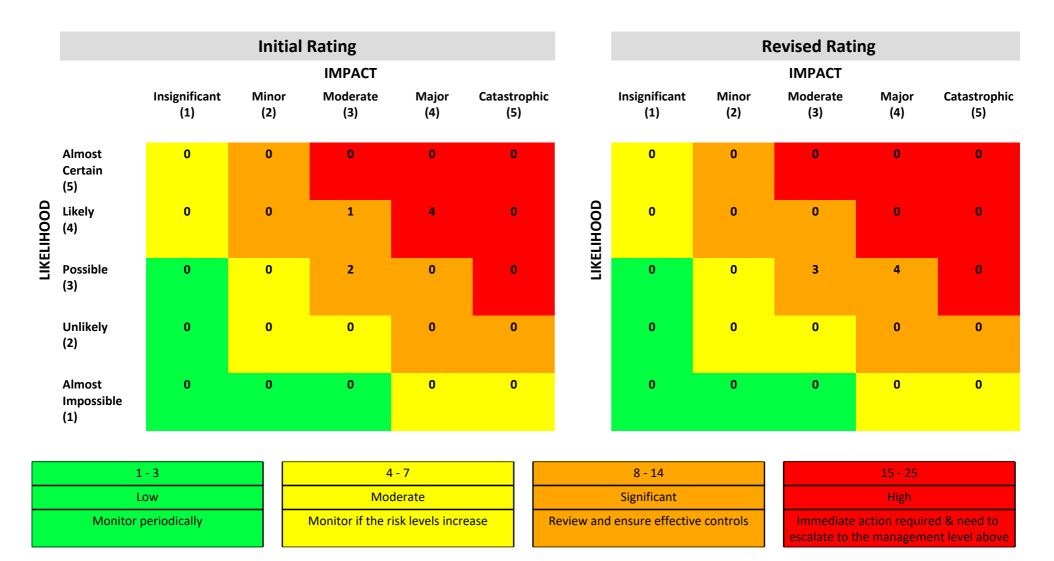


Brighton & Hove City Council

Appendix 1 Strategic Risk Focus Report for Audit & Standards Committee on 9 March 2021

SR13, SR33, SR15, SR38, SR24, SR29 and SR25

24-Feb-2021



Risk Details

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR13		Director Health	BHCC Strategic Risk, Legislative	27/01/21	Threat	Treat	L4 x l4	Amber L3 x I4		Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 6 'A Health and Caring city' and actions to 'support people to live independently'
Keeping vulnerable adults safe from harm and abuse is a responsibility of the council. Brighton & Hove City Council has a statutory duty to co-ordinate safeguarding work across the city and the Safeguarding Adults Board. This work links partnerships across the Police and Health and Social Care providers. Under the Care Act, since 2015, the Local Authority has a statutory duty to enquire, or cause others to enquire, if it believes a person with care and support needs is experiencing or is at risk of harm and abuse and cannot protect themselves. In 2019/20 675 safeguarding enquiries were completed by the adult assessment service.

The Care and Support Statutory Guidance makes requirements regarding 'Making Safeguarding Personal' setting expectations for safeguarding work to be 'person led and outcomes focussed.'

Potential Consequence(s)

- * Failure to keep vulnerable adults safe from harm or abuse will pose risk to vulnerable citizens
- * Failure to meet statutory duties could result in legal challenge
- * Failure to respond to a more personalised approach could result in challenge
- * Inadequate budget provision could result failure to meet statutory requirements

Existing Controls

First Line of Defence: Management Controls

- 1. Local Safeguarding Adults Board (LSAB) work plan established, with independent leadership, with aligned LSAB sub group work plans. Strategic AD and senior manager input in place to ensure this works effectively and responds without delay to any arising issues.
- 2. Multi agency safeguarding adult procedures in place, for preventing, identifying, reporting and investigating allegations of harm and abuse, in line with Care Act requirements and endorsed by all 3 Sussex Safeguarding Adults Boards. Procedures are being reviewed January 2021 through working group for which our safeguarding adults lead is contributing to several chapters and oversight to ensure this works for the people, practitioners and for the business and strategic safeguarding objectives. Continuous professional development plan in place for social work qualified staff, including a training programme and Practice Development Groups, for Care Act and Mental Capacity Act requirements overseen by the Professional Standards Team (PSW). Impact of assessment staff training and uptake monitored through Audit Moderation panel and Statutory Duties Training Group.
- 3. For Adult Social Care (ASC) staff who have contact with vulnerable people, Safeguarding Awareness Training is Mandatory, and uptake is monitored through the LSAB Self Assessment submission.
- 4. BHCC Quality Monitoring Team oversee process in place to monitor quality of adult social care providers, in partnership with Clinical Commissioning Group (CCG), and Care Quality Commission (CQC). Creative solutions are utilised in response to highlighted risks and there is effective working together which supports quality and safeguarding objectives.
- 5. Violence Against Women and Girls training programme available for LSAB member organisations, and ASC Assessment Service staff enabled to attend.
- 6. Dedicated Principal Social Work post for adult services, ensuring well trained, motivated social work service, meeting continuous professional development requirements in line with Social Work Professional Capabilities Framework, including expectations for professional supervision.
- 7. Senior Social Work/Operational Management authorisation of all Mental Capacity assessments undertaken in ASC Assessment Service.
- 8. Named Enquiry Supervisor for all Safeguarding Enquiries undertaken in ASC Assessment Service.
- 9. Deprivation of Liberty Safeguards (DoLS) Team to lead and co-ordinate all DoLS referrals in line with statutory requirements.
- 10.Approved Mental Health Practitioner (AMHP) Operations Manager overseeing the AMHP Team to meet all relevant statutory requirements. This includes review (with Sussex Partnership Foundation Trust SPFT) of demands on the service in light of changes to S136 legislation.
- 11. A range of materials and offers to signpost people to help inform good safeguarding is available e.g. on LSAB and Council website, safeguarding adult section.

Second Line of Defence: Corporate Oversight

- 1. Quality Assurance across key agencies, monitored by the Independently Chaired LSAB, with annual progress report on the LSAB work plan reported to Health and Wellbeing Board, and published for public availability.
- 2. Multi agency, and single agency safeguarding audits undertaken. The Safeguarding Adult Review sub group of the LSAB continues to meet monthly, and considers referrals for Safeguarding Adult Reviews, as well as looking at relevant coroner's rulings for the area.
- 3. Quarterly audit framework for adult social work service monitoring safeguarding enquiry practice are monitored by Audit Moderation Panel, and Corporate Performance Indicator (KPI) to monitor the outcome for the individual from the safeguarding intervention.
- 4. Care Governance Board overseeing Quality Monitoring and is attended by the CQC who share information which enables local risks to be considered and assessed.

- 5. Learning from Safeguarding Adult Reviews (SARs), monitored through SAR sub group of the LSAB.
- 6. Yearly Social Work Health Check undertaken jointly by Principal Social Workers in both Adult Social Care; and Families, Children & Learning.
- 7. LSAB Independent Chair meets quarterly with the 3 Statutory agencies for safeguarding, where Director of Adult Social Services (DASS) represents the Local Authority.
- 8. LSAB annual report to Health and Wellbeing Board, includes statutory progress report on LSAB work plan.
- 9. Pan Sussex Safeguarding adults procedures group, meets quarterly, to review and update Sussex Safeguarding Adults procedures regularly, ensuring they are legally compliant and responsive to local and national practice development and learning.
- 10. Departmental Management Team oversee developments and monitor risks to Department.
- 11. Joint monthly service improvement panel with partners, including the CCG, share inspection results, complaints and other issues for care provider quality.
- 12. HASC Directorate Plan includes safeguarding priorities.

Third Line of Defence: Independent Assurance

- 1. For the council's in-house registered care services CQC Inspections on an on-going regular basis. Information on council website re. inspection results: https://www.brighton-hove.gov.uk/content/social-care/getting-touch-and-how-were-doing/adult-social-care-inspection-reports-council
- 2. CQC's programme of inspections of all registered care providers are published weekly and available on CQC's website www.cqc.org.uk. These are monitored for local relevance by the council's Quality Monitoring team managed by the Head of Adult Safeguarding.
- 3. Safeguarding referrals through the Adult Social Care's 'Access Point', the point of public contact for issues relating to Adults, can be made by anyone including other professionals, GPs, Police, neighbours, friends. Access Point safeguarding referrals are assessed by Senior Social Workers.

