Chick	Failure of GCC/Gloucestershire to mitigate and adapt to a more volatile climate	Medium 10	⇨

Summary overview cont'd

Ref	Risk Owner	Strategic Risks	Residual risk score	Direction of travel
SR 8.2	Mandy Quayle	Staff fatigue and 'burnout'	Medium 9	⇨
SR 1.2	Rob Ayliffe	Capacity for Procurement activity	Medium 9	⇨
SR 7.4	Kirsten Harrison	Failure to Close the gap in Educational Outcomes (SEND)	Medium 9	⇨
SR 7.8	Sarah Scott	Risk of legal action being taken due to failures in completing Deprivation of Liberty assessments.	Medium 9	⇨
SR 7.2	Ann James	Ineffective Social Care Practice	Medium 9	⇨
SR 1.1	Rob Ayliffe	Failure in corporate governance	Medium 8	⇨
SR 1.4	Rob Ayliffe	Contract management capacity	Medium 8	⇨
SR 6.1	Pete Bungard	Relationships with key partners	Medium 8	⇨
SR 7.9	Siobhan Farmer	Insufficient planning and oversight of international resettlement and asylum immigration	Medium 8	⇨
SR 7.10	Sarah Scott	Implementation of the 'Care Cap' cost of care exercise	Low 6	⇩
SR 1.5	Rob Ayliffe	Compliance with Public Sector Equalities Duty	Low 6	⇨
SR 1.3	Steve Mawson	Failure to ensure the effective management of Health and Safety	Low 6	⇨
SR 2.4a	Paul Blacker	Reductions and changes to funding (current year)	Low 5	⇨

Matters arising this quarter:

Risks Escalated:

- 7.1 - Failure to protect vulnerable adults

Risks Reduced

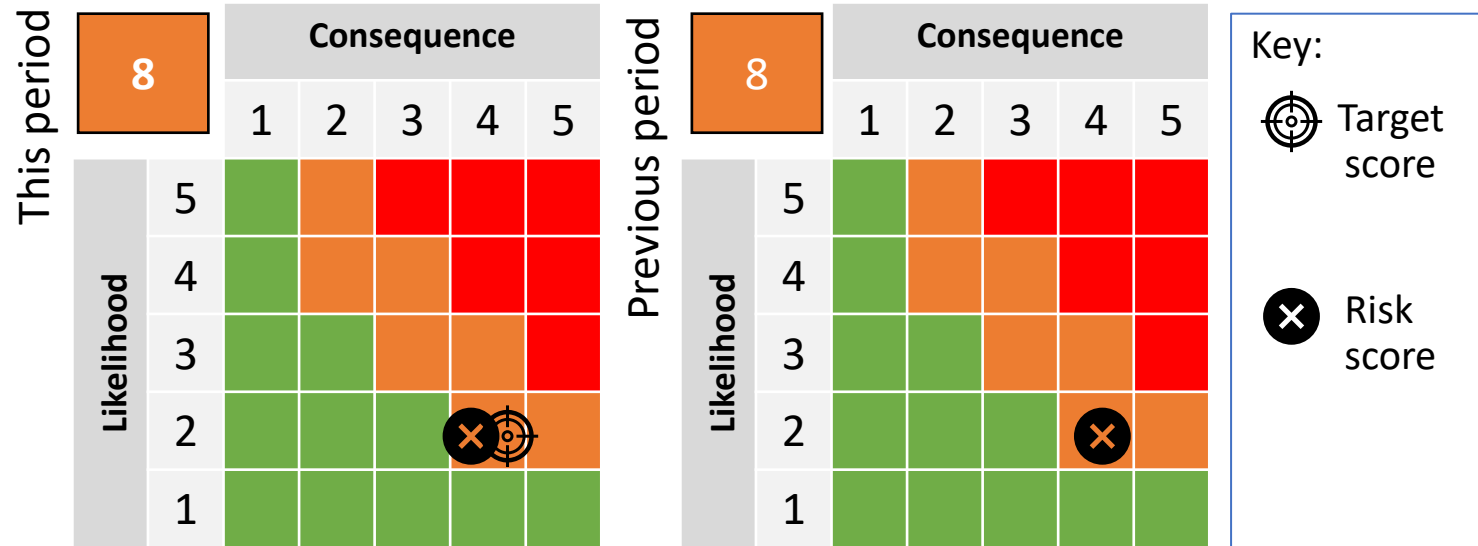
- 7.10 - Implementing the Care Cap in ASC
- 10.4 - Insufficient Business Continuity

SR 1.1 – Failure in Corporate Governance

Failure in corporate governance which leads to service, financial, legal or reputational damage or failure.

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Current controls:

- 1:1 Interviews with Members
- Scrutiny Function
- Risk Management Framework
- Leadership training
- Robust reporting processes/framework
- Member / officer protocols
- Performance Management
- Annual Governance Statement
- Job Descriptions
- Statutory powers
- Section 151 officer/Monitoring Officer/Head of Paid Service
- Cabinet and Committee reports
- Medium Term Financial Strategy
- Anti-fraud & corruption policy
- Emergency management
- Health and Safety Strategy
- Constitution
- Protocols for gifts / hospitality
- Managers Induction Programme
- Appraisals
- Council Strategy
- Fraud Response Plan
- Whistle Blowing procedures
- Internal/External Audit
- Code of Conduct for Members
- Code of Conduct for Employees

Period comments:

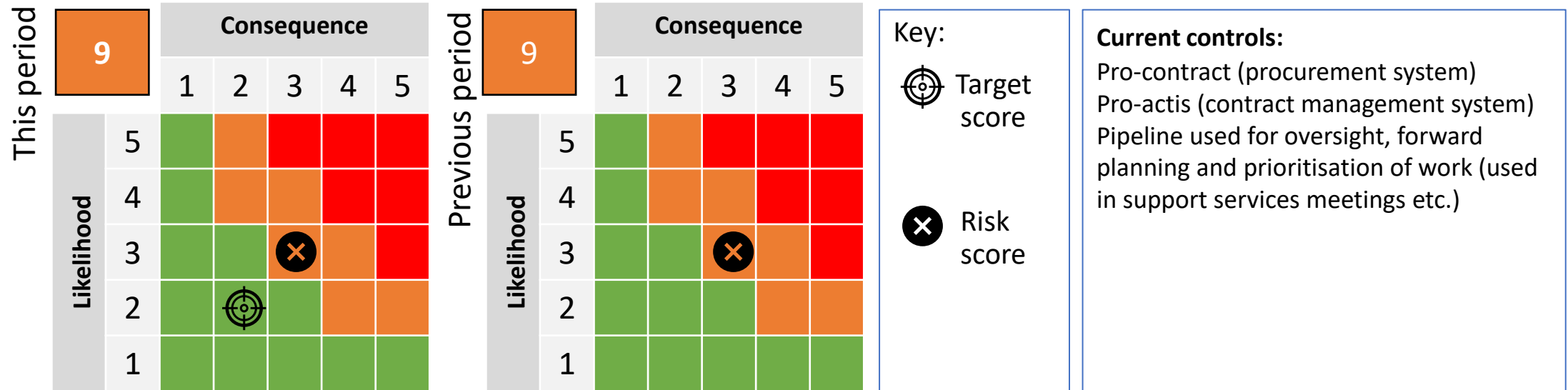
No significant issues have arisen this quarter. Work on this year's Annual Governance Statement is progressing well, and has helped to drive increased compliance across some key areas.

SR 1.2 Capacity for Procurement activity

Resources are insufficient to deliver the volume of procurement and re-procurement activity, leading to failure to secure the intended outcomes and/or best value through contracts

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Period comments:

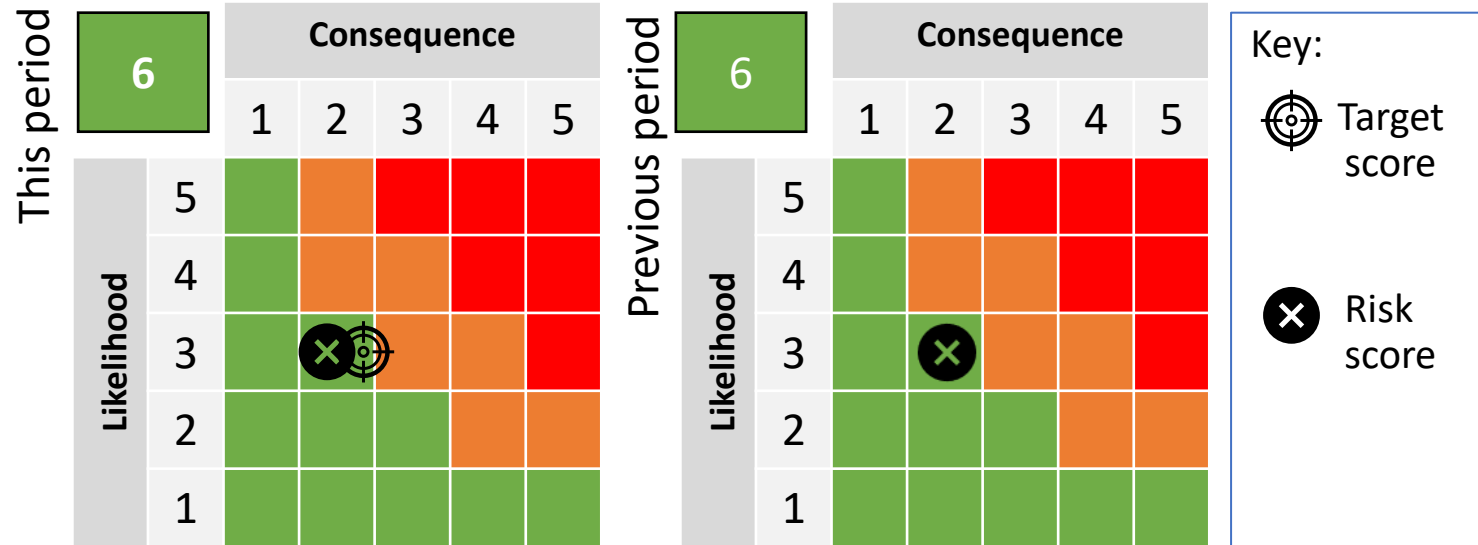
The first phase of the Procurement Toolkit has been signed off and is ready to be launched with commissioners. The Commissioning Intentions for 2023/24 were agreed alongside the MTFs, and identify the priorities for the coming year. The procurement pipeline report is being shared quarterly with Directorates to enable them to check which contracts are coming up for renewal and plan ahead. Nevertheless, the volume of commissioning activity still means that resources are stretched and further work is needed to bring this risk to its target level. This will include the ongoing development of the toolkit, supported by training and communications across directorates, and improved Management Information.

