

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Target Risk		Further actions			Direction of travel (from previous quarter)	Q4 review summary
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Risks scoring 15 and above managed as treat																	
Strategic Risk Register																	
STR003	Delivery of transformation programmes	If there are challenges with resource recruitment, changes in market conditions, changes in political decisions, change resistance, poor project management, budgetary management and engagement (staff and residents), this could lead to failure to deliver major transformation programmes, specifically Brent Cross, Mill Hill depot, Colindale office relocation, Street Scene Alternative Delivery Model (ADM), Adults & Communities ADM, Libraries programme and Social Care Practice Improvement and failure to maintain a balanced budget over the MTFS period resulting in resident dissatisfaction, disruption to services, financial loss, and reputational damage	Chief Executive	Financial	We have clear leadership in place through our Commissioning Directors, and the decision-making process is well understood. Our governance structure is set up to support delivery, with member challenge. Our annual finance and business planning processes also support this.	5	4	5	3	15	5	2	Treat	Continuing monitoring of resources available to transformation programmes Bi-annual audits of specific projects within transformation programmes Update of project management methodology to enable use of agile project methodology where appropriate Application of refreshed Risk Management Framework across all transformation programmes	Ongoing Ongoing 31 May 2017 31 March 2017	Same	The audits of specific projects within transformation programmes will ensure the Council's project management methodology is being applied.
STR007	Significant safeguarding incident	If Council services and partners do not effectively manage their relevant safeguarding risks, this could lead to a safeguarding incident resulting in potential harm to individuals and/or families, potential legal challenge, resident dissatisfaction, public scrutiny	Chief Executive	Statutory Duty	Children: elements of the Practice Improvement Plan have been implemented, including training. We also have a supervision policy and practice standards, and undertake quality assurance activity. We adhere to pan-London safeguarding procedures and processes, and ensure scrutiny and oversight of safeguarding via assurance reports to the lead member, SCB Assurance, Barnet Safeguarding Board, and the Social Work Improvement Board Adults: adherence to the multi-agency pan London safeguarding adults procedures. Training programme. Supervision policy and practice standards. Quality assurance programme in place including case audit, supervision audit, performance monitoring. Assurance reports to SCB Assurance, Barnet Safeguarding Adults board and PQA sub-group; also to Adults committee and HWB annually.	5	5	5	3	15	5	3	Treat	Migration of existing documents from Wisdom to LCS Commence new vulnerable adolescents service model Quality assurance ongoing implementation Implementation of Mosaic safeguarding reporting	31 January 2017 31 March 2017 April 2018 Ongoing	Same	The majority of the 2016/17 Practice Improvement Plan has been implemented and the plan is currently being refreshed for 2017/18. As part of this Signs of Safety training has been rolled out. Supervision and practice standards help to control this risk, as well as quality assurance activity. Teams in the service are increasing their use of group supervision which will lead to an improvement in the quality of reflective practice. Quality assurance has improved with the embedding of a refined audit function. The numbers of audit increased in January providing a richer picture of practice and more timely turnaround of findings. The migration of documents from Wisdom to LCS has been completed which has improved information accessibility and management. A new multi-disciplinary team (REACH) has been implemented to deliver intensive, wraparound interventions for high risk adolescents. The residual and target risk scores remain unchanged.
