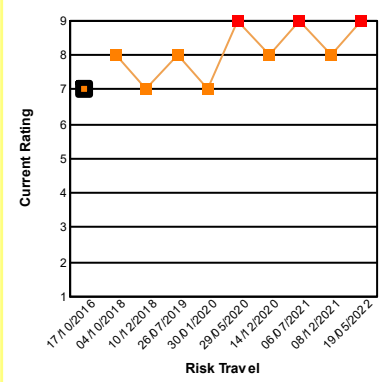


Appendix B - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
Risks to MTFS delivery due to pressures in Children's Services, Social Care Reforms and inflationary pressures	SMBCC0133	Paul Johnson	06/01/2011	24/08/2022	24/09/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level		
- Significant demand in Children's services - Increased cost of statutory home to school transport provision - JTAI (joint targeted area inspection) of Children's Services leading to improvement plan - Adult Social care reforms - High Inflation Levels	- Council may not be able to deliver all its priorities. - Reductions in services - The Council may not be able to pursue investment opportunities.	Red	<ul style="list-style-type: none"> • Children's and Adult's reserves in place • Strict monitoring of Budget Delivery by CLT • Budget Strategy Reserve • Business Rates Windfall • Regular lobbying of government for further funding • Children's Services Funding Plan to be presented to Children's Scrutiny in September 2022 ,RDV Scrutiny and Cabinet in October • Through Cross-Party Budget Strategy Group, new MTFS process 23/24 –25/26 to identify actions needed to achieve a balanced budget 	In Place		Red	New Record	17/10/2016	7
		9		In Place		9	Profile Change	04/10/2018	8
				In Place		Likelihood	Profile Change	10/12/2018	7
				In Place		High Impact	Profile Change	26/07/2019	8
				In Place			Profile Change	30/01/2020	7
				In Place			Profile Change	29/05/2020	9
				In progress			Profile Change	14/12/2020	8
				Planned	31/10/2022		Profile Change	06/07/2021	9
				Planned	28/02/2023		Profile Change	08/12/2021	8
								Profile Change	19/05/2022

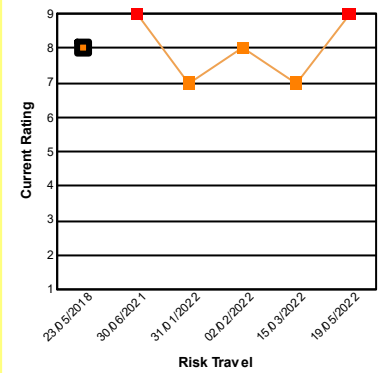


Date	Current Rating
17/10/2016	7
04/10/2018	8
10/12/2018	7
26/07/2019	8
30/01/2020	7
29/05/2020	9
14/12/2020	8
06/07/2021	9
08/12/2021	8
19/05/2022	9

Strategic Objectives Impacted	Financial Sound finance and management of assets
Review Comments	Risk reviewed by Paul Johnson, progress on mitigating actions updated 24/08/2022

Risk Register - Corporate Risk Register

Risk Title		Risk Ref	Risk Owner	Created	Last Review	Next Review				
Failure to achieve a balanced budget in the context of unprecedented pressures, which could significantly limit the delivery of other services for Children		SMBCC0147	Tim Browne	23/05/2018	08/09/2022	08/10/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level			
<p>- Unprecedented demand for Children Social Care Services at national level</p> <p>- Unpredictable demand for looked after children placements</p> <p>- Increased demand for special school places which is of necessity, met with out of borough placements causing additional costs on the SEND transport budget</p>	<p>- Impact on outcomes for children and young people</p> <p>- Reduction in other areas of service delivery in order to cover cost of acute services</p> <p>- Financial implications</p> <p>- Legal implications</p> <p>- Reputational damage</p>	Red	<ul style="list-style-type: none"> Joint Additional Needs Strategy and delivery plan in place Reshaping of Education services – completed Graduated approach for children and young people with additional needs Review of Specialist Commissioning Strategy Use of budget strategy reserve approved by full council. Future Funding agreed as part of MTFS (as at 24.02.22) Development of the Edge of Care Service linked to JTAI Action Plan Childrens Statement of Action, Childrens Improvement Plan Solihull Improvement Board – Independently Chaired ,oversight of the JTAI (Joint Targeted Area Inspection) Statement of Action Ensure robust commissioning and procurement of appropriate cost effective education placements to meet children’s needs Financial Recovery Plan overseen by the Director of Children’s Services & reporting to the Chief Exec & Leader of the council SEND Improvement Board established Development of workforce Strategy Monthly Children's Social Care financial modelling 	In Place		Red	New Record	23/05/2018	8	
		9	Complete		High	Profile Change	30/06/2021	9		
					Likelihood	Profile Change	31/01/2022	7		
						Profile Change	31/01/2022	7		
					In progress	Profile Change	02/02/2022	8		
						Profile Change	15/03/2022	7		
						Profile Change	19/05/2022	9		