SR 1.3 Failure to ensure the effective management of Health and Safety (new risk)

Failure to ensure the effective management of Health and Safety, resulting in death or serious injury to employees/ public and legal action against the Council

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Current controls:

Reviewed Corporate Health and Safety Policy. SHE system procured for accident reporting, risk assessments, audits and inspections. Training for managers responsible for conducting regular risk assessments. Managers and staff induction. Member and Director SHE Champions. Access to competent health and safety advice and guidance from the SHE service. An Employee Engagement and Consultation Group is being set up

Period comments:

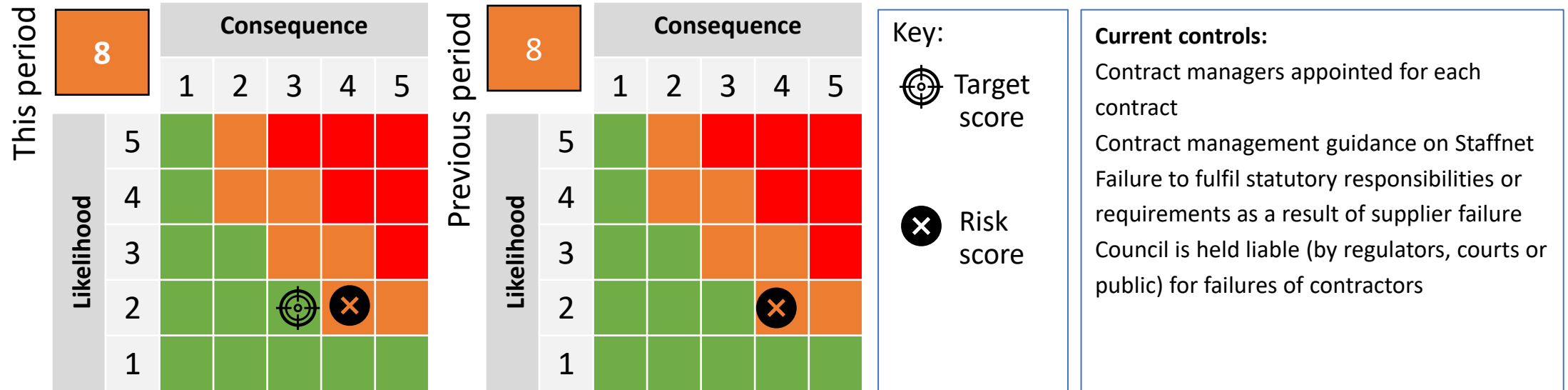
No significant issues this period.

SR 1.4 Contract management capacity

Inadequate contract management or quality assurance arrangements result in GCC being unable to identify, control or manage risks (including health and safety risks) associated with a provider's actions or failure to act.

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Period comments:

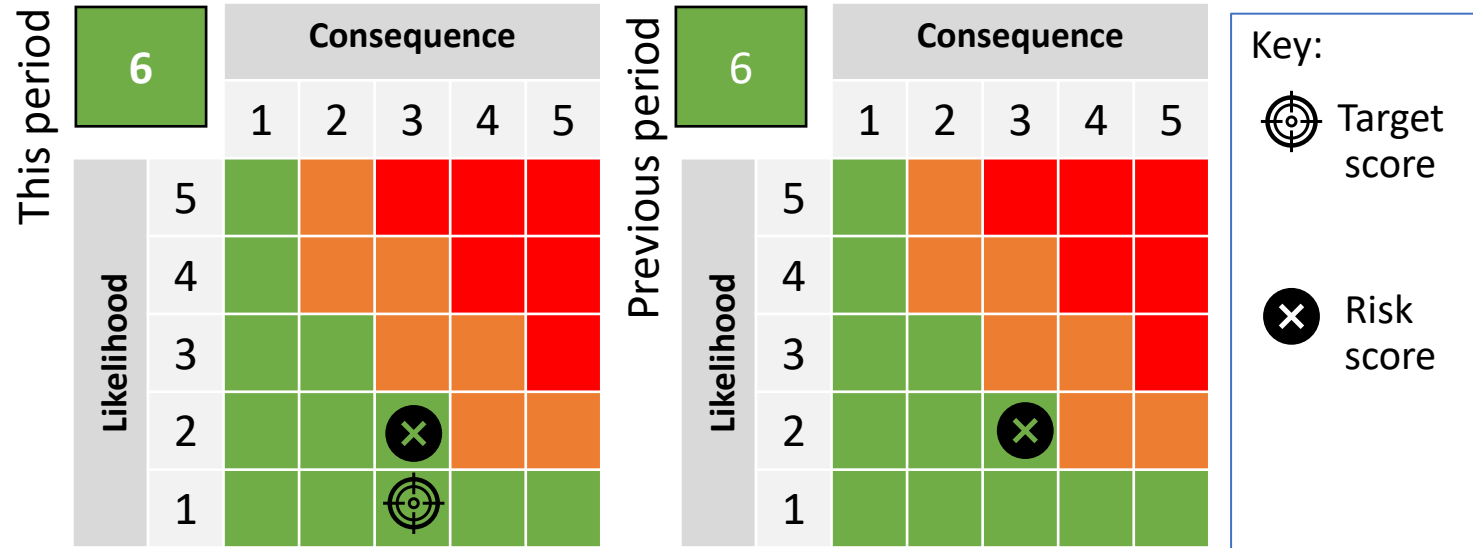
No new issues this quarter. As reported last time, a thorough review of the Council's Contract Management Framework will follow the introduction of the new ERP system.

SR 1.5 - Compliance with Public Sector Equalities Duty

Failure to be able to demonstrate due regard to the Equalities Act 2010, within council decision making.

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Key:
 Target score
 Risk score

Current controls:
 Equality Impact Assessment process
 ED&I officers recruited into HR team.
 Service User Diversity Report prepared and disseminated for learning each year.

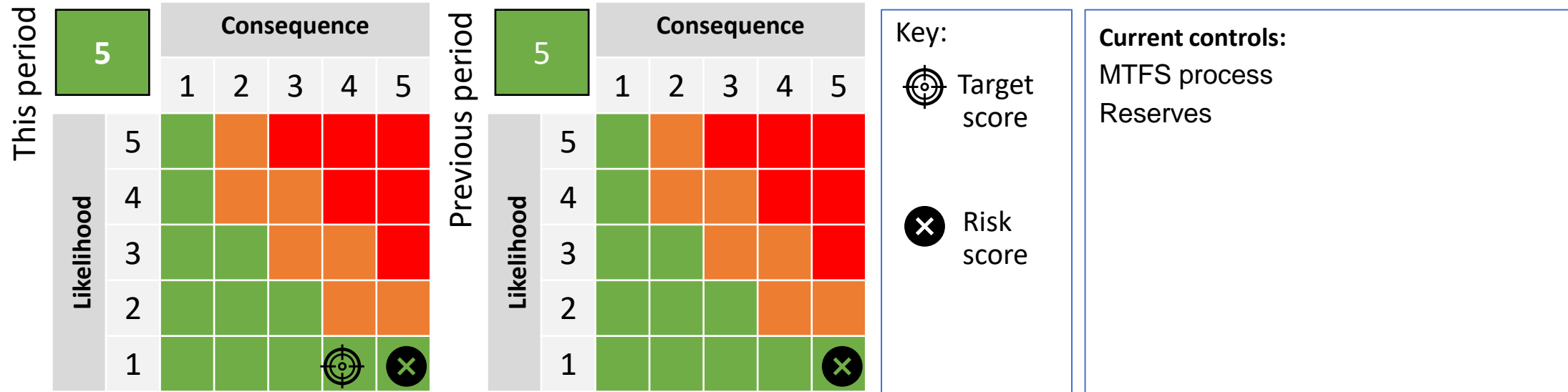
Period comments:
 We are about to roll out a revised Equality Impact Assessment form that incorporates feedback from report authors. This will be supported with training by the Constitution Institute and updated support and guidance to ensure that EqIA is being used more proactively at the inception of projects.

SR 2.4a - Reductions and changes to Funding (current year)

Reductions and changes to funding in current financial year and any additional unplanned overspend from previous financial year, with the potential to impact Core Services.

Risk Owner: Paul Blacker, Director of Finance

Cabinet Member: Cllr Lynden Stowe



Period comments:

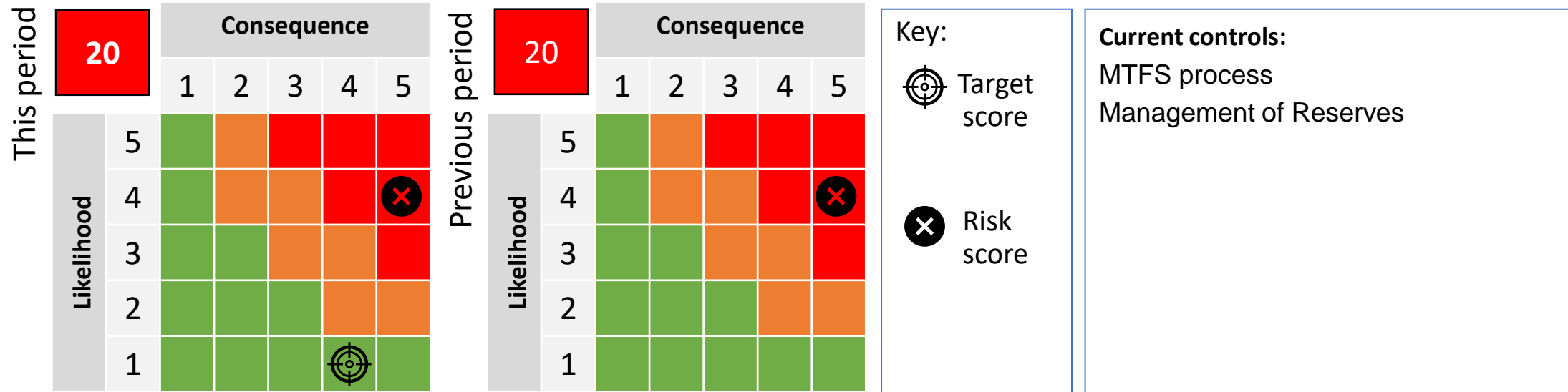
The final finance settlement announced was in line with expectations allowing the Council to set a balanced budget for 2022/23, and the outturn position for 2021/22 was an underspend, so the level of General fund balances has increased by £1.053m to £23.052 million at 31/3/22.

SR 2.4b Changes to *Future Funding*

Reductions and changes to funding for future financial years, potentially impacting, in particular, Core Services

Risk Owner: Paul Blacker, Director of Finance

Cabinet Member: Cllr Lynden Stowe



Period comments:

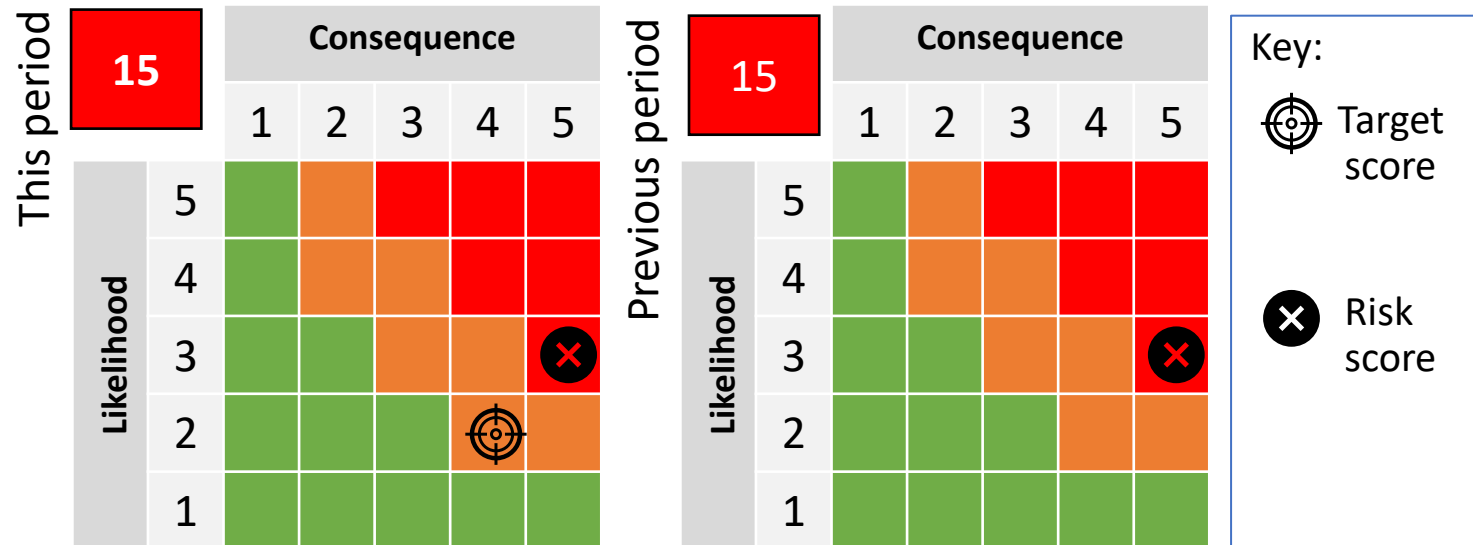
The government issued a Funding Policy Statement on 12 December 2022 which outlined the funding principles that would be applied for the next two financial years at a national level however the provisional Finance Settlement issued on 19 December only gave a detailed allocation for one financial year (2023/24). Therefore there is significant uncertainty about funding levels beyond March 2024 although the Policy Statement did give some high level funding assumptions for the following year but there is no guidance beyond then. The Fair Funding Review and the Business Rates Review could take place in 2025/26 - these two reviews could result in a significant change in funding for individual councils

SR 3.1. Failure to ensure that ICT remains fit for purpose

Failure to ensure technology managed by ICT (including communications abilities) remains fit for purpose

Risk Owner: Mandy Quayle, Director of People and Digital Services

Cabinet Member: Cllr Lynden Stowe



Current controls:

Director level ownership of the ICT Managed Service contract with Cantium (Service Review Underway)
 ICT client team staffing structure re-developed - e.g. greater engagement with all Directorates via ICT Business Relationship team, underpinned by an internal Strategy & Architecture function.
 Governance in place to ensure any ICT operational risks and issues are appropriately managed
 ICT Strategy, Service Plan and strategic roadmap in place to address ageing and legacy technological products and solutions
 Comprehensive MTFs/capital expenditure activity to address a legacy of under-investment in technology and digital solutions
 Significant project activities have been undertaken to modernise/stabilise critical infrastructure, focused on a journey to cloud technologies via improved WAN / LAN / telephony / Wi-Fi services.
 The Digital and ICT operating model is governed through a robust set of meetings including a structured Digital and ICT Senior Management Team meeting that reviews all aspects of the service delivery.

NOTE: not all council systems and/or data is hosted and supported within the technological environment managed by the ICT Service. This should be the focus of a separate corporate risk register.

Period comments:

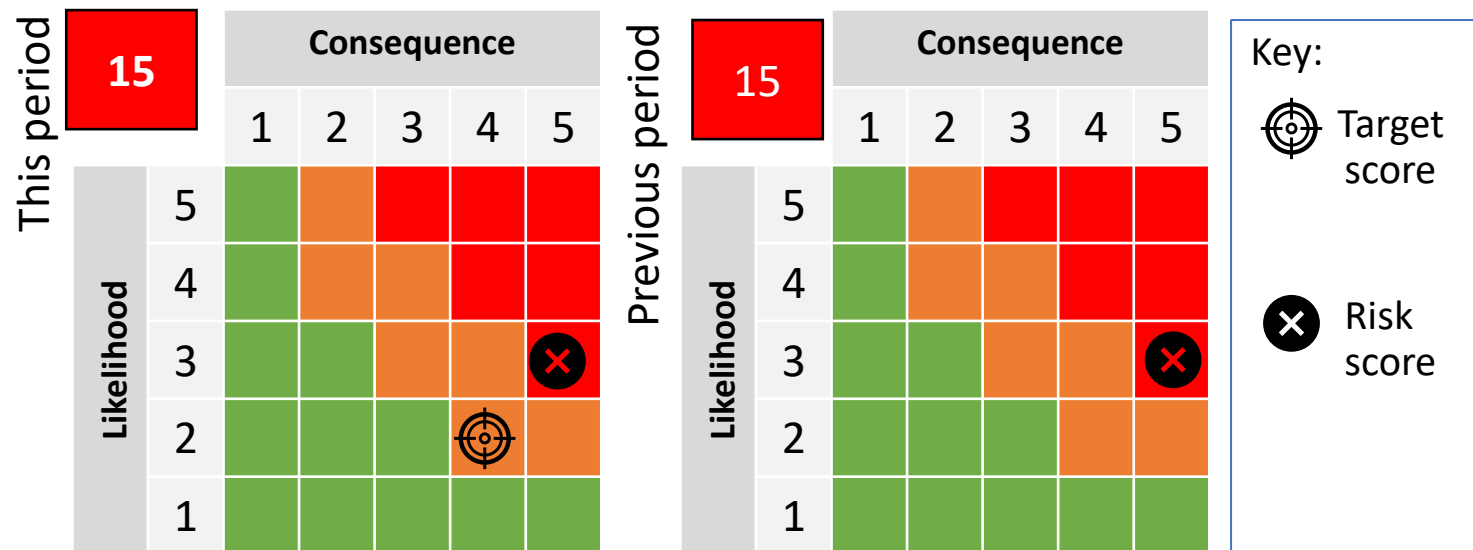
Agreed roadmap is progressing. Current review of all other applications not covered by the roadmap is underway which will identify any that are not fit for purpose and remediation plans will be developed. Laptop replacement underway to remove outdated hardware.

SR 3.2 Failure to protect the council's key information and data from Cyber Attack.

Failure to protect the council's key information and data from Cyber Attack.

Risk Owner: Mandy Quayle, Director of People and Digital Services

Cabinet Member: Cllr Lynden Stowe



Key:
 Target score
 Risk score

Current controls:
 ICT Managed Service contract with Cantium in place to provide technological controls and measures against cyber attack (and service review underway)
 ICT client team staffing structure has been re-developed to give closer working with the Information Management Service.
 Governance in place via the Information Board to ensure any technical and non-technical operational risks and issues are appropriately managed
 Cyber & Information Management (Procurement) Policy in place
 Comprehensive MTFS/capital expenditure activity to address a legacy of under-investment in technology and digital solutions
 The annual Independent IT health check has been completed and remediating any issues found in partnership with suppliers.
 Significant change activities have been undertaken to modernise/stabilise critical infrastructure, e.g. telephony, Wi-Fi, video-conferencing, etc.
 Regular communications are circulated and training provided to ensure that staff are fully aware of their responsibilities to help in the fight against cyber-crime.
 The Digital Governance Board is now established to control and manage data and information across the council
 Internal audit has a programme of cyber audits

Period comments:

Programme of cyber improvement is progressing positively with achievement of our PSN accreditation evidencing that improvement. Disaster recovery audit did raise significant concerns and agreed action plan currently being implemented. SAP DR nearing completion. The current data back up solution was implemented earlier in 2022 and has recently been independently assessed as fit for purpose. Additional proactive monitoring of our estate has been implemented. Further work ongoing to maintain accreditations.

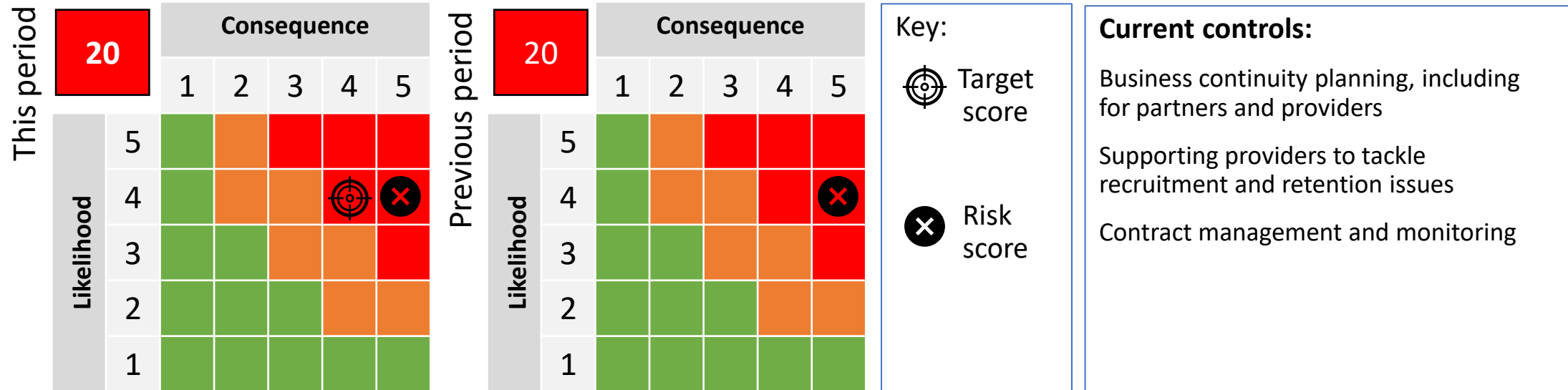
NOTE: Not all council systems and/or data is hosted & supported within the technological environment managed by the ICT Service. This should be the focus of a separate corporate risk register.

SR 5.3: Adult Social Care provider failure

Provider failures in the Adult Social Care market result in the council being unable to achieve its strategic objectives.

Risk Owner: Sarah Scott, Exec. Director of Adult Social Care

Cabinet Member: Cllr Carole Allaway-Martin



Period comments:

The independent market continues to be in a state of uncertainty due to the continuing impact of the pandemic and the current economic tensions in relation to costs for staff, utilities, food and fuel.

There continues to be improvement in the home care sector with a continued upward trajectory in terms of delivery of home care hours with the same number of staff, as a result of the introduction of hyper local commissioning of home care. We continue to work with the sector to improve recruitment and retention of the adult social care workforce and to try and balance supply of staff with the need for home care across the county.

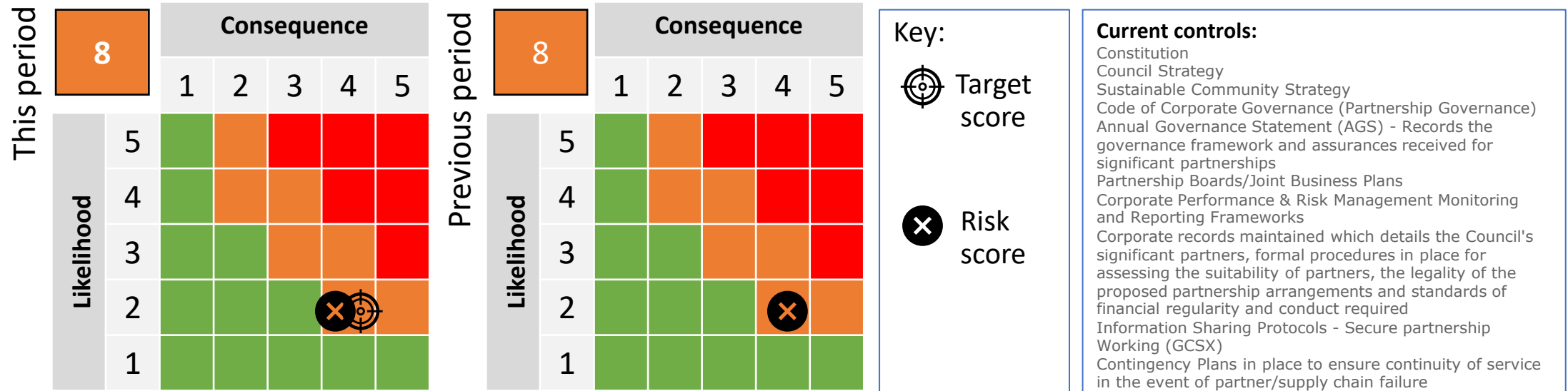
Care homes are still holding high levels of vacancies and coupled with increased costs, the risk of homes becoming unviable/unsustainable remains high. Work on changing the model for hospital discharge so more of the market can benefit from the short-term funding is underway.