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

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Continue to learn from Safeguarding Adult Reviews,	Practice Manager (Advanced Social	40	31/03/22	01/04/15	31/03/22
coroners inquests and case reviews	Work Practitioner)				

Comments: Jan 21 update - a decision has been made to pause some areas of the Safeguarding Adults Board such as full board meeting, the multi agency procedures meeting (task and finish continuing) and sub groups paused for example learning and development and quality assurance. Safeguarding Adults Review panel will continue and an increasing number of referrals continue around deaths in the city where multiple agencies had contact, so this is priority work. A number of these are also in inquest so important to continue this work. SAR J is continuing and a practitioner event has been completed which is a new style and more beneficial for practitioners involved and in quality of multi agency learning. The non engagement audit has now been completed and is in draft report stage from the SAB.

Nov 20 update - during Covid-19 pandemic some areas of the Safeguarding Adults Board were paused, such as the June Board meeting were cancelled to allow all partner organisations to focus on immediate priorities. The Board in September 2020 was held virtually with full attendance. During this period the Safeguarding Adult Review (SAR) sub group continued to meet monthly, and referrals for reviews were scrutinised, and current reviews continued to be worked on, ensuring the SAB was meeting its statutory duties. Good progress and development has been made against the workplan and a number of new referrals considered and reviews commissioned.

A Quality Assurance multi agency audit on non engagement has commenced in October with a high level of multi agency commitment and interest in considering this complex area. A multi agency improvement action plan is being drafted.

July 20 update - during Covid-19 pandemic some areas of the Safeguarding Adults Board were paused, such as the June Board meeting was cancelled to allow all partner organisations to focus on immediate priorities. The Board in September 2020 will be held virtually. During this period the Safeguarding Adult Review (SAR) sub group continued to meet monthly, and referrals for reviews were scrutinised, and current reviews were continued to be worked on, ensuring the SAB was meeting its statutory duties.

May 20 update - work continues to deliver our statutory duties and we work with partners, examples are given in the previous updates below.

January 20 update - A Safeguarding Adults Review was undertaken (called SAR X) written by an Independent Author commissioned by the Local Safeguarding Adults Board (LSAB) following the death of a person who was homeless, who was at times not engaging with support agencies, and with a Personality Disorder. The review was commissioned by the LSAB in April 2016.

The SAR Sub Group of the LSAB (Chaired by B&H Health) has finalised the SAR X Action plan.

The SAR X Action Plan is reviewed and monitored via the SAR Sub Group, which reports to the LSAB. The SAR Sub Group will monitor the completion of the Action Plan. Reviewed at the SAR Sub Group 18/03/2019 and noted to be completed.

SAR X summary is published on the LSAB website http://brightonandhovelscb.org.uk/safeguarding-adults-board/safeguarding-adults-reviews/. A briefing regarding SAR X has been completed, and has been circulated to all LSAB member organisations for staff awareness.

A multi agency audit has been completed by the LSAB regarding adherence to requirements of the Mental Capacity Act. An Action Plan has been drawn up from this audit, which has agreed at the Quality Assurance Sub Group of the LSAB on 21/01/2019. Progress on the Action Plan is be monitored through the Quality Assurance Sub Group and reported to the LSAB, and is noted as on target for completion.

An audit regarding adherence to Making Safeguarding personal principles has been undertaken in September 2019. The action plan was agreed at the next Quality Assurance Sub Group on 14/10/2019, and progress on it will be reported to the sub group on 28/01/2019.

All 3 Sussex Safeguarding Boards have committed to Social Care Institute of Excellence Learning Review methodology, and a number of SAB members have attended training on this in order to become reviewers.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Develop and deliver Advance level Safeguarding training for	Practice Manager (Advanced Social	100	31/03/20	01/06/18	31/03/20
senior and experienced social workers	Work Practitioner)				

Comments: Jan 21:

New programme of safeguarding training is being developed with virtual rollout planned January/February 2021.

Delivery of training started 26th March 2019. Course content has been developed in consultation with the assessment team. This course is for senior and experienced social workers, focusing on complex safeguarding cases. Monitoring of the take up and effectiveness of this course is through the Statutory Duties Training Group, chaired by the Principal Social Worker. The target for delivery is 80% of all staff who require it to have attended the training by 31/3/20. This was on track and delivered by end February 20.

Monitor progress of legislative change from DoLS to Liberty	Practice Manager (Advanced Social	75	01/04/23	01/04/19	01/04/23
Protection Safeguards	Work Practitioner)				

Comments: Jan 21:

Programme paused due to legislative delay, national and local development not realistically expected before October 2021.

Initial multi agency planning meetings were held as the implementation date for the legislation was October 20, and the DoLS lead gave an update presentation to the Safeguarding Adult board members 16th September 2019.

The target implementation date of the legislation is now 1 April 2022. Prior to then a revised Mental Capacity Act (MCA) Code of Practice will be published by Government which will bring clarity to some outstanding questions as to how LPS will work in practice. This Action is therefore delayed until this Code of Practice is published.

Next steps:

- 1. Await published MCA Code of Practice and then re-establish multi agency planning group.
- 2. DoLS Lead continues to keep updated on progress of potential Code of Practice, by linking in with South East Leads group (ongoing, DoLS Lead)

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Programme of Prevent training to be rolled out to all Assessment Service staff in contact with citizens, Senior Social Workers and Operations Managers, and Registered Managers of provider services. All relevant staff to have attended training.	Practice Manager (Advanced Social Work Practitioner)	20	31/03/21	20/01/17	31/03/21

Comments: Jan 21:

Development of this area which remains a key issue and risk is going with the safeguarding lead undertaking a number of exploratory planning measures with workforce development and the prevent lead. solutions and development plans are still being progressed despite the further acute covid period. the prevent training has been added as a mandatory induction activity across HASC now and an increase in relevant learning short briefing communications has started, there is still significant development to be made on the training issue and an update will be provided to the March Prevent board.

Nov 20 update: due to the Covid-19 pandemic training plans in HASC for Prevent have been paused, and no further progress on completing face to face training has been able to be made. Access to the Home Office e-learning package for all staff continues in the interim and the HASC mandatory induction programme has been updated to reflect the importance of ensuring this training is completed. The HASC Safeguarding Lead has addressed the low percentage and discussed solutions with workforce development team through the statutory duties group and sought further information. This has also been addressed with the PREVENT Lead with a targeted list of key front line staff provided and a request to provide bespoke sessions, which has been agreed (dates TBC) Contact has been made with the home office regarding sharing high level data to gauge completion of the elearning course. Regular communications are shared between the PREVENT Lead and the Safeguarding Lead and these are disseminated as requested through the assessment team workforce Due to staff turnover and the current available data on the elearning course the percentage progress on this target has reduced from 75% to 20% to more accurately reflect the current known assured staff completion rate of Prevent training. This area is in development with further improvement actions sought.

July 20 update: due to the Covid-19 pandemic training plans in HASC for Prevent have been paused, and no further progress on completing face to face training has been able to be made. Plans are now being made to restart this programme virtually. Access to the e-learning for all staff continues in the interim. Due to staff turnover the percentage progress on this target has reduced from 75% to 50% to more accurately reflect the current staff completion of the face to face Prevent training.

97 staff have been trained so far, which is 65% of the target workforce (150). The aim had been for full completion by April 2019. Unfortunately due to staff undertaking the training having moved roles, we have been delayed in completing this action. 3 staff have been identified to undertake the training, and they are awaiting the opportunity to undertake the training course which will then enable them to deliver this training to HASC staff so that

we can then complete the training target. In the interim all staff have been requested to complete the Home Office Prevent e-learning training, and a reminder of this has gone to HASC staff through the 'In the Loop' communication newsletter. As this is Home Office training it is not possible to get a local read out of uptake, and is therefore monitored through line management via the PDP and supervision process.

The Quality Monitoring Team has had a training session by the Prevent Lead, and are incorporating learning from this into their quality audit visits of commissioned adult social care providers.