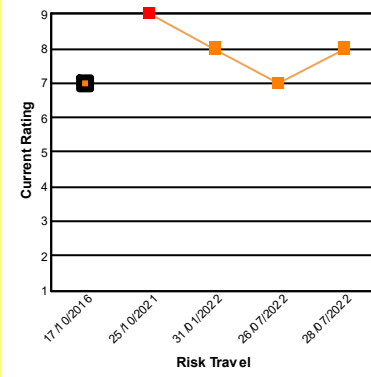


Risk Register - Corporate Risk Register

			• Review of Sufficiency Strategy completed	Complete		
Strategic Objectives Impacted		Financial				
		CORPORATE PRIORITY 1 - Improving outcomes for children and young people in Solihull				
Review Comments	MTFS Budget Report completed outlining pressures and additional resources required in year and for the 3 year MTFS period. Report has been to Cabinet/ CLT and will shortly be going to Scrutiny in Spetember and Cabinet in October.					
	08/09/2022					

Risk Register - Corporate Risk Register

Risk Title		Risk Ref	Risk Owner	Created	Last Review	Next Review				
Avoidable death, serious harm or abuse of a child where the Council has a duty of care; Child safeguarding practice review or Domestic Homicide Review publication leading to adverse publicity		SMBCC0149	Tim Browne	13/07/2010	13/09/2022	13/12/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level			
<ul style="list-style-type: none"> - Negligent action or failure to take action or excessive delay in taking action - Poor quality assessment and planning - Inexperienced staff - Poor supervision - Failure of systems including partnership information sharing - Failure to follow safeguarding procedures and processes 	<ul style="list-style-type: none"> - The Council being held liable for a death or serious injury to a child - Increased risk of litigation, prosecution and compensation claims - Loss of confidence and damage to reputation - Future recruitment challenges - Cost pressures 	<p style="background-color: red; color: white; text-align: center; padding: 2px;">Red</p> <p style="text-align: center; font-weight: bold;">9</p>	• Multi-Agency Improvement Board established	In Place		<p style="text-align: center; font-weight: bold;">Amber</p> <p style="text-align: center; font-weight: bold;">8</p> <p style="text-align: center; font-weight: bold;">Medium Likelihood</p> <p style="text-align: center; font-weight: bold;">High Impact</p>	New Record	17/10/2016	7	
			• Quarterly Executive and Lead Member briefings on exploitation	In Place			Profile Change	25/10/2021	9	
			• Additional capacity added through a fourth head of service	In Place			Profile Change	31/01/2022	8	
			• Childrens Services Improvement plan in development	In Place			Profile Change	26/07/2022	7	
			• Childrens Statement of Action, Childrens Improvement Plan	In Place	31/05/2022		Profile Change	28/07/2022	8	
			• Development of Workforce Strategy	In progress	13/12/2022					
• Recruitment drive is ongoing	In progress	13/12/2022								
Strategic Objectives Impacted		Safeguarding / Safety Legal/ Reputational CORPORATE PRIORITY 1 - Improving outcomes for children and young people in Solihull								
Review Comments		Improvement plan in place and work progressing. The plan covers a number of key areas of change to develop, improve practice and outcomes for children and families. – these include Children's Record Keeping Systems, Workforce, Performance Monitoring and Quality Assurance, Practice, Leadership and Management and Partnerships. Additional Social worker capacity recruited and reshaping of MASH has improved quality of decision making at the front door 13/09/2022								