SR 6.1 – Relationships with key partners

Failure to maintain effective relationships with key partners and organisations and shared funding arrangements, impacting on our ability to meet statutory and local requirements.

Risk Owner: Pete Bungard, Chief Executive

Cabinet Member: Cllr Lynden Stowe



Period comments:

We have seen highly effective and very positive working relationships with partners and organisations to meet statutory and local requirements both in terms of living with Covid and delivering the Homes for Ukraine scheme. The LRF, other emergency management functions and business continuity arrangements remain as good foundations across the partner scene.

Leadership Gloucestershire meetings, Leader's Stocktake meetings and regular MP briefings with Health, continue at appropriate frequency.

Statutory meetings are face-to-face for both Members and Officers and hybrid meeting arrangements are working well for those meetings which have no statutory decision-making responsibility. We will continue with hybrid working arrangements in the future in keeping with the needs of the business.

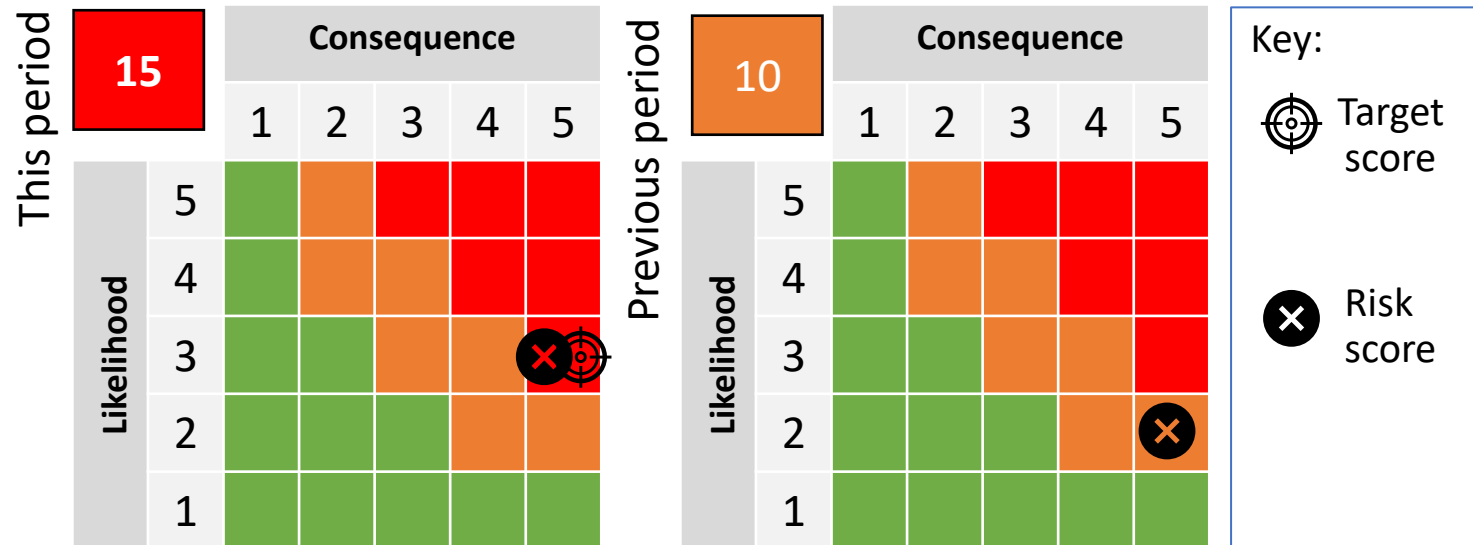
We continue with extensive external consultancy work looking at our NHS relationship, focussed on emergency and urgent care, and as the country finds itself continuing to deal with a "cost of living" crisis we will work with partners and local organisations to deliver whatever help we can to Gloucestershire residents.

SR 7.1: Failure to protect vulnerable adults in Gloucestershire

Failure to protect vulnerable adults in Gloucestershire from abuse neglect in situations that potentially could have been predicted and prevented.

Risk Owner: Sarah Scott, Exec. Director of Adult Social Care

Cabinet Member: Cllr Stephen Fifield



Current controls:

Board and governance controls:

1. GSAB in place since 2009 with an Independent Chair and membership of 29 including statutory partners, District Councils and voluntary sector organisations
2. GSAB reports to Health & Wellbeing Board and the Adult Social Care and Communities Scrutiny Committee
3. GSAB risk register and strategic plan in place and updated quarterly

Policy and partnership controls:

1. Countywide Multi Agency Adult Safeguarding Policy and Procedures in place and implemented across all partner agencies
2. GSAB sub groups chaired by representatives from partner agencies. Learning from audit and SAR subgroups disseminated
3. Constitution, Memorandum of Understanding & Register of GSAB Member Interests in place
4. GSAB partners undertake an annual self-assessment which is peer-reviewed

Quality Assurance, Performance and Inspection controls:

1. Statutory Safeguarding Adults and deprivation of Liberty Safeguards returns completed and returned annually to NHS Digital
2. CQC, Commissioning and Safeguarding Adults GSAB group is well-established and updates quarterly.
3. The multi agency Audit sub group of GSAB meets quarterly to audit Section 42 enquiry work.
4. Escalation policy in place to challenge decisions

Communications controls:

1. GSAB website in place and regularly updated
2. Learning from Safeguarding Adult reviews disseminated to all multi agency partners
3. Multi agency safeguarding adults training embedded and available to all multi agency partners.
4. Ongoing development of relevant information materials for the public

Period comments:

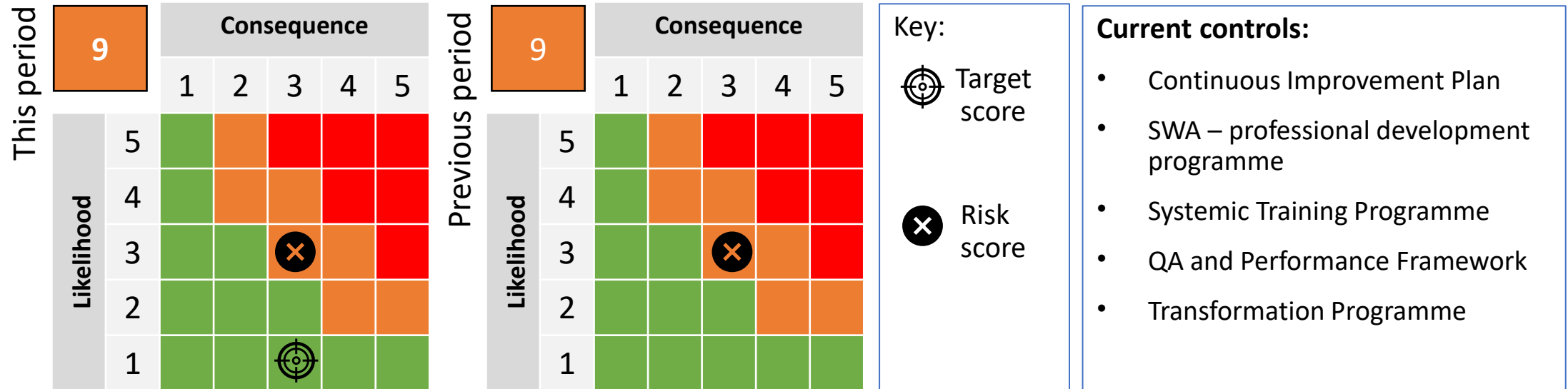
March 23: Inhouse Recruitment & retention Policy developed and in use. External Market Workforce retention campaigns through Proud to Care, plan to reinvigorate Proud to Learn capabilities. Recruitment campaign completed in Forest. Gloucester recruitment campaign planned next period. The safeguarding adults team continues to manage the numbers of referrals by periodically carrying out focused work to reduce the numbers of cases awaiting a decision; this is maintaining the numbers of cases on the referral centre at an acceptable level. The safeguarding single point of access team is set up and will commence later this year. From this date the safeguarding team will screen all safeguarding concerns raised in Gloucestershire. The Safeguarding Adults Board continues with the Safeguarding Adults Review into the death of MM. Any learning from the review will be disseminated across the multi agency partnership. The annual safeguarding adults roadshow will be held in April. This year, the focus is on members of the public, with the aim of raising awareness about adult safeguarding and events will be held at various locations across the county.

SR 7.2 Ineffective Social Care Practice

Ineffective social care practice, management oversight and review processes resulting in drift and delay for children and young people in situations of harm.

Risk Owner: Ann James, Exec. Director of Children's Services

Cabinet Member: Cllr Stephen Davies



Period comments:

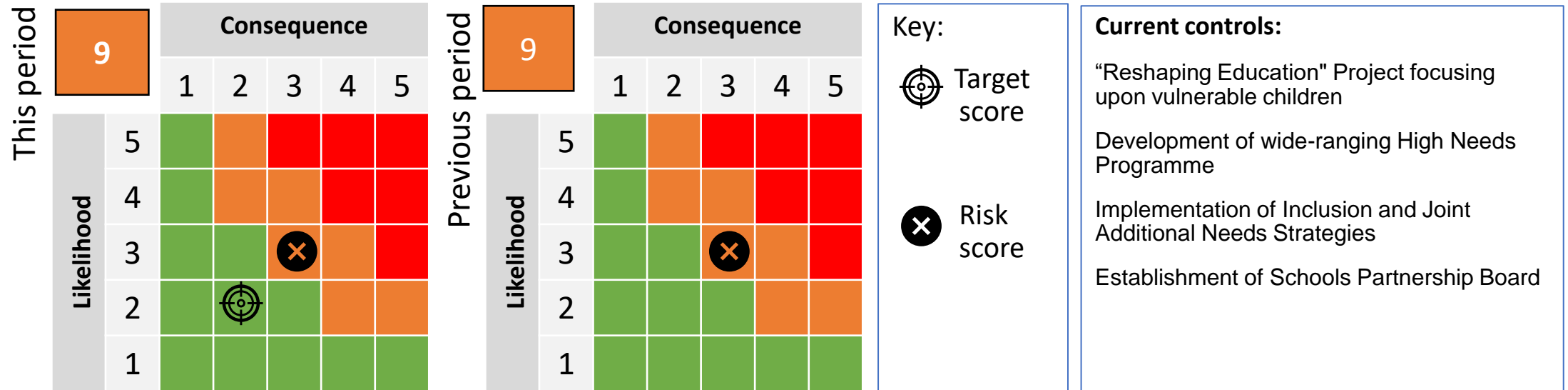
The Continuous Improvement Plan continues to provide the focal point for improvement activity. Operating conditions continue to be challenging - reflected in our performance which is a mix of stability, improvement and regression. Turnover and vacancies are marginally improved however agency % remain above target.