First Line of Defence: Management Controls

- 1. The CCG operates across 7 Primary Care Networks (PCNs). From April 2017 three Social Care District teams support these PCNs so that social care operational work is aligned. Further reorganisation has been completed to streamline activity into 2 pathways to meet need.
- 2. Better Care Board established (high level and cross sector representation) and co-chaired by Executive Director Health & Adult Social Care and CCG Director of Commissioning, with oversight by Health & Wellbeing Board.
- 3. Health & Social Care Partnership Board (HSCPB) jointly chaired by CCG and BHCC meets monthly to identify and collaboratively plan for service delivery.
- 4. Health & Wellbeing Strategy adopted in March 2019.
- 5. Considerable collaborative operational working is being delivered within both the hospital social work teams and community adult social work teams. As part of the Covid-19 response we worked with partners to expedite set up of the Discharge Hub at Royal Sussex County Hospital in order to implement the community pathways (July 20) for discharge review of people leaving hospital care.
- 6. 2nd Tier of Mental Health Integrated Services with Sussex Partnership Foundation Trust (SPFT) involve BHCC staff seconded to SPFT within the framework for the revised S75 agreement.

Second Line of Defence: Corporate Oversight

- 1. Health & Wellbeing Board being reviewed with consultation taking place. Proposals planned to come to HWB in Jan 2021 to help deliver a collaborative approach, including oversight of the Better Care Plan.
- 2. Better Care Plans in place. Section 75 agreement currently being reviewed.
- 3. Partnership work agreed and submitting an annual Better Care Plan since the deadline in March 2014. Revised Better Care plan for 2017-19 submitted and approved.

Third Line of Defence - Independent Assurance

- 1. NHS England signed Better Care Plan, submitted Nov 2017 (approved with 2 conditions, addressed).
- 2. Quarterly Better Care submissions to NHS England ongoing. There has not been any challenge back from NHS England.
- 3. Internal Audit No specific Internal Audit work in 2017/18. In 2016/17 internal audit work reviewing the Better Care Fund gave Limited Assurance. of Controls Partners' budgets are often determined by Government.

Reason for Uncertain status of Effectiveness of Controls - This risk is affected by changes affecting a number of organisations which contribute to the health care system.

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
A new D2A (discharge to assess) pathway commenced 6/1/20 which determines 3 pathways for patients and Pathway 1 (D2A) is being reviewed commencing with a Task & Finish group to consider how further efficiencies and improved flow can be delivered.	Assistant Director - Operations and Transformation	80	31/03/22	01/04/16	31/03/22

Comments: A multi-agency Discharge (DC) HUB established since May 2020 works to ensure adherence to Government discharge guidance issued in August 20.

This enables an improved co-ordinated approach to implement effective discharge pathways as agreed in accordance with the revised Discharge to Assess (Home First) aka D2A pathways first implemented in January 2020. This includes a performance dash board supported by an adopted NHS programme. Performance is tracked in HASC Directorate Plan 1.4.5.2. Demand and capacity is co-ordinated by the Operational Command Group, consisting of senior representatives of leadership across both the health and social care system. Performance reviews are closely monitored in these exceptional times of demand and challenges.

In preparation for this D2A in December 2018 the city council's HASC directorate re-structured Social Work teams aligned to new pathways and ongoing reviews will continue to ensure pathway re-alignment/simplification with partners.

				-	
Further integration with Primary Care Clusters	Assistant Director - Operations and	55	30/06/21	01/04/16	30/06/21
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	Transformation				
	Transformation				

Comments: This worked has been slowed by COVID. However, work is underway to both develop an early help model and consider how all social work assessments teams are organised to enable delivery of the our Target Operating Model (TOM). This work is being progressed and monitored via the new HASC Modernisation programme.

						_
Plan Admission Avoidance with SCFT to extend delivery of	Assistant Director - Operations and	35	31/03/21	02/01/18	31/03/21	
social care responsibilities and enable more effective	Transformation					
services						

Comments: January 2021 update – please see previous comments and note this work has not progressed due to Covid-19 response but we will focus on delivery as soon as we are able to.

Sept 20 update: Pressure on system to support hospital discharge has remained the focus. The work aligned to admission avoidance has not as yet been progressed.

May 20 update - The focus of work has mostly been on discharge through the multi-agency discharge hub (involves BSUH, SPFT and BHCC) to utilise increased opportunities to divert clients as appropriate at the 'front door'. There has been a slight progression but focus of partners is diverted by Covid-19.

Previous update as at Oct 2019 update - Reviewing the Hospital rapid discharge team to prevent admission, through 4 social workers working on the acute floor with nurses and therapists. The aim is by December 2019 to triage at the first stage to prevent admission to hospital where possible.

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR33	Not providing adequate accommodation and support for people with significant and complex needs	Executive Director Health and Adult Social Care Head of Adult Social Care Commissioning Assistant Director Resources, Safeguarding and Performance		27/01/21	Threat	Treat	Red L4 x I4	Amber L3 x I4		Revised: Adequate

Causes

Link to Corporate Plan 2020-23. Outcome 6 'A Healthy and Caring City', action 6.2 'support people to live independently'.

Unclear needs assessment for clients in this group and likely demand

Cross planning across organisations and services is complex

Services are not able to cope with demand

Lack of affordable accommodation within the city and housing benefit changes

Potential Consequence(s)

People are placed in inappropriate accommodation which may present a danger or risk to them or others

People may not get the appropriate services and support to address their needs

Placing people in unsuitable accommodation for their needs

Failure to review ongoing needs of individuals and their family once initially housed

Clients are not supported appropriately

Public services deal with the effect, e.g. hospital admissions, anti-social behaviour, self-harm

Increased financial pressures are ongoing, especially considering the context of post Covid-19

Outcomes for services and clients are not achieved

Existing Controls

First Line of Defence - Management Controls

Housing Strategy.

Rough Sleeping and Homelessness Strategies are combined into a single plan as approved at Full Council in December 2019

Greater cross-directorate recognition of pressures and delivery issues between housing and adult social care led by Executive Directors (EDs) and senior officers.

Rough sleeping and single homeless persons services are commissioned and will be reviewed as an ongoing process.

Five year plans prepared for agreement at Strategic Accommodation Board (SAB) when business as usual continues post Covid-19.

The Health and Wellbeing Strategy is delivering the Joint Strategic Needs Assessment on people with multiple and complex needs as part of its Living; Ageing Well Workstreams.

Second Line of Defence - Corporate Oversight

- 1. Strategic Accommodation Board is a cross-council group, meeting bi-monthly, chaired by ED HASC and is formed of ED Housing, Neighbourhood and Communities (HCN), senior directorate representatives to supplement housing strategy and enable focus on vulnerable adults and children. Strategic action plan now being developed focussing upon available council sites and Clinical Commissioning Group (CCG) also attend as co-strategic partner.
- 2. Rough Sleeping Strategy Board, cross organisational meets quarterly, chaired by Head of Policy & Partnerships on behalf of City Management Board.
- 3. Safeguarding Adults Partnership Board (SAPB) learning from current cases escalated by officers or others e.g. the Local Government & Social Care Ombudsman (LGSCO).
- 4. Health & Wellbeing Board; Housing Committee.

Third Line of Defence - Independent Assurance

- 1. Independently chaired Local Safeguarding Adults Board meets quarterly and provides an annual report to the Health & Wellbeing Board.
- 2. Independently chaired Local Safeguarding Children Board meets quarterly and provides an annual report to the Health & Wellbeing Board.
- 3. Internal Audit This is risk was agreed March 2018. No specific Internal Audit work.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Develop and roll out communication with Tier 4 managers to be aware of role of the Local Safeguarding Adults Board (LSAB) to improve escalation cases and referrals for Safeguarding Adults Reviews	Assistant Director Resources, Safeguarding and Performance	50	31/03/21	12/07/18	31/03/21