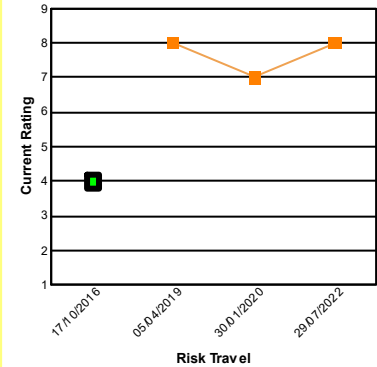


Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
A serious information breach requiring notification and a fine from the Information Commissioners Office	SMBCC0134	Paul Johnson	09/01/2013	27/06/2022	27/09/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level Event	Date	Rating
<ul style="list-style-type: none"> - Personal or sensitive information being sent to the wrong person by using an incorrect email or postal address - Sending or attaching the wrong personal or sensitive information to a communication - Personal or sensitive information being lost or stolen when taken out of the office 	<ul style="list-style-type: none"> - Distress to individuals concerned - Loss of public confidence in Council's ability to keep personal and sensitive information secure - Increased complaints to Local Government Ombudsman and /or Information Commissioner (ICO) - Increased possibility of regulatory enforcement action including the potential for significant fines - Reputation damage to the Council. 	Red 9	<ul style="list-style-type: none"> • Ongoing communication strategy to re-enforce good practice. • Details of poor training take up is sent to each member of CLT • Comprehensive suite of Information security policies that are periodically updated • Ongoing series of core brief items to stress the importance of information security • Take-up of training on information security monitored by the Corporate Safeguarding Board • Implement follow up to corrective actions using Directorate leads & monthly data breach measure scorecard to CLT • Mandatory training for all staff on Information Security, with all staff being up to date with their training • Full CLT review of any information security incident assessed as medium or high impact 	<ul style="list-style-type: none"> In Place In Place In Place In Place In Place In Place In progress In Place 		Amber 8 Medium Likelihood High Impact	New Record	17/10/2016	8
Strategic Objectives Impacted		Legal/ Reputational							
Review Comments	Risk reviewed by Paul Johnson, mitigations have been updated 27/06/2022								

Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
Inefficient systems and processes to share warning and information markers when dealing with a person , property or location for SMBC and SCH activities	SMBCC0154	Paul Johnson	25/07/2014	29/07/2022	29/10/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level		
- IT system malfunction or failure - Corporate and local warning marker and information systems out of sync - Warning markers and information markers held in multiple local systems that are not reflected in corporate system, e.g. LiquidLogic, Trading Standards, SCH (Open Housing) - Information not being maintained by individual services/teams - Issues with accessing information to keep it up-to-date - Data quality issues in the corporate system - Insufficient use of the Corporate Warning Marker Register	- Employees not being aware of warning and information markers when dealing with a person, property or location - Examples include potentially violent persons, environmental issues & property hazards, dangerous pets, customers with learning difficulties or disabilities who need additional assistance when communicating with them - Potential situations which may give rise to incidents, accidents and near misses occurring affecting the health and safety of employees and other people - Risks to customers themselves - Unable to demonstrate IT had adequate arrangements to protect staff - Significant fines / prosecution for non-compliance of health and safety and data protection legislation	Red	<ul style="list-style-type: none"> Corporate Warning Marker Board to receive monthly performance reports and Board members to complete follow-up action as needed Implement Communications Plan to ensure that staff are aware of the Register and the requirements in the Warning Marker Policy Implement audit process to ensure that local systems and other corporate systems are up to date and correct Produce training materials for staff to ensure they are able to use the Corporate Warning Marker Register as required Councillor access to warning marker information being organised Corporate system in place and available on the Intranet and records held on other systems Corporate Warning Marker Policy in place, produced by Information Governance Team and updated by Hazard Warning Marker Group Corporate Warning Marker Board led by the AD for Adults and will report back to the CSSG/HLT/CLT Membership from all key stakeholders, e.g. Information Governance, IT, Risk Management, Health and Safety, Social Care, SCH etc Corporate Warning Marker Board to meet regularly with appointed warning marker officers & ensure systems are working effectively Review recommendations made by Internal Audit of the system and update Board Action Plan 	In Place		Amber	New Record	17/10/2016	4
		8		Profile Change	05/04/2019	8			
		Medium Likelihood		Profile Change	30/01/2020	7			
		High Impact		Profile Change	29/07/2022	8			
		In progress		30/09/2022					
		In progress		31/10/2022					
		In progress		30/09/2022					
		In progress		31/10/2022					
		In Place							
		In Place							
In Place									
In Place									
In progress	16/09/2022								



Risk Register - Corporate Risk Register

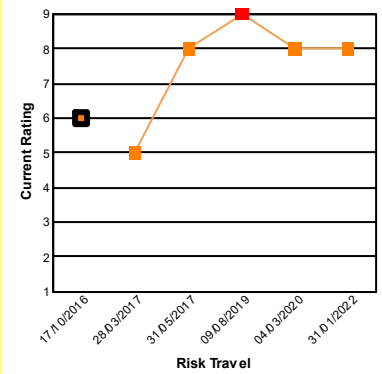
		<ul style="list-style-type: none"> • Review ongoing management requirements for the Warning Marker System and Policy & make recommendations to the Dir. of Resources • Use of new IT system to be monitored by Corporate Safeguarding Group 	<p>In progress</p> <p>In Place</p>	16/09/2022	
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Strategic Objectives Impacted Safeguarding / Safety