SR 7.4: Failure to Close the gap in Educational Outcomes

The ability to meet statutory timelines for EHCP assessments, plan issue and annual amendments and the associated budgetary commitments, affecting the educational outcomes of vulnerable children, is at risk: financially, legally and reputationally through ever-increasing EHCP requests, workforce capacity to process these requests and the implications for the outcomes of future local area SEND inspections.

Risk Owner: Kirsten Harrison, Director of Education

Cabinet Member: Cllr Philip Robinson



Period comments:

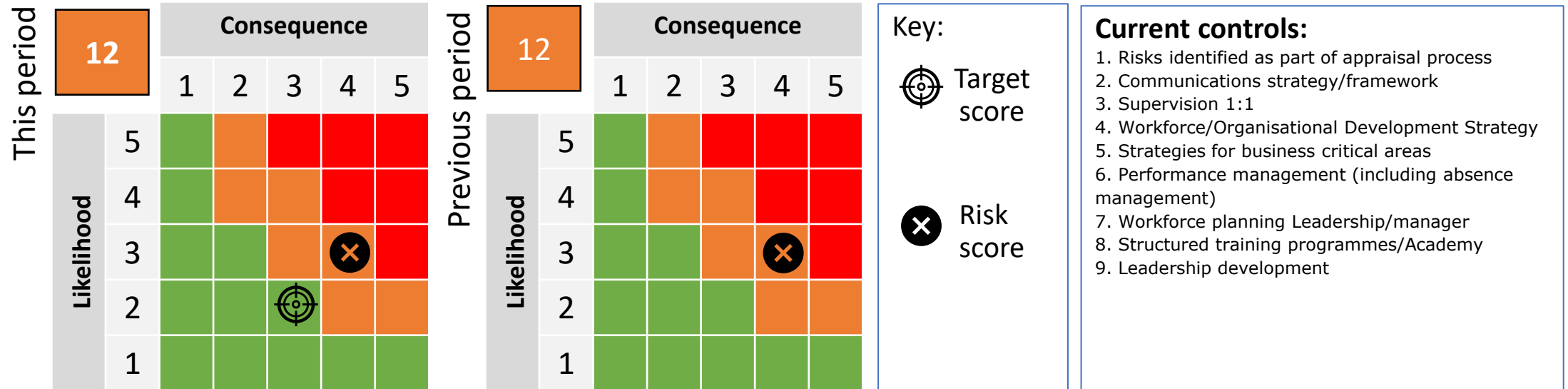
23-24 MTFS investment will enable the Education Psychology Service model to be pivoted towards early intervention and equity in the system and the EHCP caseworker caseloads to be reduced with increased capacity. In addition the EHCP service is being restructured to improve efficiencies in development of EHCPs which will also target quality and timeliness. Whilst the increased work volumes and system pressures remain, required service operation changes are now resourced and in train. The work of the SEND Local Area partnership under the SILAP board is now gaining traction, and partnership working and contributions to SEND service delivery are more positive in prospect, which will, over time, improve timeliness and quality.

SR 7.5: Insufficient workforce capacity in Children's Services

Insufficient workforce capacity and/or instability adversely impacting on pace and sustainability of improvement and contributing to discontinuity in social engagement with children and families

Risk Owner: Ann James, Exec. Director of Children's Services

Cabinet Member: Cllr Stephen Davies



Period comments:

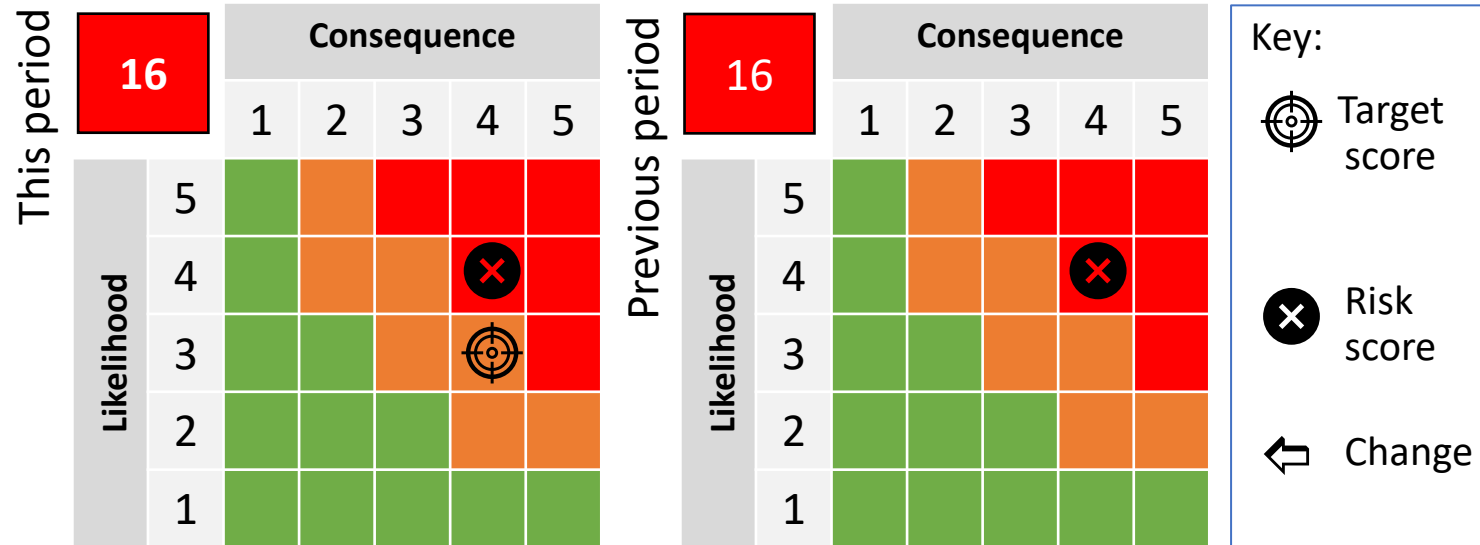
Workforce stability and capacity continue to be challenging. Turnover and vacancies show some improvement but agency % remains high. Recent recruitment has helped us to increase the % of workforce at target caseloads.

SR 7.6: Unable to support all those who can, to live independently at home

Unable to support all those who can, to live independently at home, because demand for home care services outstrips available capacity. Resulting in the reliance on temporary respite/alternative bed based care in lieu of home care

Risk Owner: Sarah Scott, Exec. Director of Adult Social Care

Cabinet Member: Cllr Stephen Fifield



Current controls:

Integrated Brokerage: Last September we centralised the brokerage of respite/bed based care (into our enhanced brokerage team) provision for people who are waiting for a care package to enable them to stay in their own home. This has enabled us to respond quicker, with less people being unnecessarily delayed in leaving hospital.

Shift in commissioning approach : One of the impacts of a shortage in the supply of Home Care Services has been the use of out of county providers, which brings disadvantages such as higher costs & care workers travelling greater distances to see clients. We introduced 'guaranteed hours' to support local providers, and are focussed on encouraging more care workers to work in the Gloucestershire Home Care sector. Alongside this we have enabled Hospices (who provide end of life care) to work with Home Care providers, for example offering a 'hospice at home' package and upskilling home care workers in end of life care

Period comments:

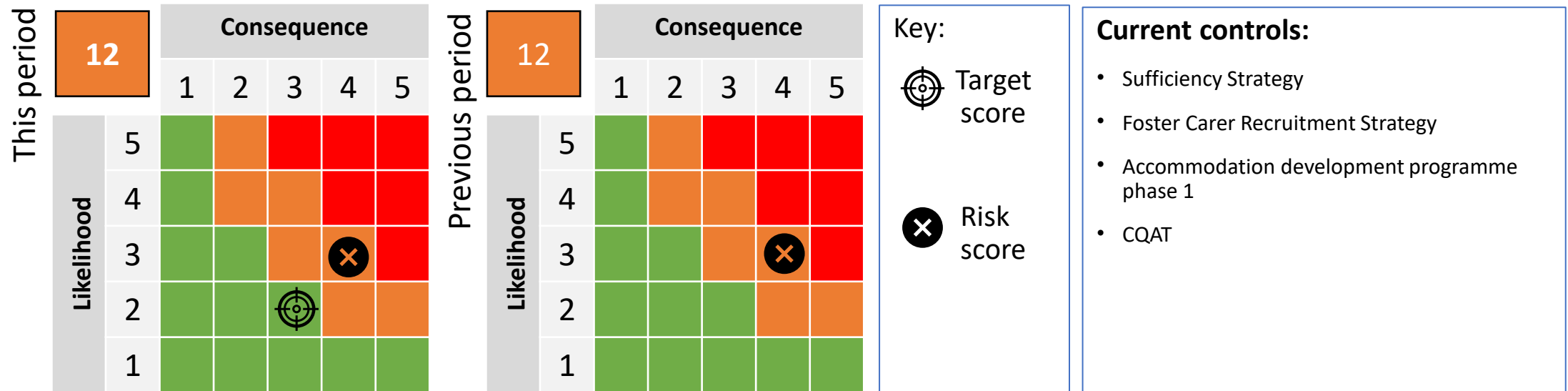
GHC have promised up to 55 starts by 1.11.23, dependent on support from the system on flow and re-ablmt. Home First starts have increased 14% since beginning of Dec '22. Aiming for 40% steady state asap. The situation continues to be difficult but work on the localising of home care is increasing the available capacity. The risk is more in the ability to manage the change to localised working as the process for managing bought capacity is dependent on staff. We are working with the Performance team on ways to automate the process but are reliant on support from ICT to implement this. This at a time when there are numerous calls on their time for multiple change projects. No change in risk.

SR 7.7: Failure to develop sufficient placement capacity

Failure to develop sufficient placement capacity to meet the needs of looked after children

Risk Owner: Ann James, Exec. Director of Children's Services

Cabinet Member: Cllr Stephen Davies



Period comments:

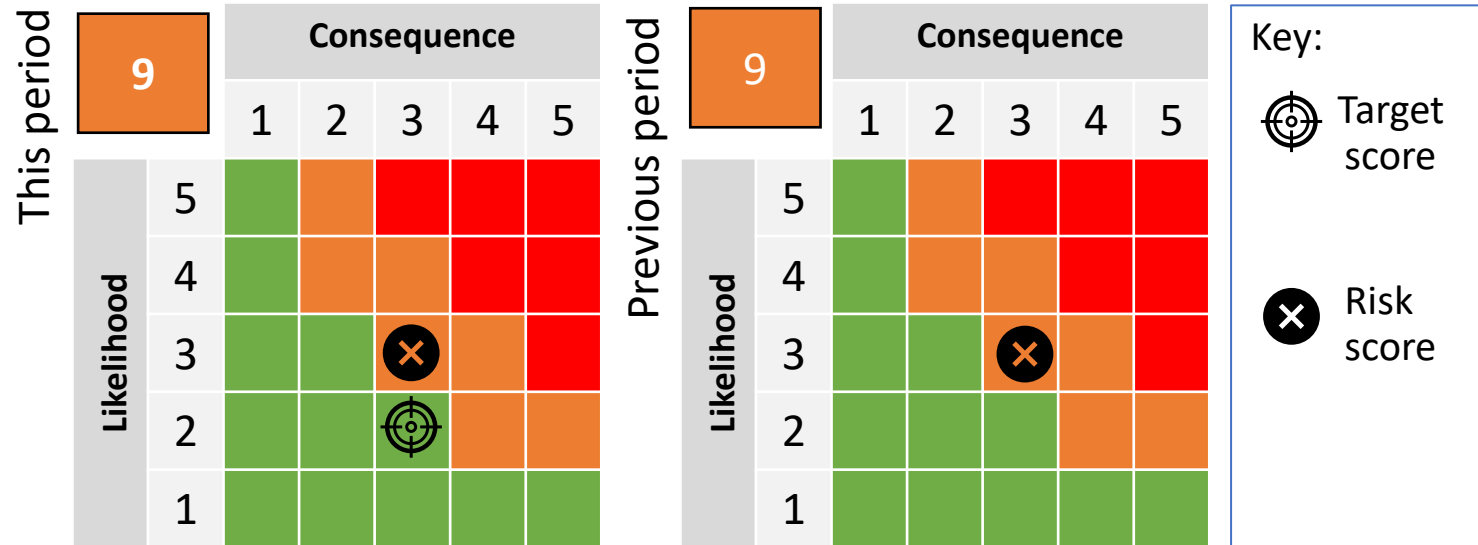
We have revised our Sufficiency Strategy and begun to progress the first tranche of new accommodation sites with the support of DfE funding. Our work is continuing to increase in house foster carer capacity.

