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DATE: 13 November 2018

ADULT CARE AND HEALTH PDS INFORMATION BRIEFING

Meeting to be held on Wednesday 21 November 2018

This briefing will only be debated if a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss. In addition, questions on the briefing should also be sent to the Clerk at least 24 hours before the meeting.

QUESTIONS ON THE INFORMATION BRIEFING

The Briefing comprises:

- 1 ADULT SOCIAL CARE LOCAL ACCOUNT 2017/18 (Pages 3 - 40)**
- 2 EDUCATION, CARE AND HEALTH SERVICES RISK REGISTER - QUARTER 2, 2018/19 (Pages 41 - 56)**

Members and Co-opted Members have been provided with advanced copies of the Part 1 (Public) briefing via email. The Part 1 (Public) briefing is also available on the Council website at the following link:

<http://cds.bromley.gov.uk/ieListMeetings.aspx?CId=559&Year=0>

Printed copies of the briefing are available to Members and Co-opted Members upon request by contacting Kerry Nicholls on 020 8313 4602 or by e-mail at kerry.nicholls@bromley.gov.uk.

Copies of the Part 1 (Public) documents referred to above can be obtained from
<http://cds.bromley.gov.uk/>

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London Borough of Bromley

PART 1 - PUBLIC

Briefing for Adult Care and Health Policy Development and Scrutiny Committee 21st November 2018

ADULT SOCIAL CARE LOCAL ACCOUNT 2017/18

Contact Officer: Stephen John, Director, Adult Social Care
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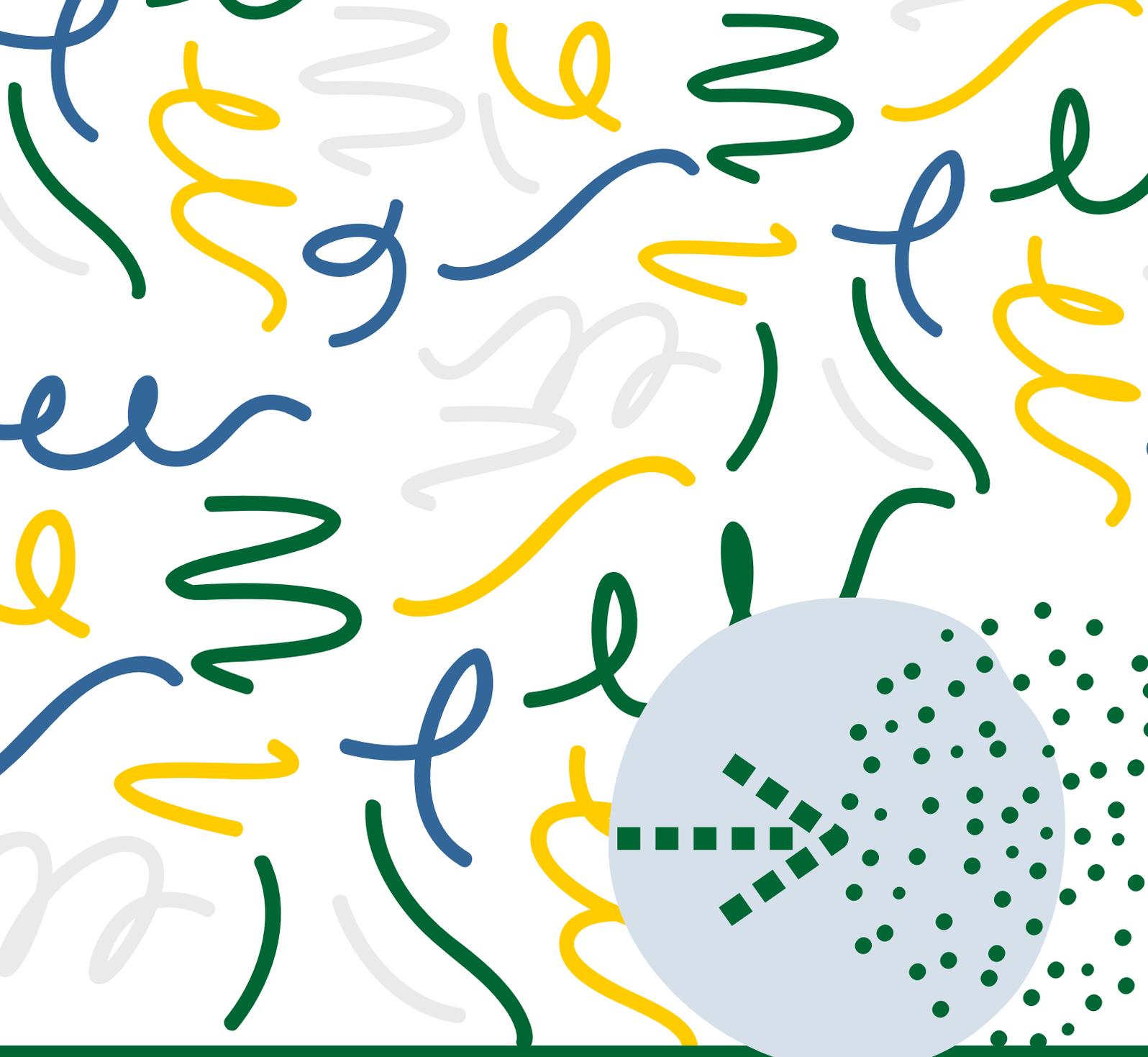
1. Summary

- 1.1 This report provides Members with the Adult Social Care Local Account for 2017-18 (see Appendix A). The Local Account provides an overview of how we have supported our residents to maximise their wellbeing and independence in the community during 2017-18, and what we plan to do in the upcoming year (2018-19).

2. **THE BRIEFING**

- 2.1 In 2011, the Department of Health recommended that all Local Authorities' Adult Social Care directorates publish an annual Local Account. This demonstrates how the Local Authority has performed in Adult Social Care, and is the way in which progress can be communicated to the wider community.
- 2.2 The work outlined in this report has supported people to have choice and control, and to maximise their wellbeing and independence in their local community.
- 2.3 The Local Account recognises significant successes for Adult Social Care in 2017/18. Adult Care and Health PDS Committee, Health and Wellbeing Board and the Council's Executive have received reports on areas covered within this briefing throughout the year.
- 2.4 There are also areas for development which are reflected in the Adult Care and Health Portfolio Plan for 2018 to 2022 under the following priorities.
- *Safeguarding* – Ensure effective arrangements are in place to respond to safeguarding risks and prevent the escalation of issues.
 - *Life Chances, Resilience and Wellbeing* – Ensure access to good, education and services. This will support health and wellbeing and enable residents to achieve their potential.
 - *Integrated Health and Social Care* – Work effectively with health agencies to provide the right specialise, holistic help and support that our residents need.
 - *Ensuring Efficiency and Effectiveness* – Deliver high quality services that make a positive difference to people's lives.