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Comments: The Local Safeguarding Adults Board (LSAB) has such as the death of a person with care and support needs we SAR protocol has been launched in September 20, and the Beattending management meetings to discuss. A current SAR is January 21 to look at the learning from this case, and a wide	where abuse of neglect was a factor and th &H LSAB has been raising awareness of th s being completed; HASC and HNC manage	ere is scope fis protocol wers have beer	for multi age ith Tier 4 ma n part of a pr	ncy learning. nagers in HA actitioner ev	. A Sussex SC by ent in
Ensure our overall customer service is compliant with Homeless Code of Guidance and our Housing Allocations Policy, including close working with Adult Social Care and / or Children, Families & Schools so we have a holistic view of the overall household needs and any ASC / CFS accommodation or other duties that may apply	Assistant Director Housing	45	31/03/22	01/08/19	31/03/22
Comments: We are compliant with the homeless code of Gu service transformation in this respect, incorporating the prin on the service arising from Covid-19 pandemic. With regard and Children Family and Schools to help meet housing needs households needs. We have made temporary adjustments to Committee (September 2020 and November 2020) with a fur for 2021/22.	iciples of a psychologically improved environt to the Allocation Policy, and more pertine as across the council. We are also working on the Allocations Plan in light of the pande	onment. This ntly the Alloc ross director mic which ha	has been de ation Plan, t ate to obtair ive been rep	elayed owing his is aligned n a holistic vio orted to Hou	to pressures with ASC ew of a sing
Ensure our timely provision of appropriate Temporary Accommodation via Housing, within our commissioning of any specialist accommodation whereby we have a joint discussion on city housing needs and accommodation requirements for specialist housing groups via Strategic Accommodation Board	Assistant Director Housing	50	31/08/21	01/08/19	31/08/21

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
Comments: Re-procurement of Temporary Accommodation have included feedback from Adult Social Care (ASC) in deve via the Strategic Accommodation Board .		•	-	_	-
Needs Assessment using Public Health data and other intelligence to inform adult social care commissioning - demands analysed, resource availability and reported to Strategic Board and communicated to provider market and partners to develop capacity	Head of Adult Social Care Commissioning	30	31/03/22	01/02/18	31/03/22
Comments: We continue to deliver in accordance with the a right services to meet needs. The Community Strategy has informed the development of the Some analysis has been provided to Strategic Accommodation and reported to Health & Wellbeing Board on 6, An older peoples accommodation needs assessment was complanning/development opportunities that might arise or be	the Market position statement as reportion Board, e.g. implementation agreed /3/18. mmissioned through Housing Link in Au	rted to HWB. learning Disabili	ty accommo	dation reviev	N
Service Review of inhouse hostel provision now links to the Supported Accommodation review to develop	Assistant Director Resources, Safeguarding and Performance	30	30/09/20	01/04/19	30/09/20

Comments: Oct 20 update: Completion of Service Review of in house hostels has been delayed due to the Covid-19 response.

May 20 update: Work is in progress and will be monitored in the context of post Covid-19

Oct 19 - Homeless Link commissioned to carry out review with report to be made to lead Members at end Nov 19.

June 19 - The scoping of this review is underway, working with the CCG and relevant partners. Progress reports will be reported to SteerCo- Sustainable Social Care; and the Accident & Emergency Delivery Board.

Organisation has now been commissioned (Homeless Link) and kick start of meeting planning for end of July 2019.

Risk Details

Risk Code	Risk	Responsible Officer		Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR15	l	Executive Director Families, Children & Learning Service Manager - Directorate Policy & Business Support	BHCC Strategic Risk, Legislative	27/01/21	Threat	Treat	Red L4 x I4	Amber L3 x I4		Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 4: 'A growing and learning city' and actions linked to 'Ensure that no child or family are left behind' Keeping vulnerable children safe from harm and abuse is a legal responsibility of the Council. Legislation requires all local authorities to act in accordance with national guidance (Working Together) to ensure robust safeguarding practice. This includes the responsibility to ensure an effective partnership, from Sept. 19 it is the Brighton & Hove Safeguarding Children Partnership (BHSCP), which oversees work locally and in partnership with Police, Health and social care providers. Despite a reduction since 2015 the numbers of children in care and those on Child Protection Plans remain higher than in similar authorities. Relecting the national picture the number of children and young people (CYP) who are vulnerable to exploitation is also of concern.

Potential Consequence(s)

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

Existing Controls

First Line of Defence: Management Controls

- 1. Robust quality assurance processes embedded and reported quarterly to Directorate Performance Board and onto the Corporate Safeguarding Board twice a year
- 2. Single access point ('Front Door for Families') for support and safeguarding issues relating to children operated from May 2017. The service is a multiagency and has responsibility for and oversight of both the Multi-Agency Safeguarding Hub (MASH) and early help referrals to provide robust risk

assessments and information sharing between partner agencies

- 3. Brighton & Hove Safe Guarding Children's Partnership (BHSCP) Work Plan established with strong leadership by the Independent Chair with aligned BHSCP sub-group work plans
- 4. Serious Case, Local Management and Child Death Reviews identify learning and action for improvement
- 5. The directorate has full engagement with the BHSCP
- 6. There is a strong focus on working with CYP at risk of being missing from care, home and education
- 7. The local Troubled Families programme targets support to the most vulnerable families
- 8. Continuous professional development (CPD) and training opportunities offered by the BHSCP and good multi agency take up of training; and in house Continuing Professional Development offer
- 9. In line with the Government's Prevent Strategy, work with the Police, Statutory Partners, Third Sector Organisations and Communities to reduce radicalisation
- 10. Threshold document, agreed by all agencies, is currently being reviewed and a new version will be published by summer 2021.
- 11. Relationship based model of practice operates for social work teams, with Pods (social work teams) in place to provide stability to service users
- 12. Performance management across children's social work enables a more informed view on current activity and planning for future service changes
- 13. Adolescent Vulnerability Risk Meetings held fortnightly to consider individual cases where it is considered there is a higher risk of exploitation
- 15. Robust performance framework in place with quarterly Performance Boards, chaired by the Acting Executive Director to ensure robust service delivery.

Second Line of Defence: Corporate Oversight

- 1. Early Help system redesigned in 2017 and new structure in place
- 2. Safeguarding Quality Assurance within the city and also across key agencies, monitored by the BHSCP Monitoring & Evaluation Subcommittee, meets quarterly
- 3. Corporate Parenting Board meets quarterly with opportunity for cross-party members, including Heads of Service, Assistant Directors and the Acting ED FCL, to receive information on children in care and children leaving care
- 4. Reports delivered to BHSCP. following robust auditing of multi-agency case files and safeguarding practice
- 5. Cross directorate Annual Practice Week developed where senior leaders meet with front line staff to discuss individual cases, picking up best practice examples of positive impact plus discussing any barriers faced by both workers and families
- 6. Council appointed VVE co-ordinator who reports regularly to the Community Partnership

Third Line of Defence: Independent Assurance

- 1. Ofsted inspected our social work arrangements in July 2018, the overall judgement was 'Good' and an action plan has developed to take forward recommendations, most recently reported to CYP Committee in November 2019
- 2. The audit of Front Door for Families in August 2018 gave us Reasonable Assurance
- 3. Yearly discussion between the Ofsted Regional Director (RD) and each local authority (LA) Director of Children's Services (DCS) in the region through an 'annual conversation'. This was last held in February 2020 it covered social care, special educational needs and education, including Early Years and Further Education & Skills. The next meeting is scheduled for February 2021.

- 4. In January 2020 the Local Government Association (LGA) reviewed Early Help processes and the recommendations will be taken forward as part of a wider city wide Early Help review during 2021.
- 5. In February 2020 Ofsted understood a focussed visit looking at services to children in need and children with child protection plans. Ofsted were pleased with the progress made since their visit in 2018 and the improvement plans have been adjusted according to their most recent feedback.

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

Responsible Officer	Progress %	Due Date	Start Date	End Date
Integrated Team for Families Manager	60	31/03/22	01/04/19	31/03/22
	·	%	% Date	% Date Date

Comments: The existing family coaches are continuing to focus on working with vulnerable families just below the social work level. Cases are referred from the Front Door for Families to the ITF and Parenting Manager who triages all cases. Most cases are not eligible for the Troubled Families Programme as they have been worked with in the past. There are also two Family Coaches who support Young Carers. From April 2019 a new team of Primary Family Coaches was established using the Earned Autonomy funding to pilot preventative work with families at a lower level of need. The LGA review in 2020 found this work to be effective.

High quality social work is provided to ensure that Children	Assistant Director - Children's	60	31/03/22	01/04/16	31/03/22
& Young People (CYP) are effectively safeguarded	Safeguarding and Care				

Comments: In February 2020 Ofsted understood a focussed visit looking at services to children in need and children with child protection plans. Ofsted were pleased with the progress made since their visit in July 2018 and the improvement plans have been adjusted according to their most recent feedback.