SR 7.8: Risk of legal action being taken due to failures in completing Deprivation of Liberty assessments.

Risk of legal action being taken against the Local Authority due to failure to complete a Deprivation of Liberty assessment within the stated time lines. Since a significant and sudden change in the law due to a Supreme Court Judgement in March 2014 there is an excessively high demand for best interest assessments to be carried out for Deprivation of Liberty (DoLS) authorisations.

Risk Owner: Sarah Scott, Exec. Director of Adult Social Care

Cabinet Member: Cllr Stephen Fifield



Key:

- Target score
- Risk score

Current controls:

The DoLS team continues to triage applications in line with the ADASS guidance to ensure the most urgent cases are assessed and those people have the appropriate authorisations in place. The project group for the DoLS replacement (Liberty Protection Safeguards) is meeting again and plans are being made for the changes to the legislation which will mean that the authorisation process will move from the central DoLS team to frontline ASC teams. Implementation of this change is not anticipated until 2024 and there has been no further update from the DHSC on plans to publish the final Code of Practice

Period comments:

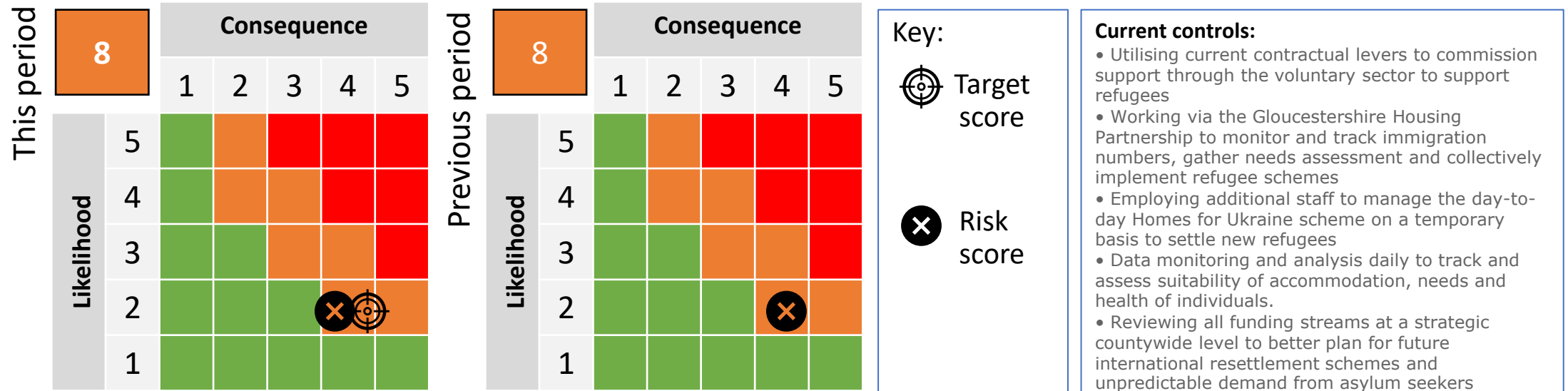
No change to controls/enablers this quarter: The DoLS team continues to triage applications in line with the ADASS guidance to ensure the most urgent cases are assessed and those people have the appropriate authorisations in place. The project group for the DoLS replacement (Liberty Protection Safeguards) continues to meet and plans are being made for the changes to the legislation which may mean that the authorisation process will move from the central DoLS team to frontline ASC teams. Timeframes for the Implementation of this change have not been forthcoming from government and there has been no further update from the DHSC on plans to publish the final Code of Practice

SR 7.9 – Insufficient planning and oversight of international resettlement and asylum immigration

Insufficient planning and oversight of international resettlement and asylum immigration including current Ukraine, Afghan, Syrian and Hong Kong programmes, alongside other asylum seeker routes including hotel accommodation, could lead to unpredictable and unsupportable demand on county council services.

Risk Owner: Siobhan Farmer, Director of Public Health

Cabinet Member: Cllr Mark Hawthorne



Period comments:

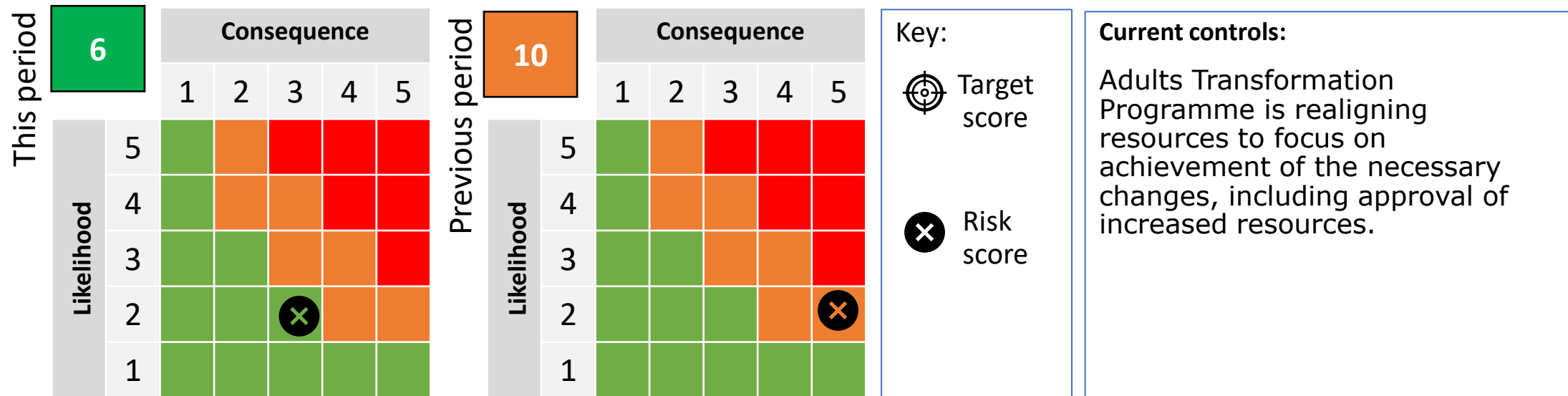
Success continues to be good across all schemes. Now that the Gloucestershire Strategic Migration Partnership has been launched, there is a structure for improved coordination and communication. GSMP has oversight of planning, migration issues and partnership working across the system. The partnership is addressing issues and ensuring sufficient awareness by government departments of any issues or emerging demands. Staff are in place in the GCC HFU team and contracts have been extended, district and county working relationships, communication and partnerships are strong. Funding for Homes for Ukraine scheme is significant and has been extended for a further year, and reserves for other schemes are available. Current work and forward planning continues to secure accommodation and support transition for Ukrainians, although this remains likely the biggest residual risk.

SR 7.10: Implementation of the 'Care Cap' cost of care exercise

Implementation of the 'Care Cap' cost of care exercise (section 18.3 of the Care Act) leads to significant resource pressures and overspend

Risk Owner: Sarah Scott, Exec. Director of Adult Social Care

Cabinet Member: Cllr Carole Allaway-Martin



Period comments:

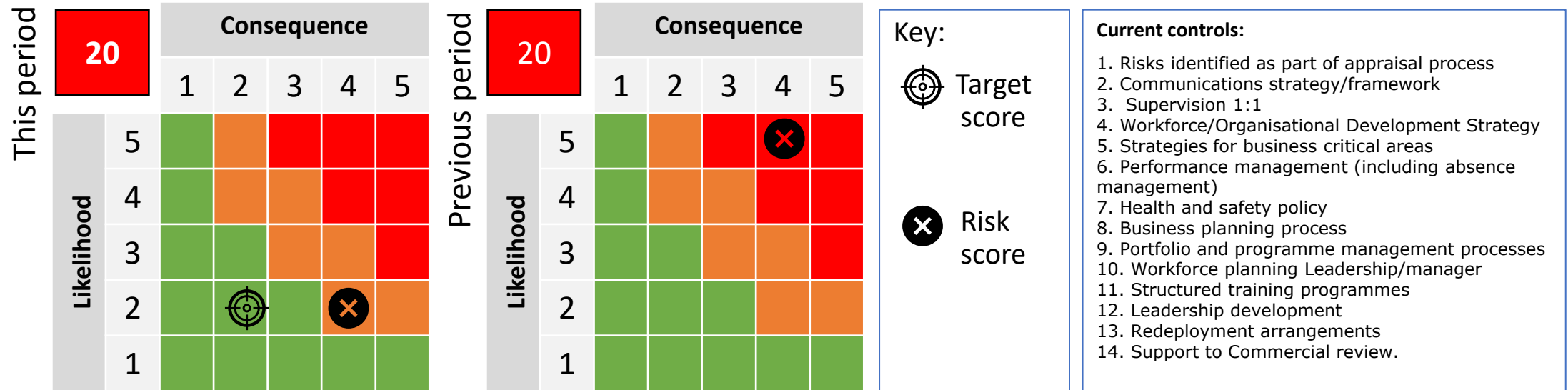
National implementation of the 'Care Cap' has been moved from October 2023 to 2025 following the Chancellors autumn statement. The extra time provided by this decision mitigates some of the resource pressures and overspend by allowing a longer timeframe for planning and delivery. GCC's Charging Policy will be reviewed in 2023. Opportunity to include changes to future proof the policy depending on future direction of Government policy in relation to the Care Cap.

SR 8.1 Difficulties in Recruiting and Retaining Experienced workers

Difficulties in recruiting and retaining experienced workers in hard to fill roles leading to vacancies and/or high numbers of agency staff in some areas. This is particularly prevalent for social workers but is also increasingly a factor for other professional roles.

Risk Owner: Mandy Quayle, Director of People and Digital Services

Cabinet Member: Cllr Lynden Stowe



Period comments:

National and regional labour markets remain extremely tight with full employment reported against all or most salary levels. Competition for highly qualified and specialist staff is particularly fierce and the Council continues to make available a range of market related additional reward payments. The removal of the bottom point of the national pay spine should help at the lowest pay levels but recruitment and retention will remain high priority areas for the foreseeable future. We are introducing an employer brand to promote the council in the market place in a more favourable way together with greater use of social media to target and attract candidates.