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Bromley Local Account

Adult Social Care Services 2017/18



THE LONDON BOROUGH

Welcome to our Local Account

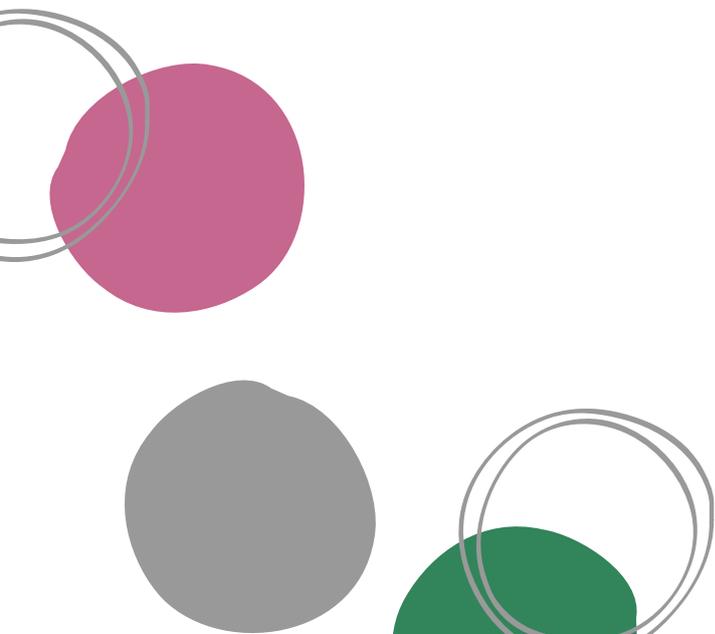
Bromley's Local Account of Adult Social Care, provides a small overview of how we have supported our residents to maximise their wellbeing and independence in the community during 2017/18, and what we plan to do in the upcoming year.

This includes:

- How much we spent on Adult Social Care
- What and who we spent the money on
- Our achievements in 2017/18
- Our plans for the future

In Adult Social Care, our focus is to provide information, advice, guidance and support to individuals and to their families to promote wellbeing and prevent, reduce or delay the need for higher levels of care and support.

With an increasing demand for public services from an ageing population we understand that the role of our department cannot always be as a service provider, crisis responder and regulation enforcer, but instead must also support existing networks to enable people to act for themselves.



During 2017-18 we have continued to make progress in improving support for our residents, we have:

- Jointly commissioned Bromley Well with NHS Bromley Clinical Commissioning Group (BCCG). This is a service that provides seamless support to our residents to stay both emotionally and physically well.
- Improved integrated working around hospital discharge process through the Transfer of Care Bureau, which continues to have a positive impact on local and out-of-borough performance.
- Launched 'Connecting Bromley' to help reduce social isolation in the Borough. The Adult Social Care Survey for 2017-18 demonstrates a reduction in the number of residents locally who felt they had 'little social contact with people and felt socially isolated'.

Although there are ongoing pressures to delivering effective Adult Social Care, there are also opportunities There is an increasing recognition that no single service or agency has all the answers to the complex socio-economic challenges facing our residents. The delivery of effective social care services require new forms of collaboration and ways of working, shared decision-making and risks.

We remain committed to seeking innovative ways to meet these future challenges, and make best use of funding.

Stephen John

Director of Adult Social Care

How to contact us

Here is all the information you need if you want to get in touch with us. We value your comments, compliments and suggestions to help us provide better services.

Write to us



Adult Social Care
Civic Centre
Stockwell Close
Bromley, BR1 3UH

Call us



020 8461 7777

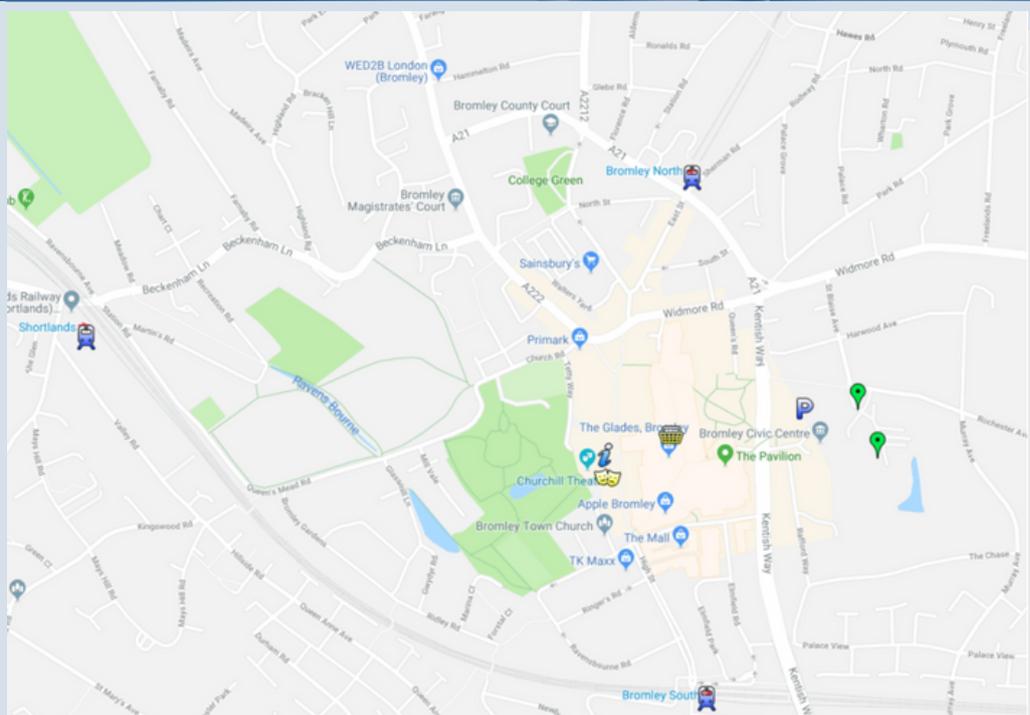


E-mail us adult.early.intervention@bromley.gov.uk

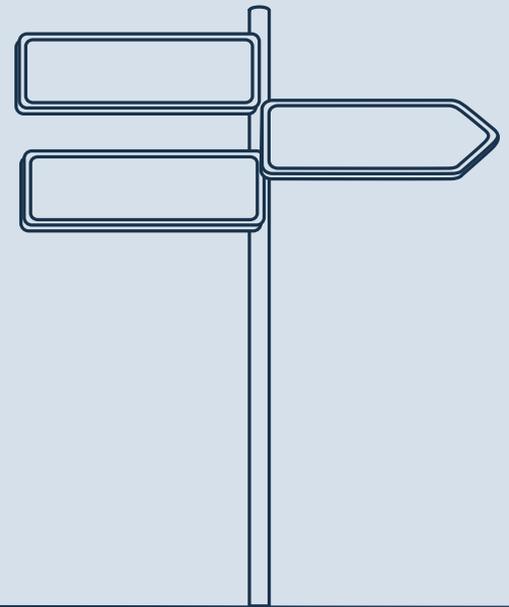


Visit www.bromley.gov.uk/mylife

Find us



More advice and support



There is a range of support and advice available across the borough.

The Bromley Adult Care and Support Services Directory for 2018/19

The Directory has been produced by the Council to provide valuable information to help you make informed choices about your life. Get a free copy of by calling **01223 207770** or visit **www.carechoices.co.uk/region/london/bromley**

Bromley Well

Bromley Well is a Single Point of Access to support health, wellbeing and independence, funded by the Council and local health services.

It supports people who may be at risk of crisis in their lives but who could, with appropriate help, maintain both their emotional and physical health and wellbeing and remain living independently.

Call **0300 330 9039**, e-mail **spa@bromleywell.org.uk** or visit **www.bromleywell.org.uk**.