This builds on the Ofsted Inspection of Local Authority Children's Services (ILACS) which provided an overall judgement of Good social work provision being provided for children and families. The social work workforce remains stable with a low vacancy rate, and we have not had any agency social workers in post since September 2017. This has provided continuity and consistency for children and their families and further supported relationship based social work.

Scope and implement a city wide early help review	Head of Early Years, Youth and Family Support	10	31/12/21	01/01/21	31/12/21

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date				
Comments: An Early Help System Review was completed and reported to the Early Help Partnership Board in December 2020.									
The Brighton & Hove Safeguarding Children Partnership (BHSCP) will continue to monitor safeguarding delivery across all agencies in the city to ensure effective safeguarding is in place.	Executive Director, Families, Children & Learning	60	31/03/22	01/04/19	31/03/22				

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date

Comments: The Brighton & Hove Safeguarding Children Partnership (formerly the LSCB) launched its new safeguarding arrangements on 29/9/19. A Steering Group comprising of the below meets quarterly.

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

This group will be responsible for the following:

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

The Steering Group are current developing the overarching strategic aims of the BHSCP. An annual programme of multi-agency thematic auditing to test the effectiveness of local safeguarding arrangements is already in place and will remain in place. Learning audit activity fed will continue to feed into the BHSCP learning and development offer and cascaded across the safeguarding partnership. A multi-agency audit programme is bedeveloped, agreed with partners and findings shared. This is supported by the (Quality Assurance Programme Manager, BHSCP).

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR38	Difficulty in restoring trust and confidence in the home to school transport service and sourcing sufficient capacity to resolve issues raised by the independent review.	Director Families, Children &	BHCC Strategic Risk	27/01/21	Threat	Treat	Amber L3 x I4	Amber L3 x l3		Revised: Adequate

Causes

Link to Corporate Plan 2020-23. Outcome 4 A growing and learning city, action 4.3 Ensure that no child or family is left behind Changes to transport contract arrangements for Home to School Transport (HTST) in the summer of 2019 led to a range of operational difficulties at the start of the autumn term 2019. Although many of those issues were resolved within a few weeks, , there are some significant residual problems with contractual compliance, with associated risks to the safety and wellbeing of children and the reputation of the council. The response to the recommendations from the independent review into HTST requires additional capacity, not only from the HTST team, but from a range of corporate central services (commissioning, procurement, finance, legal, Health and Safety, Learning Development, Customer Service etc.).

Potential Consequence(s)

- 1. compromised pupil safety
- 2. parental trust and confidence not repaired
- 3. reputational damage to council
- 4. recommendations from independent review not actioned
- 5. strain on capacity and increased levels of stress for staff
- 6. emergency arrangements increase budget overspend

Existing Controls

First Line of Defence: Management Action

- 1. Co-production working agreement for all new plans and policy with Parent and Carer Council (PACC)/Amaze (a group supporting families with SEND and other complex needs).
- 2. Co-produced action plan to respond to the recommendations in the LGA independent review
- 3. New online training programme developed and delivered for all transport drivers and vehicle passenger assistants
- 4. Regular communications to parents and carers
- 5. Survey of schools' experience of transport at the end of the summer term 2020
- 6. Survey of families' experience of transport at the start of the Autumn term 2020
- 7. Recruitment of enhanced team with interim temporary increase in capacity meantime
- 8. Termly contract reviews against KPIs with transport providers
- 9. Monitoring of transport arrangements at key school sites
- 10. Additional temporary leadership capacity to tackle strategic issues going forward
- 11. Robust response to the pandemic, ensuring appropriate changes to service delivery, the dissemination of advice and guidance on safety to families, transport providers and schools, and the arrangement of social distancing on all transport vehicles.

Second Line of Defence: Corporate Oversight

- 1. Member Policy Panel reported their findings and recommendations to CYPS committee in November 2020, following a series of public meetings.
- 2. Additional resources agreed at Policy & Resources Committee, June 2020 to enhance service delivery.

Third Line of Defence: Independent Assurance

- 1. January 2020 external HTST review with recommendations co-ordinated by the Local Government Association.
- 2. A report on procurement arrangements to be presented to the Audit & Standards Committee in March 2021.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Review service structure of Home to School Transport team and identify need for additional capacity to ensure effective delivery going forward.	Assistant Director Education & Skills	80	31/03/21	26/03/20	31/03/21

Comments: Policy & Resources Committee in June 2020 agreed to an increase in base budget and an increase in staffing for the HTST team. Progress to date includes the recruitment of a permanent team manager, alongside an administrative assistant. Other posts are being recruited currently and some re-gradings considered.

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Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Work with PACC and aMAZE to restore parental confidence	Assistant Director Education & Skills	60	31/12/21	17/01/20	31/12/21
via a co-produced 'lessons learned' and strategic action plan					

Comments: The Co-produced Action Plan between the HTST team and PaCC was reviewed by the Members' Policy Panel in July 2020 and all actions were on track. Agreed to include a survey of parents and carers in the autumn as well as the spring terms and this is underway, with positive feedback to date.

An action plan is being implemented and progress is being overseen by PACC and aMAZE.

Risk Code		Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR24	needs and	Finance Officer Revenues & Benefits Manager	BHCC Strategic Risk	27/01/21	Threat	Treat	Amber L4 x I3	Amber L3 x I3		Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Outcome 2: A City Working for All and action 2.1 Build community wealth Covid-19 has meant significant economic, business, social and welfare impacts on how Brighton & Hove City Council (BHCC) and its partners provide support and rollout Universal Credit (UC). There are increasing implications for staffing levels within services; rent collection; council tax collection, and pressures on social services and homeless services.

This links to the planned gradual process for all Housing Benefit claimants to move across to Universal Credit (UC) between 2019 and 2024 which was informed by an 18 month work programme with the Local Government Association (LGA).

Potential Consequence(s)

Covid-19 has meant BHCC and partners approaches have changed immediately, the medium and long term delivery arrangements are to be determined as the impacts evolve.

The lead agency for UC is the Department for Work and Pensions (DWP) who have adapted and streamlined their processes and brought in extra resource to process claims.

Increased service pressures on housing and social services.

Greatly increased volume of Universal Credit claims – at the start of the lockdown, there were as many claims, nationally, in one weekend (around 500,000) as are usually received in one month.

Increase of food poverty, money flow, property rent arrears, and growing Council Tax arrears

People out of work may now have their benefit capped (for those in work there is no cap)

Significant extra pressure on discretionary budgets.

Decreased rent and Council Tax collection.

Existing Controls

First Line of Defence: Management Actions

Covid-19 update - existing controls are denoted by alphabetic bullets

First Line of Defence: Management Controls

Covid-19 mitigations include:

- a) BHCC Local Discretionary Social Fund provides assistance with emergency food vouchers, fuel etc.
- b) Community Hub set up at BHCC to deal with requests for help from the public. Referral routes now established to welfare rights, money advice, food banks
- c) Links established with Community & Voluntary Sector (CVS) at a strategic level to ensure an appropriate city wide response
- d) BHCC implementing government measures, e.g. increasing amount of Universal Credit and Tax Credits, and allowing up to an extra £150 (as at April 2020) for Council Tax Reduction recipients
- e) BHCC playing its part in delivery of Government support for businesses, including the Business Grants systems
- f) BHCC Benefit Cap (Welfare Reform) team will deal with new cases coming in, as per current procedures

BHCC regular non-Covid existing controls are denoted by numeric bullets:

- 1. BHCC Welfare Rights, Welfare Reform and Discretionary Help and Advice teams monitor welfare changes and coordinate a corporate response to them.
- 2. A new work programme for ongoing delivery has been established with a small number of other Local Authorities and the LGA to improve our approach to financial support across the authority.
- 3. Ongoing meetings are held with Department for Works Pensions (DWP) about change to Universal Credit (UC) and how we respond to vulnerability.
- 4. Council Tax Reduction (CTR) rules can be set and changed by the BHCC and have been reviewed for the 2020/21 year. It was decided that no changes to the scheme 2020/21 but the budget for additional discretionary help with Council Tax Reduction was increased by 33% from £0.150m to £0.200m. The budget for 2020/21 is projected to be fully spent before the end of the year. The scheme has been reviewed for 2021/22 and will increase the discount from 80% to 82% and remove minimum awards as well as maintaining the discretionary fund at £0.200m (approved by Full Council January 2021).