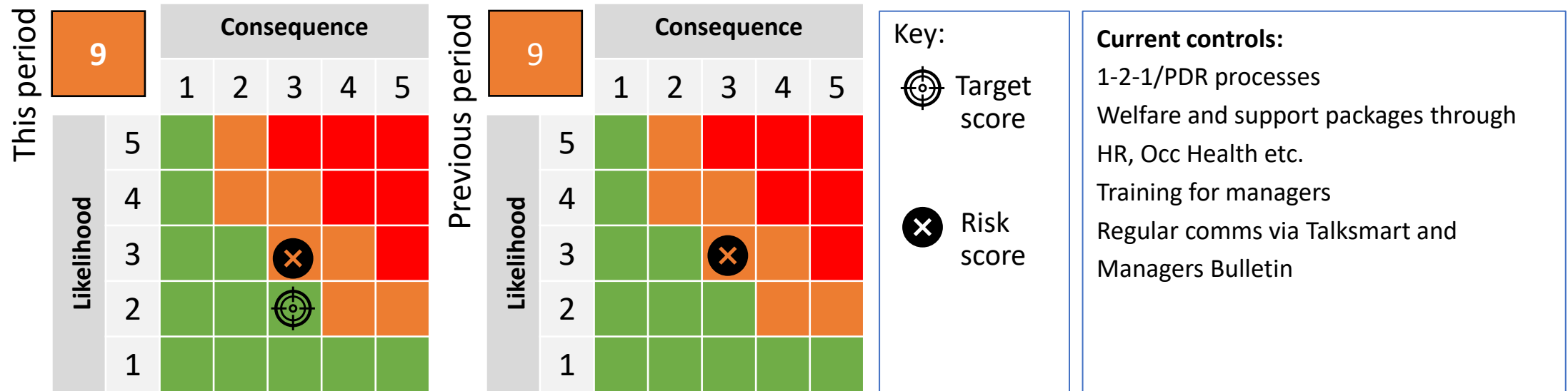
National and regional labour markets remain extremely tight with full employment reported against all or most salary levels. Competition for highly qualified and specialist staff is particularly fierce and the Council continues to make available a range of market related additional reward payments. The removal of the bottom point of the national pay spine should help at the lowest pay levels but recruitment and retention will remain high priority areas for the foreseeable future. We are introducing an employer brand to promote the council in the market place in a more favourable way together with greater use of social media to target and attract candidates.

SR 8.2 - Staff fatigue and burnout

Failure to ensure identification and understanding of staff fatigue and 'burnout' issues, resulting in impact on staff morale and well-being, service delivery, and staff retention.

Risk Owner: Mandy Quayle, Director of People and Digital Services

Cabinet Member: Cllr Lynden Stowe



Period comments:

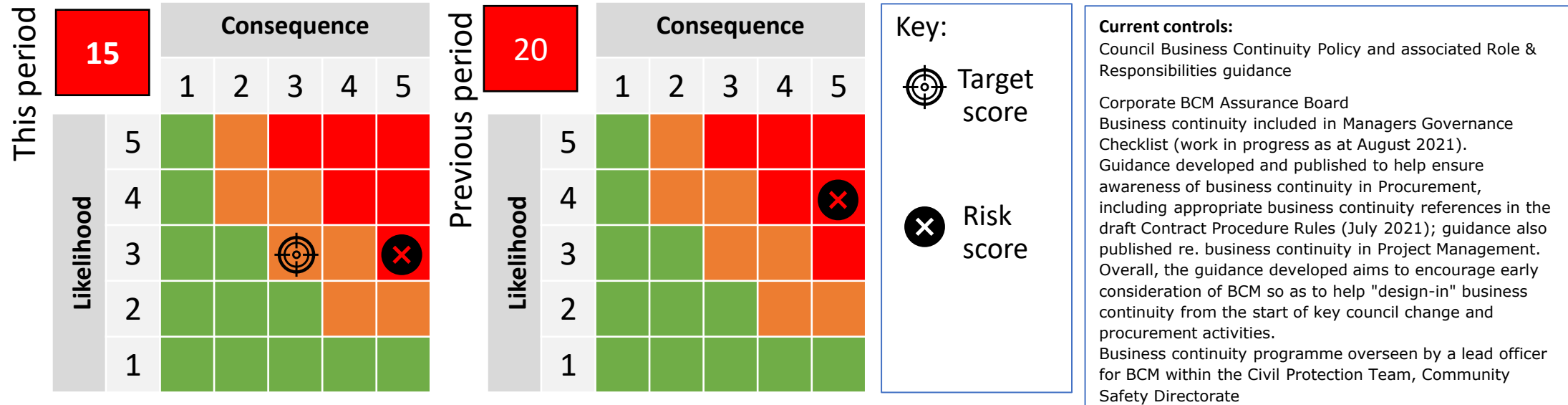
There are no significant new issues arising. The focus on wellbeing continues as well as support and training for managers to enable staff to prioritise, balancing service need and performance with appropriate work like balance.

SR 10.4: Insufficient Business Continuity Management

Due to insufficient business continuity management arrangements failure of the Council or a key partner to effectively deliver their statutory services, resulting in community disruption and failure of corporate objectives.

Risk Owner: Mark Preece, Chief Fire Officer

Cabinet Member: Cllr Dave Norman



Current controls:
 Council Business Continuity Policy and associated Role & Responsibilities guidance
 Corporate BCM Assurance Board
 Business continuity included in Managers Governance Checklist (work in progress as at August 2021).
 Guidance developed and published to help ensure awareness of business continuity in Procurement, including appropriate business continuity references in the draft Contract Procedure Rules (July 2021); guidance also published re. business continuity in Project Management.
 Overall, the guidance developed aims to encourage early consideration of BCM so as to help "design-in" business continuity from the start of key council change and procurement activities.
 Business continuity programme overseen by a lead officer for BCM within the Civil Protection Team, Community Safety Directorate

Period comments.

The overall assessment for the business continuity risk this quarter has improved since the previous quarter – impact unchanged / steady (5 - Critical) but reduced likelihood (3 - Possible). This is because:-
 1. Despite the additional time allotted by CLT for completion of the BCM programme of work (an additional six months through to the end of December 2022), the work required has not been completed by many business continuity plan (BCP) owners across the council. **The end Q4 position is provided below and shows an improvement over the previous quarter.** However, because of the delays in completing BCPs, minimal BCP exercising has been undertaken meaning few plans have been validated. There is also a continuing trend of plans having been written but then not being kept up-to-date by plan owners.

% up-to-date	BIAs	BCPs
Last quarter: end Q3 2022-2023	66%	53%
This quarter: end Q4 2022-2023	71%	66%

CLT clearly had an appetite to accept this risk as having a '4 - Major' impact until end December 2022, that appetite has now been breached because we are not where we should have been on BCM by the project deadline.

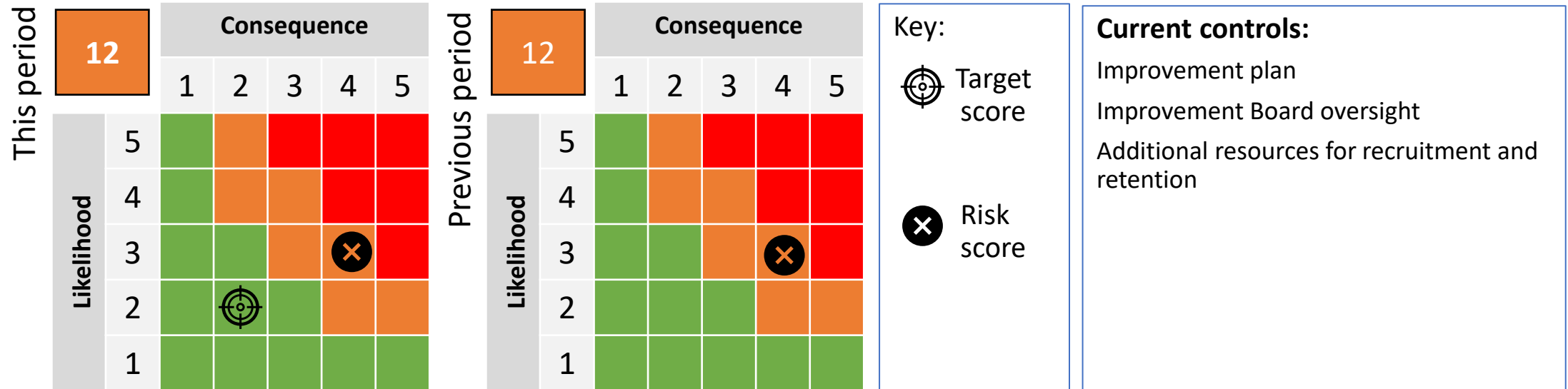
2. As we move into the warmer months of Spring there is a reduced likelihood of disruptive incidents taking place e.g. reduced threat of disconnection of electricity supplies in the UK given the potential for gas-fired generation capability being insufficient over winter. Additionally, the threat of industrial action at GFRS has also reduced, with a national settlement having been reached with the Fire Brigades Union.

SR 10.6: Capacity and capability to deliver Fire Service improvement

Insufficient workforce capacity and capability adversely impacting the pace and sustainability of improvement that will potentially contribute to an increased risk to firefighter safety, failure to meet our statutory obligations and/ or capability to deliver emergency services to the community.

Risk Owner: Mark Preece, Chief Fire Officer

Cabinet Member: Cllr Dave Norman



Period comments:

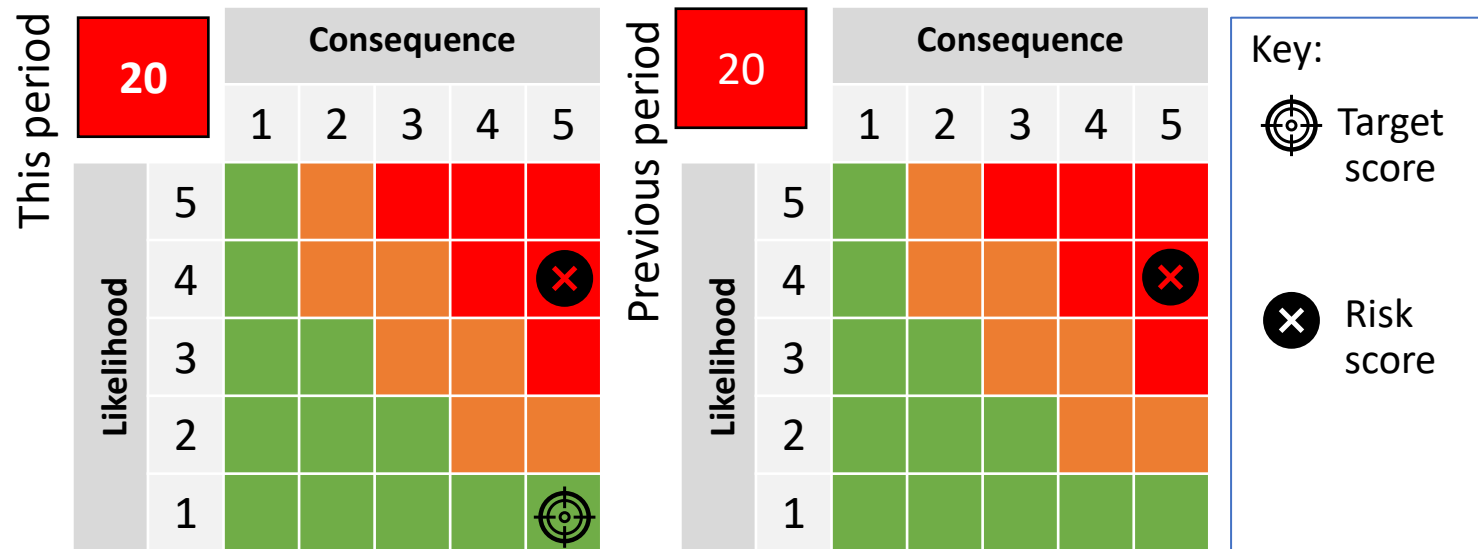
Recruitment and selection process have taken place to fill substantive posts for Deputy Chief fire officer. Operational Staff posts have largely been filled, and we are starting to see more success in filling Support Staff posts. However, we are expecting further retirements and leavers in the next quarter leading to no improvement in the current risk rating. Additional funding is providing the finance needed for additional resource and training. Nevertheless, turnover of staff adds to ongoing work pressures and the creation of short term gaps in teams. We aim to support staff through continuation of recruitment, personal appraisals and training such as a refresh in managing absence.