Review Comments Risk reviewed by Lizzie Edwards- updates agreed with Paul Johnson, net risk score increased to amber 8 based on the findings of the recent audit of Corporate Warning Markers
29/07/2022

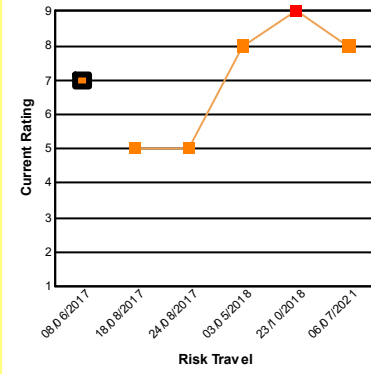
Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review							
Failure to meet statutory requirements within Children & Families Act relating to SEND	CSS0214	Tim Browne	02/09/2014	26/07/2022	26/10/2022							
Escalated from : Children's Services & Skills Directorate				Tim Browne								
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level					
							Event	Date	Rating			
- Poor financial controls - Insufficient staff resources - Lack of agreed process and procedures - Failure to issue educational health care plans within 20 week timescale and failure to comply with legal requirements to provide education placements	- Impact on outcomes for children and young people - Children's needs not met - Reputational damage, e.g. Quality / number of complaints - Tribunals - Judicial Review - Written statement of action	Red 9	• Ongoing review of Educational Health Care Plan (EHCP) timescale	Complete		Amber	New Record	17/10/2016	6			
							8	Profile Change	28/03/2017	5		
						In Place		Medium Likelihood	Profile Change	28/03/2017	5	
						• Statutory Assessment process and resources in place to meet timescales.	In Place		High Impact	Profile Change	31/05/2017	8
						• Establish Joint Additional Needs Board, Strategy and Delivery Plan	In Place			Profile Change	09/08/2019	9
										Profile Change	04/03/2020	8
										Profile Change	31/01/2022	8
						• Fully recruit to SEND (including StART) team structure per 2019/20 budget	Complete			Profile Change	31/01/2022	8
						• Fully revise SEND performance scorecard in line with audit recommendations	In Place					
						• Monitor impact of new provider and new procedures on controls over direct payments	In Place					
			• Recruit new Head of SEND (0-25)	Complete								
			• Implement all advice from Legal Service SEND specialist including further additional training for StART team	In Place								
			• Review High Needs Block Recovery Plan and strands	Complete								
			• Implement new casework management system (Liquidlogic)	Complete								
Strategic Objectives Impacted		Legal/ Reputational										
		CORPORATE PRIORITY 1 - Improving outcomes for children and young people in Solihull										
Review Comments	Work to implement the JAND Delivery Plan continuing 26/07/2022											



Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
Failure to secure sufficient funding to deliver the UK Central Programme	SMBCC0144	Mary Morrissey	08/06/2017	03/08/2022	03/11/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level Event	Date	Rating
- Lack of funding in the West Midlands Combined Authority (WMCA) Investment Programme - Pace at which the UK Central Programme needs to progress compared to when funding might be available - Date by which funding commitments need to be given to HS2 Limited for them to change their base scheme.	- The full economic growth potential of UK Central is not realised. - SMBC does not get HS2 Limited to change its base scheme. - The Council's vision for a world class Health & Innovation Campus at the Arden Cross site is not delivered. - Infrastructure and wider projects in the UK Central programme do not get funded.	Red 9	<ul style="list-style-type: none"> Regular communication with WMCA Finance Director and Investment Director on funding position of the CA Investment Programme. Quarterly funding claims are made to WMCA Detailed Masterplan in place for the Arden Cross site. The Council's UGC is in regular dialogue with HS2 Limited and the DfT about funding requirements for the UKC hub site. UGC/SMBC Director level Board in place to monitor progress and review and refine Funding Strategy (ExCom) Governance through the Council's Urban Growth Company Board to approve and monitor project progress and financial commitments Contributions from other funding bodies and partner contributions being pursued as an alternative funding source. Pipeline of projects being developed to access grant funding for wider UKC objectives. Build strong business cases, including securing resources for delivery and resilience. Chancellor's March 2021 budget approved £50 million funding towards the multi-storey car park at the hub site. June 2021 CA Board approved £45 million loan to provide the remaining funding for the Multi-Storey car park. Finalise Collaboration and Land Value Capture Agreements with the Arden Cross consortium 	<ul style="list-style-type: none"> In progress In progress In Place In progress In progress In progress In Place In Place In Place 		Amber 8 Medium Likelihood High Impact	New Record Profile Change Profile Change Profile Change Profile Change Profile Change	08/06/2017 18/08/2017 24/08/2017 24/08/2017 03/05/2018 23/10/2018 06/07/2021	7 5 5 5 8 9 8