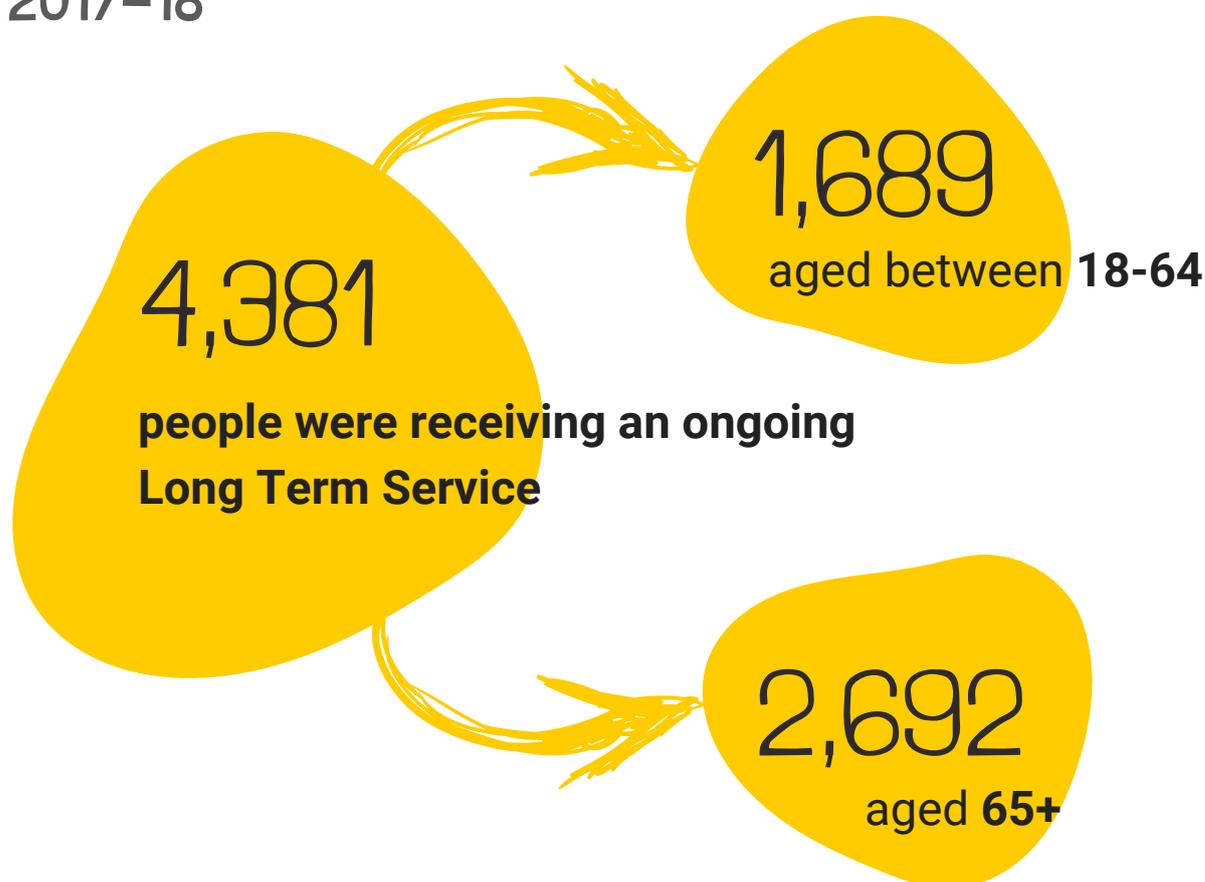
Adult Social Care

We provide care and support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers.

Adult Social Care includes assessment of your needs, provision of services or allocation of funds to enable you to purchase your own care and support. It includes residential care, home care, personal assistants, day services, the provision of aids and adaptations and personal budgets.

Adult Social Care in numbers

2017–18



In 2017-18...

409 people (both old and new clients) received Nursing Care

518

people received one-off support - such as OT Equipment)

591

people (both old and new clients) received Residential Care

600+

people were supported through intensive, short term, 'step-down' beds at Orpington Hospital

373

people took a Direct Payment

2,638

care assessments completed

18,594

people were invited to have a NHS Health Check

8,390

people had a NHS Health Check completed

3,381

people received home care support to enable them to stay in their home

1,919

households were supported to remain either in their own home or secure alternative accommodation