SR 10.8 - Dept for Transport's Covid Bus Recovery Subsidy (BRS) is withdrawn (new risk transferred from Gold register)

Community isolation, operational and financial impacts through the withdrawal of the Government's Bus Recovery Subsidy (BRS) prior to passenger levels returning to pre-covid levels; and the reduction/withdrawal of specific bus services by the existing contractor and difficulties in the market with attracting alternative contractors. Additional GCC financial support has been provided to protect passenger routes in response to the sharp fall in revenue caused by Government advice initially to avoid passenger transport & subsequent customer confidence of using the services during the pandemic.

Risk Owner: Colin Chick, Exec. Director of Economy, Environment and Infrastructure

Cabinet Member: Cllr Phillip Robinson



Current controls:

- 1) Integrated Transport Unit will develop a post-pandemic 'bus service strategy' to outline what actions will be required should the DfT's Covid bus service revenue support grant be withdrawn
- 2) Work with bus operators to explore the formation of 'recovery partnerships' to stabilise the bus network after the DfT's Covid Bus Service Support Grant ends and new networks emerge in response to changes in passenger demand
- 3) Lead Cabinet Members informed on status of existing contracts
- 4) Delay re-procurement of high value bus service contracts
- 5) Bus Service improvement plan in progress.
- 6) The county council has joined other local authorities in asking central government to not withdraw the grant - awaiting government response.
- 7) Support grant was to be in place until October 2022.
- 8) Underspend on concessionary fares is being redirected to provide a package of interim support until April 2023.
- 9) Support grant has been extended until June 2023, but funding beyond this will be directed to areas of the country that need it most.
- 10) Significant risk raised with Cabinet Members and MPs.
- 11) Savings have been reinvested to provide an 8% inflationary uplift to contracted providers.

Period comments:

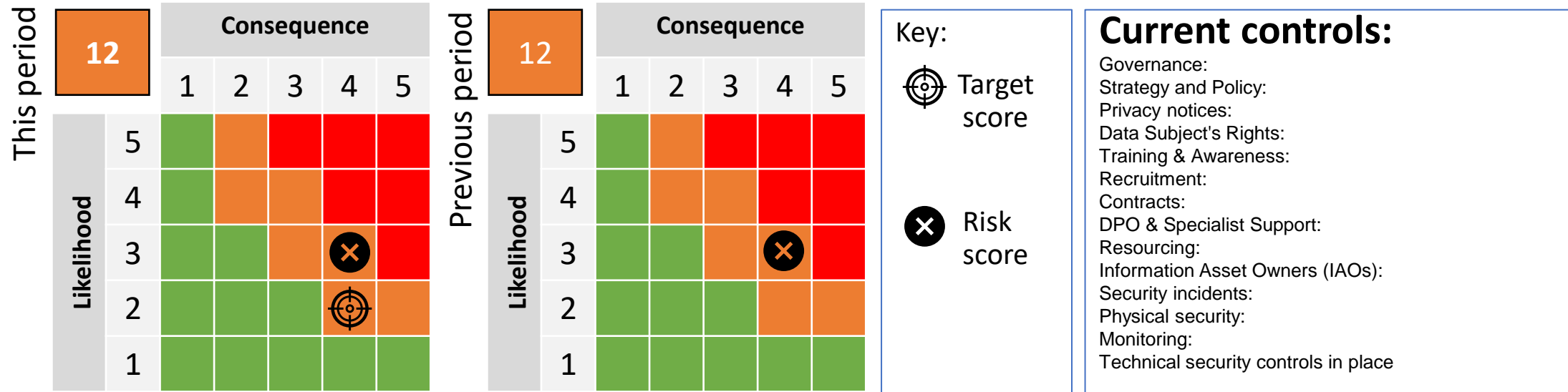
This scheme has had a further 3 month extension and now runs to 30 June 2023. Further extension is possible but not confirmed at this stage. The long term impact on viability of bus services remains, although no short term risk of lost services.

SR 11.1 Failure to protect the confidentiality, integrity and availability of information.

Failure to comply with data protection and to protect the confidentiality, integrity and availability of information.

Risk Owner: Rob Ayliffe, Director of Policy, Performance & Governance

Cabinet Member: Cllr Lynden Stowe



Period comments:

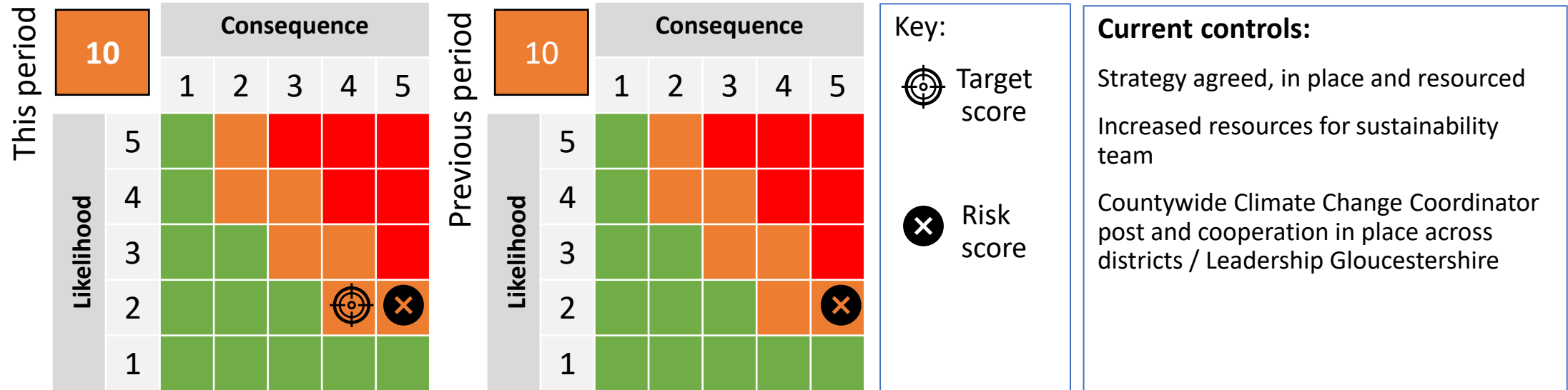
We continue to monitor all security breaches, however minor, but the number reaching the threshold for reporting to the ICO remains very, very low. Nevertheless, the migration of data to M365 has the potential to increase the security of the council's data, but also carries some risks as users get used to the new technology and the need to set appropriate access permissions. The migration project is being used to identify instances where existing permissions are out of date or inadequate and to remediate those issues. Training is also being rolled out to all site owners to ensure they understand what they need to do to keep data secure in the new environment.

SR 12.1: Failure of GCC/Gloucestershire to mitigate and adapt to a more volatile climate

Failure to deliver the county council’s climate change strategy, impacting our ability to deliver our organisation, partnership, and community activities, and to secure Government funding, and therefore limiting our ability to mitigate the impacts of a changing climate on Gloucestershire’s natural environment, communities, business and visitors.

Risk Owner: Colin Chick, Exec. Director of Economy, Environment and Infrastructure

Cabinet Member: Cllr David Gray



Period Comments:

Year to date carbon emissions to quarter 3 (reported a quarter in arrears) remain ahead of target.

Biodiversity Officer appointed in January supporting delivery of new Local Nature Recovery Strategy and progressing a number of biodiversity projects including wild flower planting with Highways. Excellent tree planting season completed Mar 23 with over 100,000 trees planted across the county. Currently recruiting for two Defra funded posts to support tree planting, 2-year fixed.

Interim Manager appointed to kick-start energy/buildings decarbonisation projects using Salix loan. This funding had been at risk due to lack of progress by GCC.

£100k provided to a Climate Leadership Gloucestershire joint fund to support an increase in coordination capacity and joint projects including a climate risk and adaptation study.

A review and prioritisation exercise of the CLG themes is underway.

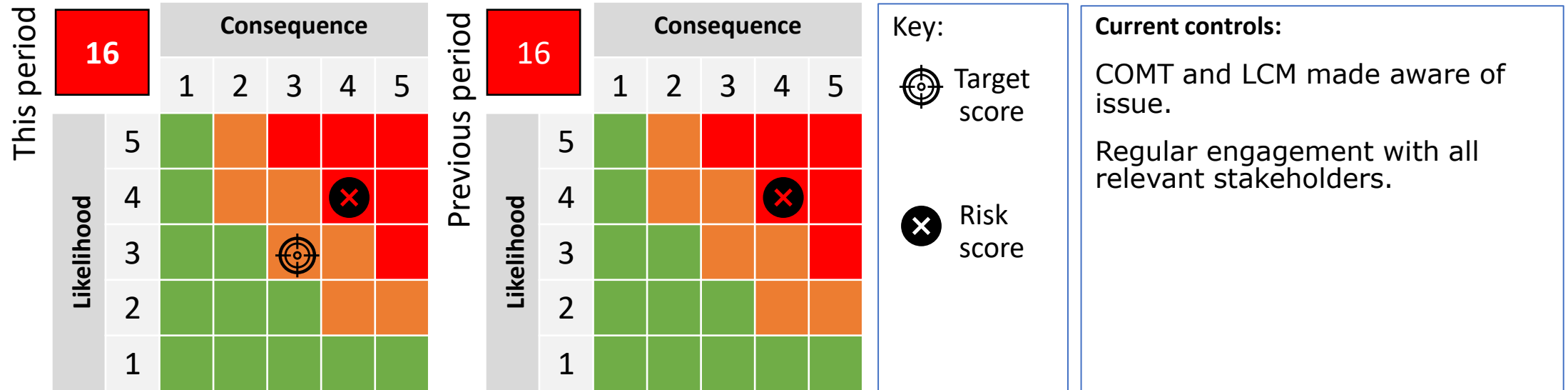
Environment& Waste restructure ongoing. A vacancy and extended sickness absence are affecting current capacity and progress

SR 14.1 Implementation of the Community Infrastructure Levy

The implementation of Community Infrastructure Levy (CIL) in Gloucestershire has resulted in a decrease in the County Council’s developer contributions receipts. This has placed significant additional pressures on the relevant County Council’s budgets, such as education, transport and highways.

Risk Owner: Colin Chick, Exec. Director of Economy, Environment and Infrastructure

Cabinet Member: Cllr David Gray



Current controls:

COMT and LCM made aware of issue.
 Regular engagement with all relevant stakeholders.

Period comments:

This risk continues. There are ongoing discussions with all 6 District Councils.