Adults and Communities																	
AC001	Increased overspend to meet statutory duties	Adults & Communities Delivery Unit could have insufficient resources to meet its statutory duties due to operating in an environment in which there is inherent uncertainty in future demand for services, exacerbated by a potential inability to deliver savings, reduced ability to raise income from clients, the rising cost of care, other in year financial pressures due to unexpected demand, the increasing complexity and cost of care packages, and legislative changes. This could result in harm to individuals, legal challenge, worsening budget overspend, and reputational damage.	Adults and Communities Director	Statutory Duty	The Council's budget management process (MTFS) forecasts demographic growth and pressures over a 3 year period. Budget and performance monitoring and management controls are used throughout the year. Work to reduce addressable spend (such as expenditure on agency staff) is being carried out in year. The Joint Strategic Needs Assessment will identify future demand pressures, and the Council will undertake initiatives focused on reducing and managing future demand in response, including the Adults' New Operating Model/ Alternative Delivery Vehicle which focus on reducing demand for services and finding more creative ways to manage complex need.	5	5	5	4	20	3	3	Treat	Changing residents behaviours to be more self sufficient and resilient Increased focus on wellbeing and prevention services New target operating model focusing on strength-based approach Securing funding (financial settlement) at a national level Follow on actions from ADASS Finance Lead budget challenge with a particular focus on the cost of care for people with learning disabilities	Ongoing	Reduced	In year recovery plan continues to be delivered with increased controls on spending including recruitment freeze; all non-care spend needing AD approval; AD chairing fortnightly panel which agrees packages of care. Follow on actions from ADASS Finance Lead challenge continue with service review of learning disabilities teams commencing in February 2017. 2016/17 budget will be overspent at year end but work to agree the 2017/18 budget (including agreement of social care precept) should reduce the likelihood of this risk in the next financial year. Additional funding to support adult social care was announced by central government in the Spring Budget.
AC002	Failure of care provider	A care provider could suddenly be unable to deliver services, due to: - provider going into administration - failure of regulatory inspection relating to quality of service - care provider chooses not to deliver services - HS&E breach leading to operational disruption to manage the situation, harm to individuals by not having their care and support needs met, unexpected financial consequences, breach of statutory duty,	Head of Integrated Care Quality	Business continuity	For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers. The Council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector. A regular report setting out provider risks and concerns is circulated to the DASS and to the DU's Leadership team on a monthly basis and discussed through the regular DASS assurance meeting.	5	5	4	4	16	4	3	Treat	Fully scope opportunities for a more integrated approach with the CCG - step up engagement programme - additional staff - greater availability of training and literature for care providers	Jan-17	Reduced	The DU continues to deliver a programme of quality assurance, practice improvement and provider support to maintain good relationships with the sector and mitigate any risk of failure. During the quarter one homecare provider has failed and one nursing home has closed and the DU has successfully managed both these events. As a result we have reviewed and reduced the impact rating for this risk. The new enablement service is up and running and a report on the lessons learned from the failure of the previous provider was presented to Adults and Safeguarding and Performance & Contract Management committee in January 2017.
AC003	Unacceptable level of quality services provided by care providers	Unacceptable levels of quality of services provided by care provider could lead to additional dedicated Barnet resource needing to be put in place to address the situation, resulting in reduced ability to manage BAU, financial consequences. If the additional resource is not able to address the underperformance of the care provider, this could also lead to harm to individuals, reputational consequences	Head of Integrated Care Quality	Statutory Duty	For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers. The Council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.	4	5	4	4	16	3	3	Treat	Fully scope opportunities for a more integrated approach with the CCG - step up engagement programme - additional staff - greater availability of training and literature for care providers	Jan-17	Same	The DU continues to deliver a programme of quality assurance, practice improvement and provider support to maintain good relationships with the sector and mitigate any risk of failure. Event was held for registered managers of care providers with high attendance and positive feedback. During the quarter one homecare provider has failed and one nursing home has closed and the DU has successfully managed both these events. As a result we have reviewed and reduced the impact rating for this risk. The new enablement service is up and running and a report on the lessons learned from the failure of the previous provider was presented to Adults and Safeguarding and Performance & Contract Management committee in January 2017.
AC004	Surge in demand from NHS	An unpredictable surge in demand from the NHS in situations where there is limited capacity could lead to the DU being unable to meet this demand within the NHS's required timescales. This could result in financial consequences, operational disruption leading to rushed decisions being made that have unintended negative consequences, potentially for individuals that have been discharged, and increased central government scrutiny.	Assistant Director Adult Social Care	Statutory Duty	System-wide resilience monies have been made available and these can be used to buy in extra capacity, subject to agreement by the NHS-led Improvement Board. There are monthly system resilience and operational resilience meetings between LBB, CCG and NHS Provider Trusts to discuss & manage pressures in the system, and to deliver action plans. Daily conference calls are in place to deal jointly with events as these happen.	4	5	3	5	15	3	3	Treat	- Exploring additional preventative measures (e.g. Barnet Integrated Locality Team) - Ongoing engagement with NHS partners (providers, Barnet CCG) at strategic level	Ongoing	Same	Work with NHS partners continues. Within the quarter, the Assistant Director Social Care participated in an NHS-led Rapid Improvement Event to improve hospital discharge pathways. Senior managers attend the joint A&E Delivery Board to monitor systems resilience and the Delivery Unit has supported rollout of the SHREWD systems resilience dashboard across North Central London.