- 5. BHCC has other discretionary funds, which as at January 2021 (Discretionary Housing Payments and Local Discretionary Social Fund) have exceeded their allocated budgets and will be reported for Member decisions via TBM.
- 6. Provide caseworking support directly to customers most significantly affected by the changes, eg benefit capped, or contesting a DWP benefit decision, or being given benefit advice and support.
- 7. Regular links maintained with advice and voluntary sector so impacts on citizens can be judged eg through the Advisory Services Network.

Second Line of Defence Corporate Oversight:

- 1. New Welfare Board, to develop a joined up response across all relevant services. It will be chaired by the Executive Director of Housing, Neighbourhoods and Communities from April 2021.
- 2. Executive Leadership Team (ELT) Full Council, Policy & Resources Committee remain fully focused on this risk.

Third Line of Defence Independent Assurance:

Internal Audit - Audit took place over the end of 2017/beginning of 2018. Final report issued Feb 2018 Substantial Assurance. 2018/19. Welfare Reform (Substantial Assurance). Further reviews are planned in 2021/22.

Reason for Uncertainty of Effectiveness of Controls: The significant economic, business, social and welfare impacts of Covid-19 and the existing known difficulties for BHCC and it partners to deliver welfare reform, e.g. inability to project accurately the number of families who may require extra assistance from the agencies either in terms of housing need or increased demand for other services. Previous experience suggests that some may find a way to close income gaps, but the position is not fully understood. A government decision on the continuation of the £20 pw Universal Credit award may be key to minimising the impact of the pandemic.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Benefit cap - casework support programme to support people affected by the benefit cap	Revenues & Benefits Manager	50	31/03/22	01/06/15	31/03/22

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date

Comments: 1. Team helps people who have been Benefit capped to find work/access training and support / claim relevant benefits and assistance in order to come off the Benefit Cap.

- 2. Work is ongoing, because new people are capped regularly. However, before Universal Credit, there was advance warning of who would be capped because it would require their Housing Benefit to be reduced. Now, the Benefit Cap is applied directly by the DWP to Universal Credit, and the council only becomes aware if an individual presents to us (e.g. Hardship cases).
- 3. A JobcentrePlus work coach is embedded within the BenCap team joint working to resolve cases.
- 4. The Discretionary Payment Scheme (DHP) supports people to pay their rent in the short term, while the council supports them to come off the benefit cap or find employment, etc.
- 5. The team is building links with local Jobcentres so that Universal Credit cases can be referred over to the council for support, if they are benefit capped.
- 6. Discretionary Housing Payment expenditure for 2019-20 Benefit Cap cases is projected to be £300k.
- 7. Funding for the team has historically been confirmed only on a year-to-year basis, although part of the function is now mainstreamed into the Revenues and Benefits structure. The team is funded for 2020-21.
- 8. Work will continue throughout 2020-21, so the risk end date has been extended to 31/03/21. The risk percentage remains the same because there is less control in the Local Authority (LA) over caseload than previously. The DWP does not provide lists of people on UC who have been benefit capped, so it is harder to identify them.
- 9. A revised Welfare Approach has been approved in principle by ELT and Policy & Resources Committee (Nov 2019). This aims for a more holistic approach to Welfare Support including Welfare Rights by restructuring the service within the Revenues & Benefits service and creating stronger links with other support teams in Housing, Communities, and across social care. A Welfare Board will be introduced, led by the Executive Director HNC, to oversee implementation of the new Welfare Approach, taking into account the impact of COVID-19. Implementation of the board has been delayed by Covid and pending recruitment to the Chief Officer structure but should be up and running by April 2021.

Consider the implications for any new Council Tax Reduction Deputy Chief Finance Officer 50 31/03/21 23/04/20 31/03/21 schemes for future years and a new model and to further simplify the approach.

Prepare for Universal Credit (UC)

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
Comments: To be considered in line with HM Governme (CTR) is now delayed due to the impact of Covid-19. A report with options is being prepared for cross-party 2021/22 due to the pandemic which has impacted on p The report will be considered by Leaders Group and pro-	member consideration but will only be able otential development and consultation cap	e to offer limited pacity.	changes to		
Keep relevant staff and stakeholders up to date with information as it becomes available	Revenues & Benefits Manager	75	31/03/22	01/06/15	31/03/22
Comments: There are established working relationships vulnerable people in maximising their finances, and ma Adult Social Care, FIS. There are also strong links with the Welfare Rights staff reach out via the Advisory Services advisors. The risk end date has been extended, because the gove throughout 2020-21 and beyond.	intaining their tenancies, for example Hous ne local Jobcentre Plus via a DWP partnersh Network into the voluntary advice sector a	sing Income mana nip manager, Jobo and provide traini	agement, Ho centre mana ng for cound	ousing option gers and wo cil teams and	s, Trailblazork coaches. l external

Revenues & Benefits Manager

70

31/03/22 04/05/15 31/03/22

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date

Comments: The pandemic clearly changed the situation with Universal Credit. Applications surged and the DWP broadly kept up with demand, ensuring that claims were assessed. Pre-Covid the DWP was piloting Managed Migration of the legacy benefit cases onto Universal Credit (cases where for example, housing benefit was still in payment). This did present risk to us, as it was unknown how that process would impact on the claimants in Harrogate (the pilot area), or the broader timetable for national implementation. Since the pandemic, it is even less clear what is happening, or indeed what stage the DWP's pilot is at. We have no indication of when bulk migration of remaining cases may happen.

- Ultimately, some cases are to remain on Housing Benefit, such as pension age, temporary accommodation and supported accommodation. A further migration may happen at a later date after 2023 but there is no information available at present.
- The UC project in Brighton and Hove maintains a monitoring brief, and links up services strategically inside the council, in the Community and Voluntary Sector and with other interested parties in the city (for example landlords in the private sector and Registered Social Housing).
- There is advanced DWP joint working embedded in the Welfare Support service, and as an ongoing outcome of the Covid Response and in years prior, the Housing Trailblazer project. Also, at a strategic level the services co-ordinates with a DWP partnership manager, alongside the CVS, to monitor the council's response to UC, and to identify issues of local or national significance.

Provide policy options and author reports to give members Revenues & Benefits Manager 60 31/03/22 01/04/15 31/03/22 options on policy issues e.g. Council Tax Reduction (CTR).

Comments: The council is in the process of setting up a cross-service Welfare Board, which will require as part of its inception a plan for governance and reporting. The pandemic has further delayed setting up the board, along with uncertainty about membership and chairing of the board. It is expected that we will finally be in a position to start it in the early part of 2021. The council is also part of a new project with the Local Government Association (LGA) working alongside five other Local Authorities to develop our response to providing financial support.

We are continuing to explore some different models of Council Tax Reduction (CTR) support more thoroughly, including banding schemes with set percentage amounts of discounts. However, this was put on hold as it would be too high risk to introduce such an overhaul, with winners and losers, in the current climate. However, we have been able to make the CTR scheme more financially supportive from 1 April 2021. It is intended that this direction of travel is followed, budget allowing, into the following year, when members will review options to increase financial support yet further through the scheme.

The response and 'offer' in relation to welfare support will also be reviewed and mapped as part of the work of the new board, and new models of providing financial support will be explored, with assistance from the LGA.

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment			Eff. of Control
SR29	Ineffective contract performance management leads to suboptimal service outcomes, financial irregularity and losses, and reputational damage.	Finance Officer Procurement	BHCC Strategic Risk, Contractual / Competitive	27/01/21	Threat	Treat	Amber L3 x I4	Amber L3 x I3	Revised: Adequate

<u>Causes</u>

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

The City Council has recognised weaknesses and sometimes serious failures in contract performance management; there are over 200 contract managers throughout the council, of which less than 20% could be considered as 'professional'. Many of those identified manage contracts only as an 'add on' to their regular job, often they are not budget holders. To address this additional funding has been provided to maintain the core Corporate Procurement Team expertise, deliver a risk based and spend analysis approach which focuses on key contract areas (HASC and FCL). Savings achieved by Contract Performance team are as follows;-

2017-18 £600K

2018-19 £0.95M

2019-20 £1.2M (Identified not all secured)

This represents a 5 to 1 return on the £1.1M investment (pro-rata) 2017-2020. In order to deliver sustainable culture change and improve efficiency we must continue to address:

- Historical sub-optimal contract specification.
- Initial failure to identify options for delivery, including reverting to 'what we've always done.'
- Lack of willingness to test existing suppliers against the market.
- Significant reduction in resources in 'back office' functions and services reducing capability to effectively manage.
- Lack of commercial skills and contract management skills / expertise throughout the authority combined with treating Contract Management as an 'add-on' to normal duties.
- Failure by management to recognise the importance of an effective contract Management team.
- Lack of willingness to hold 'difficult conversations' with suppliers.
- Low levels of senior engagement with suppliers.
- Poor understanding of markets and delivery models.
- Lack of corporate oversight of contracting and commissioning.
- Ongoing resource pressures in Procurement means this risk still exists. As demand increases, the reducing ability of the Procurement and Contract teams.