Risk Register - Corporate Risk Register

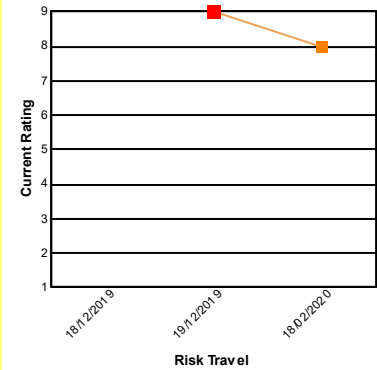
		<ul style="list-style-type: none"> • Final funding commitments need to be given to HS2 by 2023, which allows some time for these to be developed and finalised. • On-going dialogue with (and support from) senior Health colleagues about the proposed Health & Innovation campus. • Rigorous project and financial management arrangements in place 	<p>Planned</p> <p>In progress</p> <p>In Place</p>		
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Strategic Objectives Impacted CORPORATE PRIORITY 6 - Maximising the opportunities of UK Central and HS2.

Review Comments Risk reviewed by Mary Morrissey on 03/08/2022. No change at this time.
03/08/2022

Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
Use of Spandrel Panels in 16 high rise buildings may not meet latest legislation	SMBCC0157	Mary Morrissey	18/12/2019	12/09/2022	12/12/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level Event	Date	Rating
- Presence of Spandrel Panels - Construction materials being non-compliant with current regulations - MHCLG guidance issued identifying the above	- Possible non compliance with building regulations and fire safety regulations - Financial implications - Reputational damage	Red 9	• Engagement with residents, press release and Newsletter delivered to all HRRB residents	In Place		Amber	New Record	18/12/2019	
			• Architect commissioned to cost and specify remedial solution	In Place		8	Profile Change	19/12/2019	9
			• Seek SMBC financial approval to commission remedial works	In Place		Medium Likelihood	Profile Change	18/02/2020	8
			• SCH Fire safety management arrangements in place	In Place		High Impact			
			• Subject to relevant statutory body approvals e.g. WMFS to specify building regs approval of designs and commission	In Place					
			• Report commissioned into the risk and conclusions reported to SCH and SMBC Chief Executive, Council Leader and Fire Service	Complete					
			• Building Control completed a review of HRRB's, designs produced in line with latest building regulations and submitted to WMFS	Complete					
			• Fire Safety prevention measures have been introduced at all affected buildings	Complete					
			• Fire Service have carried out an on site risk assessment of resource requirements in response to any incidents.	Complete					
			• Planning permission has been granted on ten blocks for the communal area works	Complete					
• Structural Engineer appointed and will carry out invasive on-site investigations.	In Place								
• Planning applications submitted on 6 Blocks	Complete								



Risk Register - Corporate Risk Register

		<ul style="list-style-type: none"> • Associated building regulation applications to be developed by SCH for all 16 buildings requiring remedial work • Ongoing review of the Spandrel Project at both SMBC and SCH BSDG(Building Safety Delivery Group) • Spandrel replacement with the Rockpanel compliant system 	<p>In progress</p> <p>In Place</p> <p>Planned</p>	<p>31/12/2022</p> <p>30/09/2022</p>	
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Strategic Objectives Impacted

Safeguarding / Safety

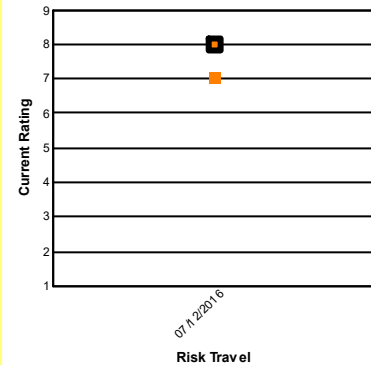
Review Comments

This risk is identifying the need to address the current position that the 'Use of Spandrel Panels in 16 high rise buildings may not meet latest legislation'. The replacement Spandrel Panels Project will become a mitigation for the overall Building Safety Risk that SMBC are developing through the Building Safety Group.