AC008	Non-adherence to safeguarding policies and procedures	Insufficient competent staff (permanent and agency, at all levels) to meet rising demand and complexity could lead to non-adherence with policies and procedures (specifically safeguarding within the Care Act, and London-wide safeguarding policies and procedures), resulting in death or serious harm to individuals, legal challenge, financial loss, decreasing staff morale due to greater pressure and reputational damage.	Head of Safeguarding Adults	Statutory Duty	Staff training is in place, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision (and responds to, for example, supervision and other quality audits). Regular case file audits take place (using a pool of auditors from across the Department). Monthly reporting to leadership team on safeguarding activity. Monthly quality and safeguarding meeting with DASS includes review of high risk cases. External case file audits are conducted. The Safeguarding Adults Board (multi-agency) meets regularly. Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process.	5	4	5	3	15	5	2	Treat	- Fill vacant posts - Recognition of good management - Provision of proper support to management - Continue multi-agency work	Ongoing	Same	Recruitment to critical vacant posts has been agreed. There is an internal and external case audit programme in place which covers the quality of safeguarding work, with an internal audit to be completed in April 2017.

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AC011	Breach of mental capacity act or code of practice	Insufficient competent staff (permanent and agency, at all levels) to meet rising demand and complexity could lead to breach of the Mental Capacity Act or Code of Practice, resulting in Barnet not acting in someone's best interest (Mental Capacity Act), and as a result serious harm to individuals and/or the ongoing impact of such a breach on an individual's life; legal challenge, financial loss (legal costs) and reputational damage.	Statutory Duty	Compliance	As with safeguarding issues, staff training is in place, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision (and responds to, for example, supervision and other quality audits). Regular case file audits take place (using a pool of auditors from across the Department). Monthly reporting to leadership team on safeguarding activity Monthly quality and safeguarding meeting with DASS includes review of high risk cases. External case file audits are conducted. The Safeguarding Adults Board (multi-agency) meets regularly. Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process.	5	4	5	3	15	5	2	Treat	- Fill vacant posts - Recognition of good management - Provision of proper support to management - Continue multi-agency work	Ongoing	Same	A review of the DoLS process has begun which will explore how existing resources can be allocated to streamline the process and target priority cases. To support this a rota has been established to ensure internal Best Interest Assessors are used to their full potential.
Customer Support Group (CSG)																	
CSG13	IT service obsolescence	Inability of current infrastructure to handle multiple service applications due to portfolio of systems not being managed properly, with many approaching end-of-life, resulting in outdated and unusable systems, poor-performing systems and potential security breaches	Head of Information Management	Business continuity	Network design is validated through Public Services Network certification and Capita third party assurance. Dedicated infrastructure staff within Capita are focused on the control of the Barnet infrastructure. Capacity checks on wireless network are currently taking place to increase speed and resilience.	4	5	4	4	16	4	2	Treat	With the completion of the 3 IT audits & the introduction of ServiceNow which is due to go Live in June 2017 the previous concerns will be addressed, as the inter relational database will be implemented. Also with new projects the IT Contract Manager role & Technical Design Authority is capturing issues before projects start	Jun-17	Same	We are maintaining the current risk score until the ServiceNow solution is in and working.