Performance to plan rather than react may mean that contracts 'fall through the net'.

Full Council approval for £1.2m investment in Contract Management resources approved on 23 Feb 2017 at Budget Council. This provided 9.5 fte resources including legal support to ensure the set up of a Contract Management 'Centre of Expertise'. A further business case is required to ensure ongoing support.

Potential Consequence(s)

- 1. Investigations in to current contracts (68 completed, 56 in progress) have identified up to 80% are potentially delivering poor Value for Money (VfM), inefficiencies, inconsistent levels of management and failure to . Major concerns remain in the following areas:
- a) Health & Adult Social Care: continues to the main focus of the Contract Performance Team.
- b) City Clean / City Services (incorporating Highways, Transport, Environment etc): a large number of contracts have been identified as lacking in effective Contract Management.
- c) Housing Maintenance: Investigations are necessary to identify contracts that remain external and separate from the in-sourced element of reactive maintenance, such as, Lift Maintenance, Gas maintenance and other services.
- 2. Legal challenge from suppliers / service users.
- 3. Reputational damage for the council both the administration and officers.
- 4. Poor outcomes or failure of services and associated impact on service users.
- 5. Diversion of scarce resources to resolve issues, currently resolution is only being performed by a small number of Contract Managers and through intervention of the Contract Performance Team.

Existing Controls

First Line of Defence: Management Controls

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

Second Line of Defence: Corporate Oversight

- 1. Well-resourced corporate contract performance management oversight function to train and challenge contract managers and commissioners.
- 2. Progress reviewed by Corporate Modernisation Delivery Board (CMDB), Members Oversight Group and Members Procurement Advisory Board (PAB)
- 3. Audit & Standards Committee Strategic Risk Focus Item reviewed this risk in March 2018, March 2019 and March 2020

Third Line of Defence - Independent Assurance

1. Internal audits of contract management as reported to Audit and Standards Committee

Responsible Officer	Progress	Due	Start	End
	%	Date	Date	Date
rocurement Strategy Manager	40	30/09/21	14/03/19	30/09/21
	•	· %	% Date	% Date Date

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
Comments: Procurement has a database of contract manage holders. Reports from the finance system are available re but place or any changes in staff. The Procurement Team's 'Forw plan which is regularly considered by Procurement Advisory I	dget holders and CP Team ask them for vorard Plan' is kept regularly updated and en	erification tha	nt the contra	ct managers	are still in
Full Council approval for £1.2m investment in Contract	Procurement Strategy Manager	40	31/03/22		

Comments: Since Full Council approval for £1.2m investment in Contract Management resources approved on 23 Feb 2017 actions to date have delivered savings and efficiencies but in 2020/21 will review how to take function forwards in light of limited funding from April 2020 - Head of Procurement will work with individual Exec Directors. The team will provide specific interventions where extra support is required (e.g. CityClean, care homes, Housing Maintenance). Additionally the team will provide training for contract managers who need support. To date training has been provided to Housing, IT&D, Leisure Services and Health and Adult Social Care.

Over the last 18 months the Contract Performance Team have concentrated their resources on H&ASC. During this period in excess of £600k of savings have been identified and proposals provided to senior management for action. Issues identified include; - Under-performance to specification - Poor or out-dated care plans providing poor vfm - Over-charging against agreed rates - limited negotiating skills, specifically around placement and new care packages.

The investigations have proved to be extremely time consuming and as such the small team have only covered a relatively small proportion of current contracts. It is anticipated that due the exceptionally high volume and high cost contracts H&ASC will remain as the highest priority. The current pipeline of projects extends to July 2021.

The current pandemic has had a significant impact on on-going projects. The projected Homecare savings are on hold due to changes in the way suppliers are being paid, under existing government guidance.

A recruitment exercise for additional Contract and Supply Specialists failed to identify suitable candidates. This combined with the short term nature of funding for these posts has led to a suspension of further activity.

The Existing Contract and Supply team (two members) have been seconded to the PPE sourcing and supply project. This has led to a suspension of a number of current projects. It is anticipated they will be released during March / April 2021. In addition the team are also focussed on Supplier relief negotiations. This currently means there is no capacity to focus on Contract Performance issues

It is anticipated that the following contracts will be reviewed:-

Fleet. Concerns relating to fuel and inappropriate purchases were highlight in 2017/18. Despite Procurement presence the issues remained on-going. Start March 2021, End September 2021

Highway Maintenance. An on-going partnering contract which has attracted concerns over Vfm.

Start April 2021, End September 2021

Review of kpi's and contract monitoring of 3rd Sector Contracts.

Start June 2021, End November 2022

Review of Mechanical and Electrical Contracts in Housing (Lift maintenance, Legionella, Gas Maintenance included).

Start July 2021, End October 2021?

Delivery of presentations, to ELT have taken place in October/ November and December 2019. These presentations highlighted spend analysis and a general overview of areas of concern. Agreed actions are; - Develop analysis for distribution to Directorate DMT's / SLT's - Assist in developing directorate strategies to effectively manage high risk contracts. - Develop a business case for ELT with proposals for contract management within each directorate along with a proposal for Corporate oversight (ongoing)

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Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
Initiate mandatory contract management training linked to	Procurement Strategy Manager	10	31/12/21	14/03/19	31/12/21
contract management e-learning					

Comments: The e-learning modules will be introduced in June 2021. These will be targeted at all contract managers. Reports will be prepared for ELT. The reports will propose a) mandatory contract management training, including groups sessions by service area b) contract officers will be required to have to completed the e-learning before attending which will be monitored c) the Procurement Team will report attendance to ELT.

Publicise importance of contracts being well managed and Deputy Chief Finance Officer 50 31/03/22 14/03/19 31/03/22 the development of contract management where performance has not met expectations

Comments: From October 2019 the CP Team will present management information to ELT with the aim of cascading to service areas. This will identify areas for improvement and successful practice. These updates to ELT and DMT's will remain on-going.

Risk Code	Risk	Responsible Officer	Risk Category	Last Reviewed	Issue Type	Risk Treatment	Initial Rating	Revised Rating	Future Rating	Eff. of Control
SR25	Insufficient organisational capacity or resources to deliver all services as before and respond to changing needs and changing circumstances	Human	BHCC Strategic Risk, Professional / Managerial	27/01/21	Threat	Treat	Red L4 x I4	Amber L3 x I4		Revised: Uncertain

Causes

Link to Corporate Plan 2020-23. Attributes 7 'How will the plan be delivered' actions to achieve 'A well run council", action 7.2.

The capacity required to deliver services is impacted by a number of internal and external factors which include:

- Budget pressures caused by reductions in Local Government funding and the Covid-19 pandemic;
- Increasing demand for services across health and adult social care;
- The non-defined timescale of managing the pandemic response and recovery alongside business as usual;;
- The impacts and uncertainty of Brexit, including potential impacts on resourcing;
- A complex political environment of no overall control;
- An engaged and at times challenging environment of industrial relations.

These affect our ability to manage the resilience of our organisation which is exacerbated by the reduction in staffing over the last decade, including a reduction in leadership capacity in the top four tiers of the organisation.