12/09/2022

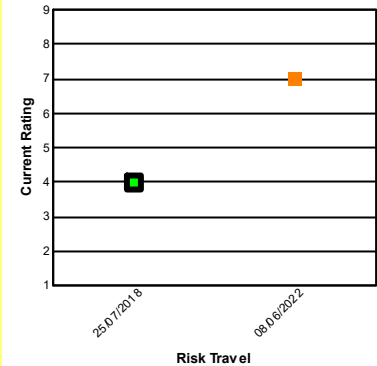
Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
Failure to manage the structural deficiency at Mell Square Car Park	SMBCC0146	Paul Johnson	07/12/2016	28/06/2022	28/12/2022				
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level		
<ul style="list-style-type: none"> - Original construction of structure. - Lack of reinforcement in flat slab. - Deficiency in the original design code/ application of that code 	<ul style="list-style-type: none"> - Excess structural deflection. - Development and prorogation of cracking at highly stressed location of the structure - Financial implications - Negative publicity 	<p style="text-align: center;">Amber</p> <p style="text-align: center;">8</p>	<ul style="list-style-type: none"> • New Structural Survey of Mell Square carried out to provide a new assessment of the structure and mitigating actions 	Complete		<p style="text-align: center;">Amber</p> <p style="text-align: center;">7</p> <p style="text-align: center;">Low Likelihood</p> <p style="text-align: center;">High Impact</p>	New Record	07/12/2016	8
			<ul style="list-style-type: none"> • Redevelopment scheme of Mell Square to incorporate the replacement of the Multi-Storey Car Park 	In progress	31/03/2025		Profile Change	07/12/2016	7
			<ul style="list-style-type: none"> • PST to continue with a detailed weekly survey to confirm that the car park should remain open 	In Place					
			<ul style="list-style-type: none"> • Consulting Engineers have confirmed the car park can remain open for the next 2 years 	In Place					
			<ul style="list-style-type: none"> • Works to re-mark parking bays to reduce loading to decks agreed to be implemented 	Complete					
Strategic Objectives Impacted		Safeguarding / Safety							
Review Comments	Risk reviewed by Paul Johnson, no changes at this time 28/06/2022								



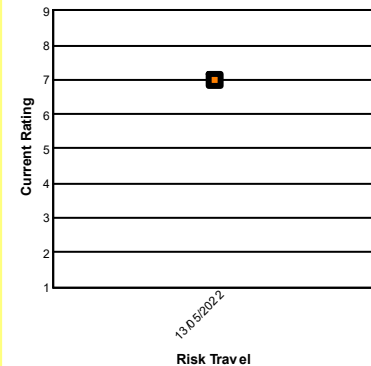
Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review				
a. Failure to co-ordinate multi agency response to support Domestic Homicide Reviews (DHR's).	NHS0006	Mary Morrissey	25/07/2018	01/08/2022	01/02/2023				
b. Failure of agencies to take action on agency and review recommendations and action plan.									
Escalated from : Community Safety and Partnerships				Gill Crabbe					
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level		
a1 Insufficient capacity within Council and partnership to support the DHR process a2. lack of robust processes to manage DHRs a3. Agencies not engaging in the process or providing update information in a timely manner b1. Agencies not being able to implement change within agreed timeframe as expected. b2 Agencies organisational priorities conflict with outcomes of reviews. b3. Lack of oversight and escalation process	- Disruption to the DHR process - Reputational damage - Legal implications	Amber	<ul style="list-style-type: none"> Dedicated Community Safety Team to co-ordinate/support the DHR process 	Complete		Amber	New Record	25/07/2018	4
		8	<ul style="list-style-type: none"> Escalation process if responses are not received 	Complete		Low Likelihood	Profile Change	08/06/2022	7
			<ul style="list-style-type: none"> Regular engagement with the Home Office throughout the process and notification of any issues 	In Place		High Impact			
			<ul style="list-style-type: none"> Defined DHR process including roles and responsibilities 	Complete					
			<ul style="list-style-type: none"> Scoping exercise is conducted with all agencies 	In Place					
			<ul style="list-style-type: none"> Process review and redesign 	Complete					
			<ul style="list-style-type: none"> Development of Executive Panel to have oversight of DHRs 	Complete					
			<ul style="list-style-type: none"> DHR case progress tracker 	Complete					
			<ul style="list-style-type: none"> DHR recommendation and action tracker 	In Place					
Strategic Objectives Impacted		Legal/ Reputational							
		CORPORATE PRIORITY 3 - Take action to improve life chances and health outcomes in our most disadvantaged communities.							
Review Comments	A new Executive group has been established and is meeting monthly . Temporary admin support is in post to administer DHR process with oversight from Community Safety Lead . Case and recommendation trackers have been established.								
	01/08/2022								



Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review		
Failure to meet statutory duties and deliver a balanced budget in the context of nationally recognised pressures facing Adult Social Care, including the impact of Covid 19 in 22/23.	SMBCC0158	Jenny Wood	13/05/2022	08/06/2022	08/12/2022		
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level
<ul style="list-style-type: none"> - Nationally recognised Adult Social Care challenges including financial and workforce, capacity and market fragility. - Demographic pressures, e.g., rising older population and younger adults with a disability living longer and needing social care. - Impact of Covid19, including impact on people's situations and choices, service impacts and uncertainty about financial impact and national funding models for longer term. - National legal and policy changes happening at pace, including implications of Health and Care Act 2022 - Rising cost of the social care market in Solihull driven by a variety of factors, e.g., wage (see below), energy, materials and fuel cost rises. - Need for care wages to be competitive against other local sectors, to ensure adequate number of staff are attracted to sector. 	<ul style="list-style-type: none"> - Detrimental service impact affecting those receiving support and services. - Inadequate delivery of service for individuals and associated factors such as increased complaints and/or legal challenges. - Reputational damage. - Adverse financial consequences, e.g., unavoidable demand-led spend to meet statutory needs, emergence of overspends. - Delay in delivery of new legislative or policy requirements. 	<p>Red</p> <p>9</p>	<ul style="list-style-type: none"> • Identification of, development and delivery of commissioning strategies/plans to improve services. • Utilisation of additional national funding / grants in line with national guidance, to mitigate for local pressures. • Utilise nationally required and local surveys to determine where improvements are needed and initiate and deliver action plans. • Implement MTFs plans with oversight of budget, performance & quality position via DLT and reporting to ARTOP and CLT as required • Undertake 'Fair Cost of Care' work as set out via national guidance. • Transformation Programme incorporates and delivers the relevant statutory and policy changes for the year • Ongoing communications, co-production and engagement with people with care and support needs and carers • Ongoing engagement with care providers to ensure appropriate responses developed to local market considerations. • Regular reporting arrangements (performance, practice quality, complaints, HR, activity etc) at DLT. • Development and delivery of BCF and integrated commissioning plans (where relevant) with CCG/ICS for 22/23. 	<ul style="list-style-type: none"> In progress In progress In progress In progress In progress In progress In progress In Place In progress 		<p>Amber</p> <p>7</p> <p>Low Likelihood</p> <p>High Impact</p>	<p>New Record</p> <p>13/05/2022</p> <p>7</p>



Risk Register - Corporate Risk Register

		<ul style="list-style-type: none"> • DLT governance arrangements for oversight of all Directorate activity, to identify and implement mitigation plans where needed 	In Place			
Strategic Objectives Impacted		Financial				
		CORPORATE PRIORITY 2 - Good quality, responsive, and dignified care and support for Adults in Solihull when they need it.				
Review Comments	This risk has been reviewed by Jenny Wood and progress against mitigating actions updated .					
	08/06/2022					

Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review					
Avoidable death, serious harm or abuse of an adult where the Council has a statutory duty of care in 2022/23	SMBCC0159	Jenny Wood	13/05/2022	08/06/2022	08/12/2022					
Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level Event	Date	Rating	
<p>Poor practice by staff due to lack of experience, competence issues, poor supervision, or inadequate training</p> <p>Failure to recognise risks</p> <p>Unable to commission appropriate services to meet needs, e.g. residential care, due to lack of market interest or presence</p> <p>Lack of appropriate quality assurance processes and systems</p> <p>Demand outstrips capacity leading to lack of timely responses by services</p> <p>Policy and guidance is not in place</p> <p>Lack of essential joint working with relevant partners</p>	<p>- Serious harm, neglect or death of an adult with care and support needs.</p> <p>- Loss of confidence in the Council as the lead agency for safeguarding.</p> <p>Reputational damage.</p> <p>Domestic Homicide Review.</p> <p>Safeguarding Adults Review.</p> <p>Complaints and legal challenge.</p>	Red	<ul style="list-style-type: none"> • Arrangements in place for delivery of good quality, safety & good performance in independent sector with sufficient capacity. • Safeguarding Manager acts as subject matter expert to provide advice and coordinate delivery of Safeguarding Management Plan • Utilise Solihull Together and Health and Wellbeing Board as key forums to maintain effective working relations with key partners • Oversight of ASC activity and performance at DLT, inc. safeguarding, with mitigating actions agreed where improvement needed. • Practitioners and Managers are well trained and supported to ensure they understand and respond appropriately to situations • Appropriate local policy and guidance in place to deliver adult social care related responsibilities • SSAB facilitates a coordinated safeguarding approach across all key agencies and performance is regularly monitored. • Operational Safeguarding Champions Group in place and ACS representation on the Corporate Safeguarding Steering Group. • Appropriate workforce support in place to facilitate good practice in service delivery • Appropriate workforce support is in place to facilitate good practice in commissioning • Robust commissioning arrangements for the safe development, launch and full establishment of new services. 	<p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p> <p>In progress</p>		<p>Amber</p> <p>7</p> <p>Low Likelihood</p> <p>High Impact</p>	New Record	13/05/2022	7	