Family Services																	
FS001	Significant child safeguarding incident	Inappropriate response or poor decision-making around a case leads to a significant children's safeguarding incident, resulting in increased risk of significant harm or death of a child, and reputational damage.	Asst.Director, Social Care	Statutory Duty	The majority of the 2016/17 Practice Improvement Plan has been implemented. Delivery of the plan is monitored regularly and overseen by a Board chaired by the Chief Executive. Signs of Safety training is being rolled out as part of the toolkit to implement resilience-based practice across the service and partnership, which supports purposeful practice Supervision and practice standards help to control this risk, as well as quality assurance activity. We provide assurance reports to the lead member, SCB Assurance, Barnet Safeguarding Board, and the Social Work Improvement Board, to ensure scrutiny and oversight. The lead member meets monthly with service leads to provide oversight.	5	5	4	4	16	4	3	Treat	- Continued implementation of the Practice Improvement plan -Refresh of the PIP -Systemic Training undertaken by leaders	Apr '17 (TBC) April '17 October '17	Same	This will always be a significant risk for the service. Progress has been made around embedding the resilience-based model of practice; however it remains stable with the control actions in place.
FS004	Serious gang-related incident	As a result of inappropriate decision making, which could be exacerbated by a lack of timely access to information, a gang and serious youth violence related incident could occur involving one or more young people within the borough resulting in a child death and reputational damage.	Interim Assistant Director, Family Services	Health & Safety	Our Gangs and Serious Youth Violence Strategy is overseen by the Community Safety Partnership Board and Youth Offending Partnership Board. We also have a gangs operational group, and a gangs, missing and child sexual exploitation strategic group. Our gangs operational protocol and screening tool helps control this risk, as well as the Keeping Young People Safe preventative project. A Gangs surgery is in place for professionals and prevention activity is taking place in schools. There is a Serious Incidence Response Protocol in place for the partnership. -A new multi-disciplinary team has been established to deliver intensive, wraparound interventions for high risk adolescents.	5	5	4	4	16	4	3	Treat	- Continued implementation of the Strategy - Outcome of Community Safety / Family Services bid for a preventative gangs project delivered by VCS.	Ongoing Jun-16	Same	Intelligence suggests that this risk is currently stable. Additional mitigations added Q4. Introduction of adolescents team may lead to review of likelihood once impact is evident (likely second half of 2017)
Regional Enterprise (Re)																	
RE001	Development pipeline: Property build exceeds target cost	LBB are unable to commission the construction of the properties specified within the development pipeline at the target cost defined within the business plan due to: - construction inflation -team skills and experience - design that pushes up costs - team skills and experience - ineffective management of delivery - All of which could results in reduced profit or loss on properties, potential abandonment of the project and lose sunk costs, reputational damage - a sales/costs balanced design approach	Deputy Chief Executive Commissionin g Director, Growth & Development	Financial	Development Management provided by GL Hearn - Project management toolkit (gateway process) - Contingency within the target cost - competitive procurement process - current contractor prices are being challenged through a benchmarking process - Schemes have been re-appraised and value engineered at supply chain costs - negotiations with the selected contractor are continuing	4	5	4	4	16	3	3	Treat	- House Design review process - Review of the procurement process for construction projects	Ongoing	New	Ongoing monitoring.
PB13	Development Tranche 1	As a result of the failure to achieve Planning then the future pipeline within Barnet leads to wider growth to the JV not being achieved resulting in reduced margins, reduced stakeholder confidence, reputational damage and reduced revenues.	Deputy Chief Executive Commissionin g Director, Growth & Development	Financial	Submission to February Planning Committee has been delayed by Legal Challenges to aggregate the sites across the borough to achieve the affordable housing content. The Planning Consultant is in dialogue with the LPA and their legal advisors The independent viability assessor is still in dialogue with the development team but this is not believed to be insurmountable.	4	4	4	4	16	3	3	Treat	The business case for DPP Tranche 1 is being revised in collaboration with Capita/RE and there will be a new model for delivery that can be rolled out to the remaining tranches delivered by RE	Ongoing	New	A considerable amount of work has been put into a new delivery model that will result in a new business case being presented to ARG in June
PB14	Development Tranche 4	As a result of our inability to identify the next tranche of sites, reach commercial agreements and progress to planning in 2016 leads to failure to take tranche 4 sites forward to Planning in 2016 to achieve the growth targets in the business plan resulting in increased costs, reduced margins, reduced stakeholder confidence, reputational damage, and reduced revenues.	Deputy Chief Executive Commissionin g Director, Growth & Development	Financial	Currently the Development Pipeline Board has ring-fenced 13 sites for viability and affordability assessments to be undertaken. A number of these sites need to be taken forward to Planning in 2016 to achieve the growth targets in the business plan. Commercial agreement will have to be reached with the council in developing these sites Political backing will have to be achieved to allow the developments to proceed.	4	4	4	4	16	2	3	Treat	The DPP Tranche 4 work has been continuing on an 'at risk' basis with GL Hearn providing initial feasibility. The resolution of the Tranche 1 delivery model will allow a clear vision for Tranche 4	Ongoing	New	Initial feasibility carried out, site survey work has been procured.