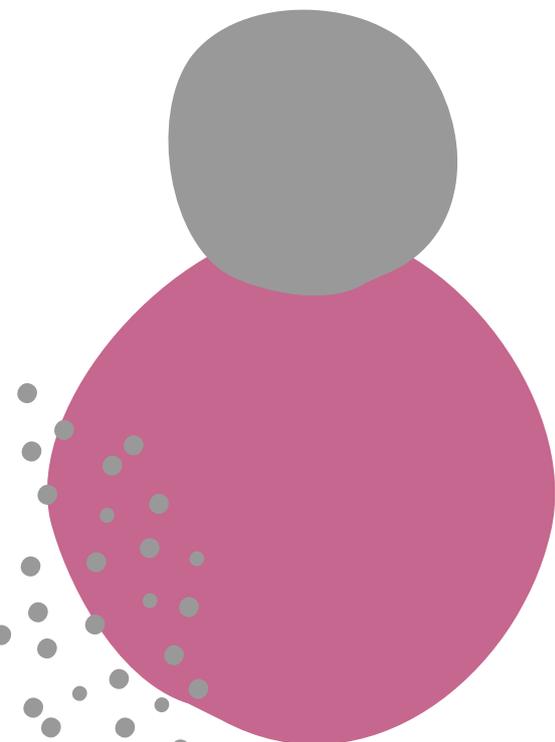
What we spent in 2017/18

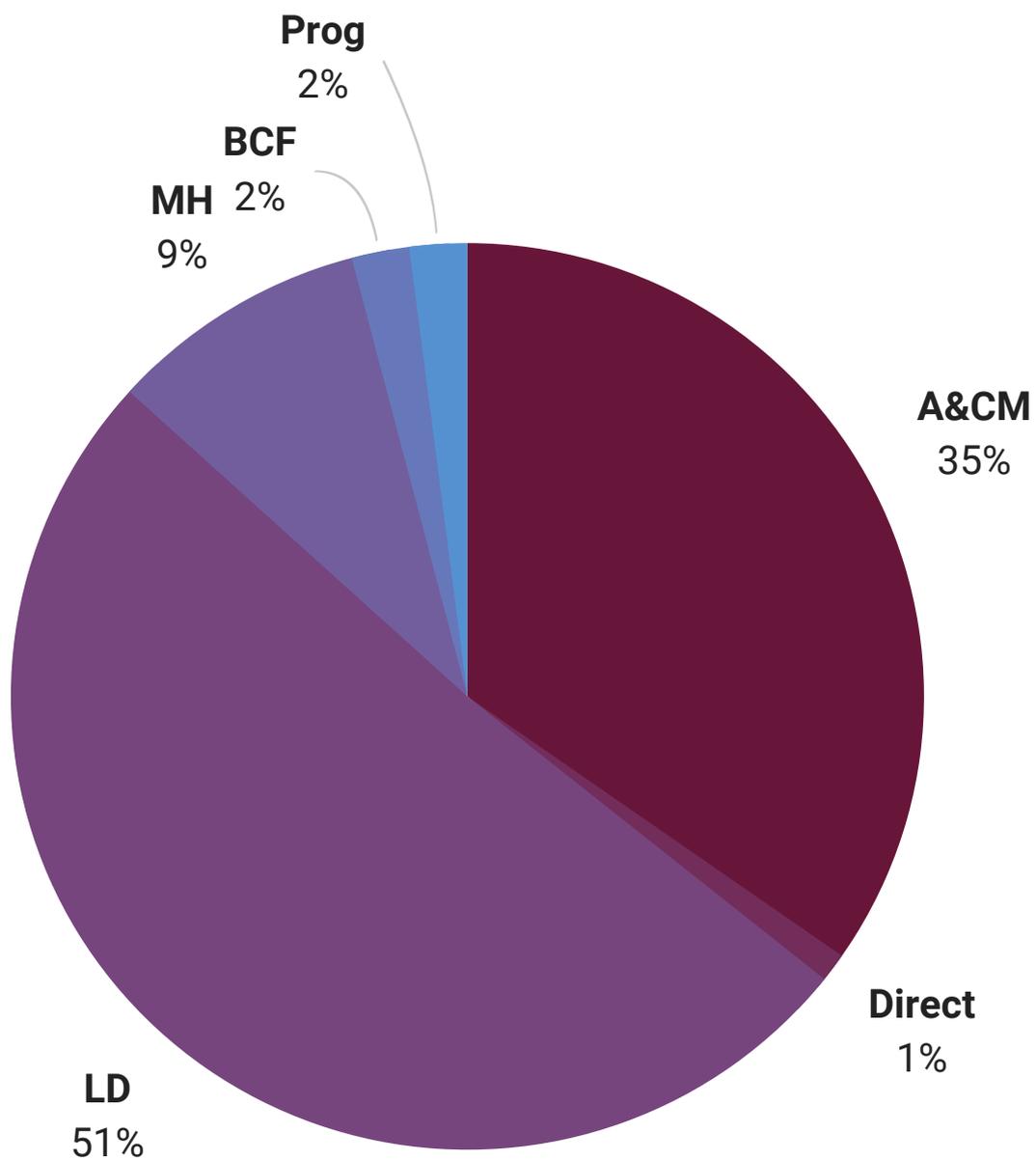


At a time when the Council has to continue making challenging decisions as a result of central government funding cutbacks, it is vital that we allocate those reduced resources effectively to ensure our most vulnerable residents have access to the information and support that they require at the earliest possible opportunity.

2017/18 Outturn £'000

- £21,892 - Assessment and Care Management
- £406 - Direct Services
- £32,070 - Learning Disabilities
- £6,018 - Mental Health
- £1,009 - Better Care Funding – Protection of Social Care
- £935 - Better Care Fund/Improved Better Care Fund
- £1,500 - Programmes





- **A&CM** - Assessment and Care Management (complex care, long-term care, safeguarding)
- **Direct** - Direct services (reablement, care link)
- **LD** - Learning disability
- **MH** - Mental health
- **BCF** - Better Care Fund/Improved Better Care Fund
- **Prog** - Programmes

Future Plans for 2018/19

The Adult Care and Health Strategic Priorities for 2018–2022 are:

Priority: Safeguarding

Ensure effective arrangements are in place to respond to safeguarding risks and prevent the escalation of issues. This will keep children and vulnerable adults safe.

Priority: Life Chances, Resilience and Wellbeing

Every adult should have access to a good education and services. This will support their health and wellbeing and enable them to achieve their potential. Our residents should have access to preventative early help which is vital to preventing problems getting worse.

Priority: Integrated Health and Social Care

Working effectively with health agencies is essential to providing the right specialist, holistic help and support that our residents need. Where appropriate we will jointly plan, commission and deliver services.

Priority: Ensuring Efficiency and Effectiveness

We remain committed to delivering high quality services that make a positive difference to people's lives.



Areas of focus, in support of these priority statements, include:

- Improving the domiciliary care offer for Bromley residents.
- Reviewing integrated commissioning opportunities, and develop a new integrated commissioning plan for the Council and the BCCG to set out our annual commissioning activities.
- Rolling out technology and mobile working for Adult Social Care front-line staff.
- Continuing to work on developing cross-cutting health and social care commissioning strategies including older people, people with learning disabilities and people with mental health needs.
- Continuing to increase the number of eligible population invited to have a NHS Health Check and the number of health checks completed.
- Develop an Integrated Mental Health Strategy.
- Develop an Older Person's Strategy.

If you are interested in viewing Bromley's Adult Care and Health Portfolio Plan for 2018 to 2022, please visit:

www.bromley.gov.uk/info/10020/policies_and_plans

The Better Care Fund (BCF)/ Improved Better Care Fund (iBCF)

The Better Care Fund (BCF) grant runs from 2017-19, and is ring fenced for the purpose of pooling budgets and integrating services between Bromley Clinical Commissioning Group (BCCG) and the Council. The spending plan for the BCF must be jointly agreed by the Council and BCCG.

The Improved Better Care Fund (iBCF) was a new funding element added to the Better Care Fund which is paid to local government as a direct local authority grant for spending on Adult Social Care.

The Programme continues to be aligned with the model of providing services with funding to underpin the wider objectives to move care from an acute setting into the community.

The programme includes the following services:

- Reablement – providing additional capacity
- Winter Pressures – to deliver winter pressures schemes and support timely discharge from hospital
- Health Support in to Extra Care Housing & Care Homes – integrated Health & Care Strategy and Health Interventions
- Dementia Hub – to increase diagnosis and universal post diagnosis support
- Community Equipment – to support discharge from hospital
- Intermediate Care – cost pressures
- Self-Management & Intervention (Bromley Well) – to focus on prevention and self-management of people with long term conditions and avert avoidable admissions.

Achievements include:

Self-Management and Early Intervention –

Bromley Well provides a single point of access for local people to prevent them falling into a crisis and improve their health, wellbeing and independence. The service has quickly established itself across the borough and since its launch in October 2017 has seen a total of 4,596 people go through the single point of access, and is providing active support to over 2,000 local people.

Support for Integrated Care Networks (ICNs) –

In 2017, three Integrated Care Networks began operating across Bromley. The care is delivered by a multi-disciplinary team designed to help patients with the most complex care needs to stay well, remain independent and stay out of hospital where possible. In October 2017, it was recommended that the Council formerly sign and join the ICN Alliance Agreement. The Council joined the Alliance Agreement in October 2017.

Dementia Universal Support Service (Dementia Hub) –

During the last quarter of 2017/18, the service continued to meet the target of triaging people within three working days and continues to capture and increased number of people who are re-referred to the service.

Delayed Transfers of Care (DToC) –

A DToC joint action plan has been developed which sets out Bromley's agreement to reduce delayed transfers of care. Improved integrated working around hospital discharge process through the Transfer of Care Bureau continues to have a positive impact on local and out-of-borough performance. There has been a reduction in DToCs from 113 in March 2017 to 80 in March 2018.

Discharge to Assess -

A successful pilot agreed for another year. Its strengths include improved outcomes for patients.

Reablement -

Based on local data, the percentage of people still at home 91 days after discharge is 93.5% as of the end of March 2018. Bromley has exceeded its planned target of 90%. It is noteworthy to mention that Reablement was rated 'Good' by the CQC in May 2018, a significant improvement from 'Requires Improvement'.

Investment in 'Just Checking' Software -

The Just Checking activity monitoring system helps people live in their own homes for longer by showing family and professionals their day-to-day capabilities, or where support is needed. The information helps care providers deliver the right care at the right time; as well as reassuring family members, helping individuals stay at home for as long as possible.