Potential Consequence(s)

- 1. Failure to deliver required changes in the organisation
- 2. Lack of engagement from trade unions and/or complex employee relations issues
- 3. Capacity to undertake change work to design high quality services, and to redesign services in line with reduced resource is lost
- 4. Difficulty of retaining the right staff with the right skills to key posts
- 5. Council delivery alters and working methods change permanently due to Covid-19 and new technology
- 6. Negative impact on fulfilment of actions to improve equalities and other statutory duties
- 7. Partnership working becomes more fragile as a result of changed arrangements after Covid-19
- 8. Personal resilience tested by increased workloads, different ways of working and less certainty leading to potential stress and sickness
- 9. Less ability to be agile and flex to the organisation's needs, drive high quality services and increased performance
- 10. Less resilience as an organisation.

Existing Controls

First Line of Defence: Management Controls

- 1. Decision making through the budget process includes consideration of resources to deliver on priorities
- 2. Support from Performance, Improvement and Performance (PIP) and other support services to support the modernisation programme
- 3. Management capacity and capability being enhanced by Leadership Performance Management processes and Development Programme, and support delivered via the Leadership Network.
- 4. Information received from the Staff Survey is analysed, and plans in place to mitigate these.
- 5. Human Resources & Organisational Development (HROD) activity has been pulled together into single 'Our People Promise' to ensure there is an attractive and competitive employment offer to attract and retain the right staff with the right skills.
- 6. Business Planning process including Directorate Plans to identify key priorities, and plans kept under review to manage capacity.
- 7. Some statutory Performance Indicators (PIs) are Key PIs and are reported regularly to ELT, quarterly or annually.
- 8. HR Business Partners support Directorate Management Teams (DMTS) to monitor people related data including staff absence compliance with people related processes such as 121s, return to work interviews, and wider data insight to indicate where there are issues of capacity.
- 9. A robust wellbeing offer is in place, designed to address all wellbeing needs, and also specific needs related to Covid19.

Second Line of Defence: Corporate Oversight

- 1. Executive Leadership Team (ELT) lead delivery of governance arrangements
- 2. Corporate Delivery Modernisation Board (CMDB) and Directorate Modernisation Boards have oversight of a portfolio of modernisation projects and programmes enabling increased organisational capacity such as ICT infrastructure, Business Improvement, Workstyles, People and Culture Change.
- 3. Constitutional Working Group input to streamline governance arrangements and structure
- 4. ELT and City Management Board exchange details of working arrangements and changes to key personnel across organisations.
- 5. Members Policy Chairs Board and Policy & Resources Committee have oversight of key policy priorities.
- 6. SR25 Organisational Capacity reported to and receives focus at Audit & Standards Committee at least annually.

Third Line of Defence Independent Assurance:

- 1. budget process includes capacity as a key consideration
- 2. Local Government Peer Review 2017 focussed on Leadership and Industrial Relations.

Internal Audit on Organisational Capacity in September 2017, opinion 'Partial assurance

Reason for Uncertainty in Effectiveness of Controls: Decisions on priorities and resource could impact on the capacity of officers' to deliver on all priorities identified, whilst maintaining services

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
ELT to agree longer term strategic approach and ways of working to include new technologies and accommodation	Head of Human Resources & Organisational Development	0	31/03/22	18/01/21	31/03/22
Comments: A significant amount of initial work has taken plawe take advantage of new ways of working established during started the work to consider the drivers that should determinated by this work.	ng Covid19, and maximise potential ef	ficiencies in how	we use reso	urces. An EL	Г away day
HR & OD delivery of management development programme to enhance capacity of first 4 tiers of staff	Head of Human Resources & Organisational Development	55	31/03/22	02/01/17	31/03/22
Comments: In the light of Covid-19 HROD has replaced the of accessed by staff, in particular regular sessions with the Lead measured by the quality of leadership in the organisation, in The monthly leadership network meetings cover a variety of managing beyond crisis and wellbeing. There have also been development, coaching and action learning sets. Alongside the managers to network with each other, and access development A focus on management and leadership development will coparticularly in leading the organisation to take advantage of the comment of	dership Network (top 4 tiers of managed cluding the management scores in the topics to support immediate develop sessions on digital leadership and ongois a management development progrent to support them leading teams the ntinue as the organisation approache	ement). The succestaff survey. ment needs such going opportuniti ramme has been rough the pander s the future, and	as resilience es for access launched tha	initiatives we, managing so to bespoke at has enable	ill be through cris
HR work with others on our people strategy (Our People Promise) taking into account organisational needs and informed by our staff survey, corporate plan and our	Head of Human Resources & Organisational Development	45	31/03/22	01/04/16	31/03/22

workforce data

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date

Comments: Modernisation funds secured to continue to progress this work through to March 2023. The Leadership Development performance appraisal system continues to be embedded including the 360 mid-year appraisal process. 3 mandatory elements out of the Leadership Development programme were rolled out before Covid19: 'Inspirational communications', 'holding challenging conversations' and 'working with members', and further development has been put in place to respond to the challenges of Covid19. The wellbeing work stream has been reviewed and work around mental health and physical activity has been prioritised, alongside support specific to the challenges of Covid19. The results of our wellbeing survey and the recent Covid-19 PULSE survey are being used to shape a new wellbeing strategy. The attendance and wellbeing team in HR is targeting activity according to sickness data, and in response to the increase in sickness in certain areas of the council during 19/20 attributable to mental health and stress. Since Covid19 sickness has reduced but the focus on mental health and stress continues.

The Action plan for the Fair and Inclusive work will prioritise issues related to recruitment and retention over the next 12 months to address some key issues. In summary these issues are: the council's workforce is not representative of the community we serve, BME applicants are less likely to be offered a role with the council, and a disproportionate number of our BME staff are employed at lower grades.

Work is underway to implement a number of improvements to our reward offer from 1st April 2021, including an annual leave purchase scheme, rental loans scheme, pension awareness session, shared cost Additional Voluntary Contributions and pay protection for medical redeployees.

Work is ongoing under the Ways of Working Recovery Sub-Group to consider the current ways of working and opportunities for improving our employment offer whilst ensuring staff have a safe working environment. This work is being taken forward collaboratively to consider the ways of working into the future that will allow us to take forward the opportunities from our changed ways of working, including offering more choice and flexibility to our staff whilst improving the way we deliver services to residents and visitors.

Next steps:

- 1. Develop wellbeing strategy in response to PULSE and Wellbeing survey results (HR Lead Consultant, March 2021)
- 2. Continue mandatory briefings for Fair and Inclusive Action Plan (Workforce Development, Lead Consultant, September 2021).
- 3. Implementation of the reward changes (Lead Consultant, Reward, Policy and Projects Team March 2021).
- 4. Ways of Working Group to undertake engagement on future ways of working (Head of HROD, May 2021) Measures of success: Deliver specified and non-cashable benefits for the project/programme (September 2021).
- 10 % improvement in staff survey results against 'I feel valued by my employer' and 'my employer cares about my wellbeing' question (Staff Survey May 2019, to be measured in survey May 2021).

10% improvement in equality data regarding representation of staff with a protected characteristic (March 2021).

Risk Action	Responsible Officer	Progress	Due	Start	End
		%	Date	Date	Date
Internal Audit review completed in September 2017. This flagged a greater need to focus on resource implications, rather than the council keeping everything running, sometimes carrying greater risks.	Deputy Chief Finance Officer	45	31/03/22	06/10/17	31/03/22

Comments: Post Covid-19 will be an opportunity to review capacity. Capacity was included as part of budget process for 2019/20 and 2020/21. It is difficult to ascertain the cost of statutory versus discretionary services because many activities span both. A more detailed priority-based budget process is being pursued to create the new Medium Term Financial Strategy from 2020/21 - planning has commenced for this, as has work to identify the resources required for core risk management around activities such as Health & Safety and Information Governance. It has been acknowledged by the Audit & Standards Committee that a No Overall Control political balance makes closing down services that may be near to being unsafe or unviable is not straight forwards.

Some corporate services have integrated into Orbis partnership following conclusion of Inter Authority Agreement (IAA) in May 2017. Most services fully integrated in terms of management, however position in Surrey could potentially affect full integration of Finance and HR in the future. In addition decisions on HR, Finance, and Property mean that full integration of these services now will not happen. Efforts will continue with East Sussex on HR and Finance.

Deputy Chief Finance Officer 50 31/03/22 13/10/16 31/03/22

Comments: It is considered that ongoing integration (with the exception of Property) between Brighton & Hove and East Sussex is desirable. A challenge remains on disaggregation of budgets, and a refreshed set of management arrangements from November 2019.