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OP2	Land Registry Overarching external authority	Reduced revenues and loss of income due to Government plans to transfer the provision of the Land Registry service provided by Land Charges to an overarching external authority.	Deputy Chief Executive Commissioning Director, Growth & Development	Financial	Monitor the debate and progress on Government plans to be able to make an assessment on the full impact of the proposals. The Plans are now a reality – Act has received Royal Assent – infrastructure Act – migration scheduled 2017 to 2023.	3	5	3	5	15	3	5	Treat	Until we get any proposed implementation dates and further information on new burdens funding (Government and LGA and land registry) we are not in a position to initiate any change control notice or take other similar action. We continue to closely engage with the Land Registry to gather as much information as possible about progress in this regard. We have drafted a briefing note that will be shared with the Authority soon.	Ongoing	Same	We continue to closely engage with the Land Registry to gather as much information as possible about progress in this regard.
Risks scoring 15 and above managed as tolerate																	
STR004	In year budget reduction	The uncertainty and therefore lack of clarity on impact of changes in the national and regional political landscape, legislative changes and local government funding changes (e.g. lack of new funding for pressures in Adult Social Care and business rates localisation) that affect LBB services could lead to further reduction of the in-year budget resulting in non-achievement of MTFS target, reduction in service quality, resident dissatisfaction, deterioration of services, use of reserves and reputational damage. This could also have an impact on the existing overspend by increasing it.	Chief Executive	Financial	We have some contingency and reserves in place to mitigate the short term impact. We undertake forward planning, regularly updating our budget assumptions and monitoring the Government's fiscal announcements. However, we also maintain flexibility within existing plans to instigate recruitment freezes in non-front line services whilst long term plans are being put into place. We also maintain good contacts with central Government, to remain as informed as possible.	5	4	5	3	15	5	3	Tolerate	Continuing monitoring of resources available to transformation programmes Bi-annual audits of specific projects within transformation programmes Update of project management methodology to enable use of agile project methodology where appropriate Application of refreshed Risk Management Framework across all transformation programmes	Ongoing	Same	The Medium Term Financial Strategy and Capital Programme were presented to Policy & Resources in February 2017 and Full Council in March 2017. These included options for closing the gap and a balanced budget was agreed. Robust monitoring of the savings in the monthly budgetary control process will be in place for 2017/18.
STR005	Growth assumptions in the budgets	Due to a predication of contracts on income and a strategy that is increasingly focused on income, failure to deliver key transformation programmes and / or a fall in income would result in growth assumptions in the budget not materialising, causing potential failure of contracts and partners pulling out, and deterioration of the Council's financial position	Chief Executive	Financial	We have prudent contingency and reserves in place. We undertake forward planning, regularly updating our budget assumptions and monitoring the Government's fiscal announcements. We also maintain good contacts with central Government, to remain as informed as possible.	5	4	5	3	15	5	3	Tolerate	Monitoring	Ongoing	Same	Income and growth assumptions were reviewed during the budgetary control process and informed the setting of the 2017/18 budget. Accounts for 2016/17 are being finalised and any assumptions made that did not materialise will be reviewed to determine any impact in future years.