Health Support in to Care Homes and Extra Care Housing -

A new Care Homes Programme Board was established in November 2017. Since the programme started a number of milestones have been achieved including the delivery of a workshop to look at the NHS England Care Homes Vanguard recommendations. Additionally, the Hospital Transfer Pathway (Red Bag Scheme) was delivered to 39 out of 43 elderly care homes and two learning disability homes.



Dementia

The majority of older people in Bromley live independent, healthy and fulfilling lives without needing help from the Council.

Dementia Hub Contact Information:

If you or someone you care for has been diagnosed with dementia and feel you could benefit from assistance from the Bromley Dementia Support Hub, please contact the Hub by calling **020 3328 0366** or visiting www.bromleydementiasupporthub.org.uk.

Key statistics in 2017/18:

- Our borough is home to over 4,000 adults with dementia
- 640 people had a primary support reason of memory and cognition in 2017/18, this compares with 689 in 2016/17

Achievements include:

Dementia Universal Support Service (Dementia Hub) –

The Dementia Universal Support Service (Dementia Hub) was commissioned to establish a clear pathway for people and their carers immediately following diagnosis. The hub meets with those referred to the service within 3 working days and continues support an increasing number of residents.

Dementia friendly community –

Bromley was officially recognised as working towards becoming a dementia friendly community at the Bromley Dementia Action Alliance (BDAA) Second Annual Meeting in October 2017. This is an Alzheimer's Society Programme to get everyone from governments and large companies to local small businesses, schools and public services to share part of the responsibility so people with dementia feel understood, valued and can live and contribute to their community.

In 2018/19 we will:

- Continue to encourage all Council and contracted officers to participate initially in Dementia Friend Awareness sessions.
- Continue to commission the Dementia Support Hub to provide information and support to those diagnosed with Dementia.
- Continue to deliver courses by MindCare for residents in the borough who may come into contact with people with dementia. Including 'Understanding Dementia' and two new sessions on 'Behaviours we find Challenging and Successful Communication'. To book onto the course email: training@mindcare.org.uk.
- Join the Dementia Action Alliance, which brings together leading organisations across England committed to transforming health and social care outcomes for people affected by Dementia.



People with Mental Health Needs

The Council has commissioned Oxleas NHS Foundation Trust to provide secondary mental health services in the borough. There are seconded social workers from the Council working with Oxleas, integrated within the multidisciplinary teams.

Oxleas provide a mental health service for working age adults (18-65) and an Older Adults Service.

The Community Mental Health Teams for 18-65 are based at:

Orpington Community Mental Health Team

1-6, Carlton Parade, Orpington, Kent, BR6 OJB
01689 892300

Beckenham and Penge Community

Yeoman House, 57-63, Croydon Road, Penge, London, SE20 7TS
020 8659 2151

Bromley Community Health Team

Stepping Stones House, 38 Masons Hill, Bromley, Kent, BR2 9JG
020 8466 2500

Key statistics in 2017/18:

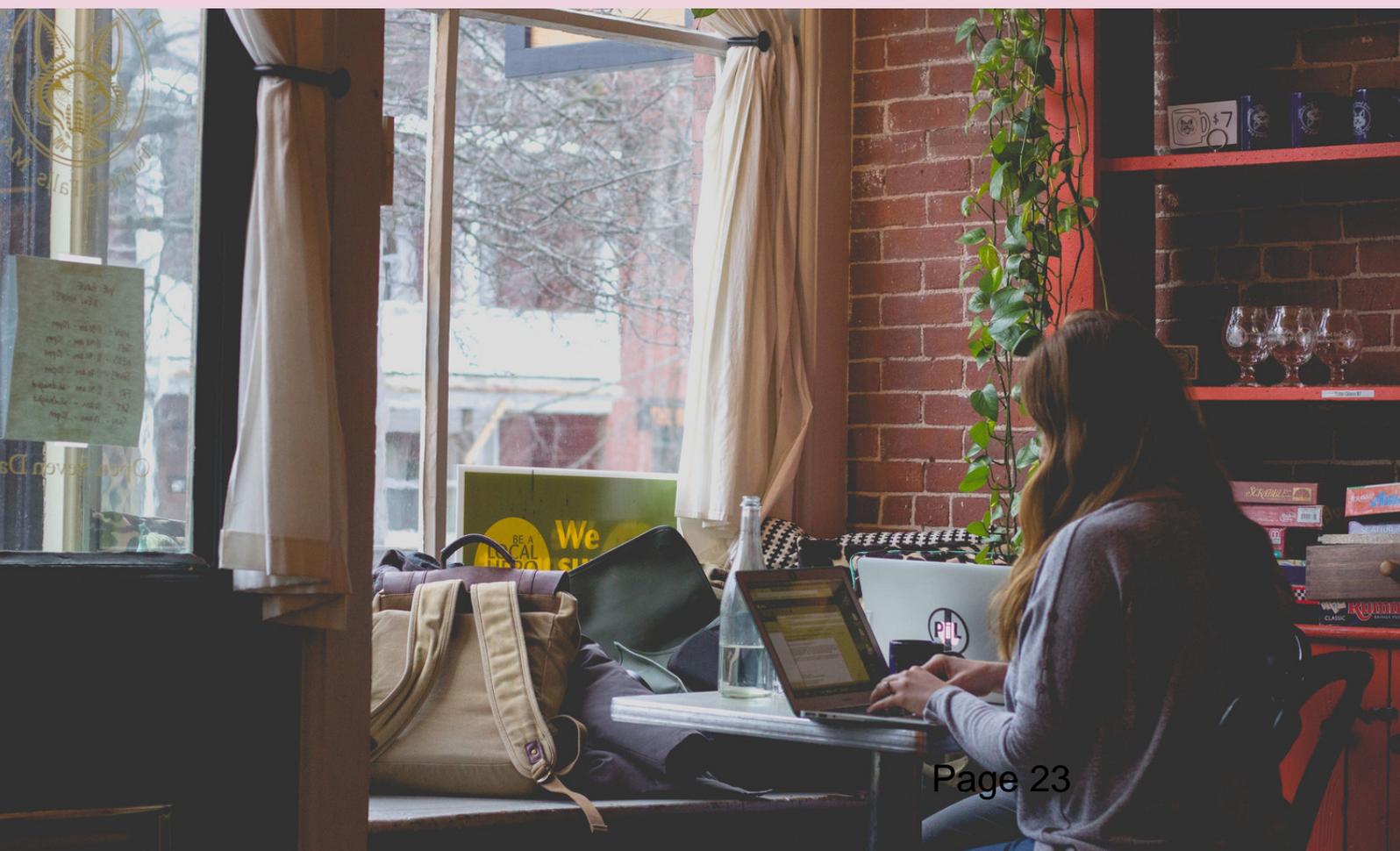
- Around 47,000 people in Bromley have a long term health problem or disability. It is estimated that approximately 39,500 of them also have a mental health problem or co-morbidity. Around 2,598 have a severe mental illness, while around 37,063 have been known to suffer from depression. Bromley has the third highest level of recorded depression in London.
- During 2017/18 we carried out Mental Health Act Assessments of 747 people.

Achievements in 2017/18:

- Integrated Care Networks (ICNs) deliver care by a multi-disciplinary team to help patients with the most complex care needs to stay well, remain independent and stay out of hospital where possible. This joined up way of providing care for patients means they are more responsive to the needs of patients.
- The Home Treatment Team continues to provide short-term therapeutic interventions for Bromley residents who are suffering from an acute mental health crisis.