Risk Register - Corporate Risk Register

Strategic Objectives Impacted

Safeguarding / Safety

CORPORATE PRIORITY 2 - Good quality, responsive, and dignified care and support for Adults in Solihull when they need it.

Review Comments

This risk has been reviewed by Jenny Wood and progress against mitigating actions updated .

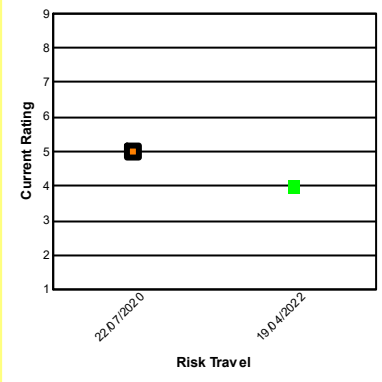
08/06/2022

Risk Register - Corporate Risk Register

Risk Title	Risk Ref	Risk Owner	Created	Last Review	Next Review
Failure to achieve Compliance with new duties under the Domestic abuse act 2021 including duty for provision of domestic abuse safe accommodation for victims who need to leave their home	PHD0069	Ruth Tennant	22/07/2020	05/09/2022	05/12/2022

Escalated from : Public Health Directorate Donna Vines

Potentially Caused by	Potentially Leading to	Gross Risk Level	Mitigating Actions	Action Status	Target Date	Net Risk	Previous Net Risk Level		
							Event	Date	Rating
- New legislation - Competitive tender process for support on our primary 11 bed unit, will require current Provider to give notice to premises landlord, which will trigger a review of property usage. - Limitations to develop suitable accommodation locally	- Failure to meet new statutory responsibilities	Amber	<ul style="list-style-type: none"> Short term contract to be put in place to continue provision until 2024 	Complete		Green	New Record	22/07/2020	5
		5	<ul style="list-style-type: none"> Work to continue on improving our DA Safe Accommodation offer to enable it to better meet the accommodation needs of DA victims 	In progress	30/03/2023	Low Likelihood	Profile Change	19/04/2022	4
			<ul style="list-style-type: none"> Update reports scheduled for DAPG, SSB, HWB, CKT and SCH committee 	Complete		Medium Impact			
			<ul style="list-style-type: none"> DAPG transitioned into Domestic Abuse Partnership Board and able to meet statutory duty 	Complete					
			<ul style="list-style-type: none"> Needs assessment complete and strategy published 	Complete					
			<ul style="list-style-type: none"> New board in place to meet statutory duty 	Complete					
			<ul style="list-style-type: none"> DA Safe Accommodation group re-established with focus on improving our offer to those who are at risk or are homeless due to DA 	Complete					



Strategic Objectives Impacted Legal/ Reputational

Review Comments 11 bed unit in contract until March 2024
 Dedicated Housing advocacy in contract until March 23, and included in community specialist support commissioning scope assessing viability of issuing an expression of interest for accommodation based support service
 05/09/2022

Council Strategic Priority Impacted Summary	Low	Medium	High
CORPORATE PRIORITY 1 - Improving outcomes for children and young people in Solihull		CSS0214 SMBCC0149	SMBCC0147
CORPORATE PRIORITY 2 - Good quality, responsive, and dignified care and support for Adults in Solihull when they need it.		SMBCC0158 SMBCC0159	
CORPORATE PRIORITY 3 - Take action to improve life chances and health outcomes in our most disadvantaged communities.		NHS0006	
CORPORATE PRIORITY 6 - Maximising the opportunities of UK Central and HS2.		SMBCC0144	
Financial		SMBCC0158	SMBCC0133 SMBCC0147
Legal/ Reputational	PHD0069	CSS0214 NHS0006 SMBCC0134 SMBCC0149	
Safeguarding / Safety		SMBCC0146 SMBCC0149 SMBCC0154 SMBCC0157 SMBCC0159	
Sound finance and management of assets			SMBCC0133