In 2018/19 we will:

- Publish our Joint Council and BCCG Mental Health Strategy.
- Bromley Well will work with Bromley Healthcare and Oxleas NHS Foundation Trust to design an integrated model to identify and support people earlier.
- Work with Bromley Well to further develop a single point of access and improve working arrangements with existing health services. This will ensure clarity for clients and efficiency within the system.



People with Learning Disabilities

In Bromley, the Learning Disability Service undertakes assessment and support services to people within Bromley who present as potentially having a learning disability or have a diagnosed learning disability. This includes young people with learning disabilities that are transitioning to adulthood.

Key Statistics in 2017/18:

- Our borough is home to nearly 5,000 adults with a learning disability.
- The population of adults with learning disabilities is growing at a rate of around 1% per year.

Achievements in 2017/18:

- 246 clients with Learning Disabilities were supported through Supported Living in 2017/18.
- 151 clients with Learning Disabilities were supported through a Direct Payment in 2017/18.
- 240 clients with Learning Disabilities were living on their own or with their family in 2017/18.

In 2018/19 we will:

- Increase Supported Living Capacity.
- Ensure clients with Learning Disabilities continue to be supported by commissioned services such as Orpington and Bromley Gateway Club and Beckenham and Penge Gateway.
- The Council and CCG have commenced work on a Joint Learning Disability Strategy for Bromley for 2019 onwards. This will bring together joint service redesign and commissioning intentions.
- Roll out the 'Just Checking' activity monitoring system in October 2018 to help people live in their own homes for longer and promote independence.



Support for Carers

A Carer is a person who provides unpaid support to a partner, family member, friend or neighbour who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker, who is paid to support people.

Bromley Well

Bromley Well is a Single Point of Access to support health, wellbeing and independence, funded by the Council and local health services.

It supports people who may be at risk of crisis in their lives but who could, with appropriate help, maintain both their emotional and physical health and wellbeing and remain living independently.

Call **0300 330 9039**, e-mail spa@bromleywell.org.uk or visit www.bromleywell.org.uk.

Key Statistics in 2017/18:

- During 2017/18 2,638 carers were assessed (this includes both single and joint assessments with client/cared for individual).
- This is an increase of 33% from 2016/17.

Achievements in 2017/18:

- Carers Bromley from March had 365 adult carers referred for support into the service. The service provided information, advice and guidance through a telephone helpline and internet to 2,574 carers.
- Following the change in provider, Bromley Well since October had 413 referrals into the service, and supported 570 carers over the age of 19.
- 1,180 emotional support sessions (phone, instant messaging and face to face) were provided by the service.
- A total of 50 families were supported by the service from October.
- Bromley Well provides a service for young carers aged 4-19 to manage caring relationships whilst enjoying their childhood. Since the contract went live in October, 123 young carers were referred. 60 young carers attended leisure activities, 51 young carers attended training sessions, and 58 young carers received emotional support.

In 2018/19 we will:

- Continue to support carers through commissioned services.
- Invite residents to participate in our Carers Survey, and learn from responses and feedback.
- Develop an Older Person's Strategy that will consult on responses from the 'Ageing Well in Bromley Engagement' online survey carried out during summer 2018.

Protecting Adults who may be at Risk

The residents of Bromley are able to live with their rights protected, in safety, free from abuse and the fear of abuse.

Key Statistics in 2017/18:

- 612 safeguarding concerns generated.
- 276 safeguarding enquiries.
- 396 Concluded Enquiries.
- 920 Deprivation of Liberty Safeguarding (DoLS) applications.

Achievements in 2017/18:

- Training programme on DoLS in the community was delivered in 2017/18.
- 9 social workers were qualified as Best Interest Assessors (BIA) in 2017/18.
- Awareness sessions for financial scamming and doorstep crime were held with people with learning disabilities and staff through Bromley Mencap, the Learning Disability Forum and Queen Mary's Hospital Sidcup.
- Other sessions for staff and volunteers working with older people were held with health and social care professionals including GPs, housing associations, domiciliary care and care home providers, library and Royal Mail staff.
- Sessions directly for residents were held with residents' associations, U3A, Community Shops, sheltered accommodation schemes and friendship groups.
- Bromley Safeguarding Adults Board (BSAB) has increased the number of Self Neglect and Hoarding Panels held to meet rising demand.
- Contract in place for specialist support for older people (Independent Domestic Violence Advocate), which has seen an increase in referrals.
- 52 groups of people were trained in protecting the elderly and vulnerable from scams and doorstep crime.
- 103 people were trained to identify and prevent hoarding, self-neglect and modern day slavery.
- 255 people were trained in Deprivation of Liberty Safeguards and Mental Capacity Act awareness. This is an increase of 70 from 2016/17.

In 2018/19 we will:

- Train more Best Interest Assessors (BIA).
- Continue to provide support and supervision to the colleagues carrying out assessments for Deprivation of Liberty.
- Continue to deliver training programme in keeping people safe for our work force.



Bromley Safeguarding Adults Board

Safeguarding Adults Boards oversee adult safeguarding arrangements in the Borough and assure itself that organisations are fulfilling their duties under the Care Act. It ensures that there is a collaborative approach to safeguarding to help, prevent, abuse and neglect.

The Board has three statutory functions:

- Develop and publish a strategic plan which outlines how the Board will meet their objectives and how partner agencies will help the Board achieve this.
- Publish an annual report detailing the effectiveness of the Board's work.
- Commissioning safeguarding adults reviews, where an individual in the Borough has died or been seriously harmed as a result of abuse or neglect.

In 2017/18 the Board:

- Had a total of 2,388 police referrals made, 566 London Ambulance Service referrals and 60 referrals from the London Fire Brigade.
- Launched a Safeguarding Commercial during a Safeguarding Awareness Week at The Glades, which provided information on how to identify and report abuse. Information was also disseminated to all partners and GP practices, and housing residency schemes.
- Delivered training to over 1,000 on as Domestic Abuse, Self-Neglect and Hoarding and Sexual Violence.
- Set up the Safeguarding Adults Review Committee with nine cases being considered for a Safeguarding Adults Review during 2017/18. Of these, one case met the threshold for Review and an Independent Reviewer has been commissioned to undertake this.
- Delivered our Annual Conference with the theme of 'Implementing Better Care'. This event covered a range of topics including frailty, dementia, and self-neglect and was attended by 151 professionals across the Borough.
- If you are interested in viewing Bromley Safeguarding Adults Board (BSAB) Annual Report for 2017/18, please visit www.bromley.gov.uk/bsab

In 2018/19 the Board will be focusing on a number of priority areas including:

- Domestic Abuse
- Self-Neglect
- Hoarding
- Fire Safety in Homes

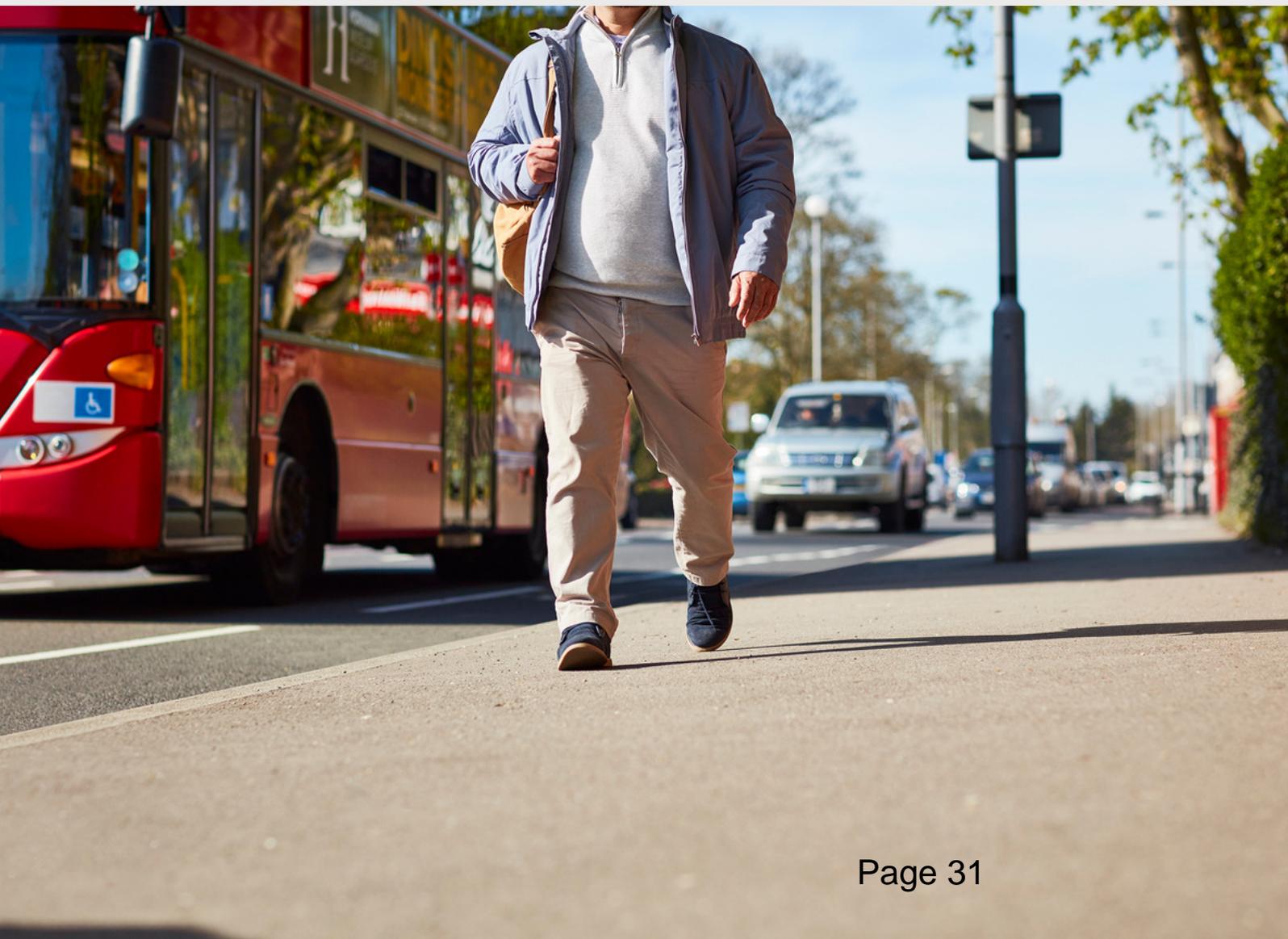
The Board will also be doing work around modern slavery, and continuing to progress appropriately Safeguarding Annual Reviews.

Safeguarding Adults Contact Information:

Address - Civic Centre, Stockwell Close, Bromley, BR1 3UH

Call - 020 8461 7777

E-mail - adult.early.intervention@bromley.gov.uk



Social Isolation

Social isolation can affect a number of vulnerable groups such as the elderly, people with physical disabilities, learning disabilities or mental ill-health, young parents and care leavers without a local support structure. Carers can also be impacted especially when they are caring many hours a week. Social isolation can impact on an individual's physical and mental wellbeing as well as leaving them at greater risk of abuse.

Key Statistics in 2017/18:

- Through the Adult social care survey we found that 46% of those asked felt that they “have as much social contact” as they wanted with people they like, this is better than the London average of 41% and 31% felt they had ‘adequate social contact’.
- Only 5% felt that they were “socially isolated” this is better than the national 6% and London 8% average. Bromley has made significant efforts to reduce social isolation since 2015.

Achievements in 2017/18:

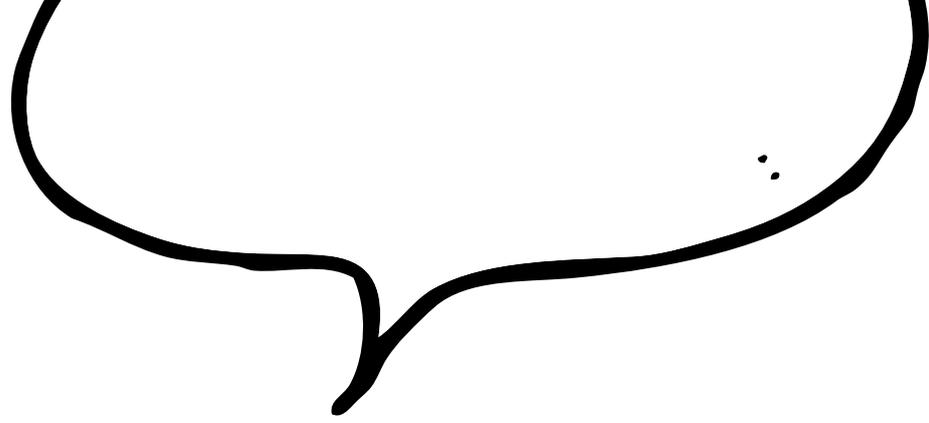
- To help reduce social isolation in the Borough, the Connecting Bromley campaign had been developed which included befriending services, volunteering opportunities and a searchable directory of activities available on the Bromley MyLife website. The campaign was advertised in a number of ways, including through voluntary groups and community venues.
- During the November campaign 2017, 1454 pages relating to social isolation within the Bromley MyLife website had been viewed by 794 unique visitors. In total, more than 4,100 people used the Connecting Bromley website from 1st November 2017 to 31st March 2018.
- Additionally, through the Connecting Bromley campaign, a list of 800 services or activities by type, age, need and location was developed.

In 2018/19 we will:

- The London Borough of Bromley is committed to developing a new strategy aimed at Older People, and those approaching old age. One of its main themes will be prevention and wellbeing and, as part of this agenda, the issue of social isolation will be prioritised. The development of the strategy will be able to build on the work already undertaken to promote activities and services which can prevent or alleviate loneliness and social isolation.



Your voice heard



The Education, Care and Health Services (ECHS) Department has a long and successful history of resident involvement. We have a range of systems and processes that give our residents and service users the power to share their thoughts.

We want to truly put the voice of our residents and service users at the heart of our decisions.

During the 2017/18 Adult Social Care survey –
we found that:

- 58% of service users felt that they “had enough choice over care and support services”, this is lower than the London average 64%, we need to understand this more and will explore the issue when we draft and consult on our Older People’s strategy.
- 32% felt that they have “as much control as they need over their daily life and 44% felt that they had “adequate” control over their lives, this is inline in the London and national benchmark.

How to make a complaint or share a compliment

Under the *Local Authority Social Services and National Health Service Complaints (England) Regulations 2009* the majority of Adult Social Care Complaints are considered on a statutory basis and handled through the Council's Corporate Complaints Procedure.

We aim to offer a helpful and efficient service, but we recognise that sometimes things can go wrong. We aim to put mistakes right quickly and we will not treat anybody unfavourably if they make a complaint about it. You have the right to tell us if something is wrong. We also value your comments because what you tell us about our services helps us to improve them and plan for the future. We also like to hear if you are pleased with the service you receive; knowing when we are doing well can be as informative as knowing when things go wrong.

You can make a compliment or complaint to the London Borough of Bromley in the following ways:

Write to us

**Adult Social Care Complaints
Civic Centre
FREEPOST MB 1658
Stockwell Close
Bromley, BR1 3UH**

Online

www.bromley.gov.uk/complaints

Call

020 8313 4491

During 2017/18

Adult Social Care were subject of a significant 25% reduction in complaints from 2016/17 to 2017/18.

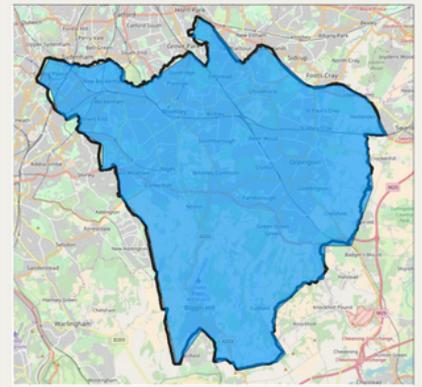
If you are interested in viewing this year's Complaints and Compliments Annual Report (2017/18), please visit

https://cds.bromley.gov.uk/documents/s50063958/Complaints%20Report%202017-18_FINAL.pdf.

Key facts

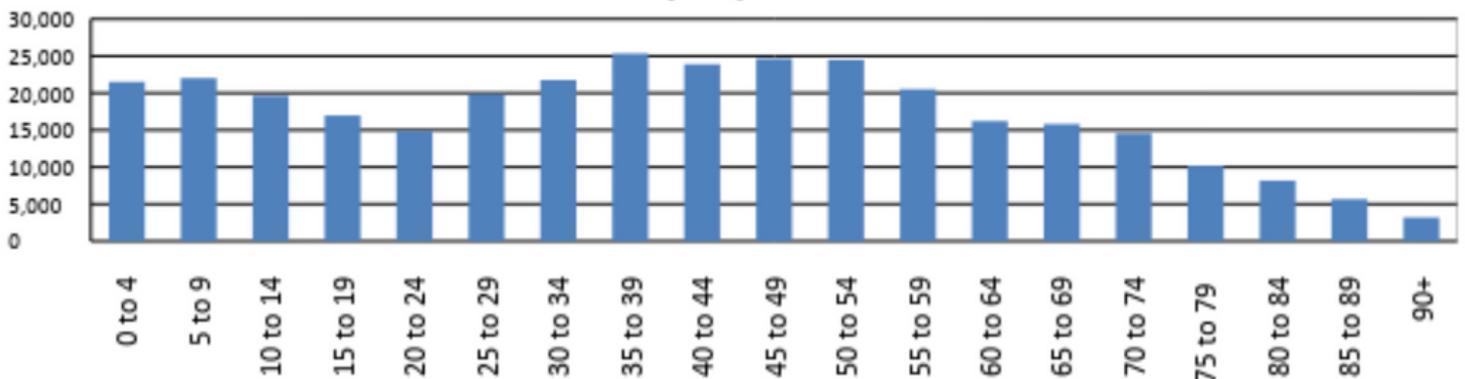
330,000+

people live in Bromley



Bromley = 150 km²

Bromley Population



Source: MYE 2: Population Estimates: Persons by Single Year of Age and Sex for Local Authorities in the UK, mid-2017

Ethnic Group	Bromley	London	England
White: English/Welsh/Scottish/Northern Irish/British	77%	45%	80%
White: Irish	1%	2%	1%
White: Gypsy or Irish Traveller	0%	0%	0%
White: Other White	5%	13%	4%
Mixed/ Multiple Ethnic Groups: White and Black Caribbean	1%	1%	1%
Mixed/ Multiple Ethnic Groups: White and Black African	0%	1%	0%
Mixed/ Multiple Ethnic Groups: White and Asian	1%	1%	1%
Mixed/ Multiple Ethnic Groups: Other Mixed	1%	1%	1%
Asian/ Asian British: Indian	2%	7%	3%
Asian/ Asian British: Pakistani	0%	3%	2%
Asian/ Asian British: Bangladeshi	0%	3%	1%
Asian/ Asian British: Chinese	1%	2%	1%
Asian/ Asian British: Other Asian	2%	5%	1%
Black/ African/ Caribbean/ Black British: African	3%	7%	2%
Black/ African/ Caribbean/ Black British: Caribbean	2%	4%	1%
Black/ African/ Caribbean/ Black British: Other Black	1%	2%	1%
Other Ethnic Group: Arab	0%	1%	0%
Other Ethnic Group: Any Other Ethnic Group	1%	2%	1%



Glossary

Adult Social Care – Care and support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers. Adult Social Care includes assessment of your needs, provision of services or allocation of funds to enable you to purchase your own care and support. It includes residential care, home care, personal assistants, day services, the provision of aids and adaptations and personal budgets.

Care Act 2014 – A law passed in England in 2014 that sets out what care and support you are entitled to and what local councils have to do. According to the law, councils have to consider your wellbeing, assess your needs and help you get independent financial advice on paying for care and support.

Carer – A person who provides unpaid support to a partner, family member, friend or neighbour who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker, who is paid to support people.

Carer's Assessment – If you are an unpaid carer for a family member or friend, you have the right to discuss with your local council what your own needs are, separate to the needs of the person you care for.

Clinical Commissioning Group (CCG) – A group of GP practices in a particular area that work together to plan and design health services in that area. Each CCG is given a budget from NHS England to spend on a wide range of services that include hospital care, rehabilitation and community-based.

Continuing Health Care – Ongoing care outside hospital for someone who is ill or disabled, arranged and funded by the NHS.

Continuity of Care – There are two meanings to the phrase 'continuity of care': seeing the same doctor or other care professional every time you have an appointment, or having your care well-coordinated by a number of different professionals who communicate well with each other and with you.

Co-production – When you as an individual are involved as an equal partner in designing the support and services you receive.

Cost-effectiveness – A comparison of how much something costs in relation to how much benefit you get from it. Looking at cost-effectiveness can help you decide what to spend money on. Councils and other organisations do the same thing.

Delayed Discharge – When you are well enough to leave hospital after an illness or accident, but you have to stay there while the care you need in your own home or in another place is arranged.

Delayed Transfer of Care (DToc) – Similar to delayed discharge. When you are ready to move from hospital to another type of care, but the care you need is not available, meaning that you spend longer in hospital than medically necessary.

Direct Payments – Money that is paid to you (or someone acting on your behalf) on a regular basis by your local council so you can arrange your own support, instead of receiving social care services arranged by the council. Direct payments are available to people who have been assessed as being eligible for council-funded social care. They are not yet available for residential care. This is one type of Personal Budget.

Discharge to Assess (D2A) – If you are ready to leave hospital but still need some care and support, you may be able to go home with care provided in your home for a short period while discussions take place about the care and support you may need in the longer term.

Early Intervention – Action that is taken at an early stage to prevent problems worsening at a later stage.

Health and Wellbeing Board – Every council area in England has a Health and Wellbeing Board to bring together local GPs, councillors and managers from the NHS and the Council.

Healthwatch England – A national organisation that represents people who use health and care services in England.

Healthwatch England – A national organisation that represents people who use health and care services in England.

Home care – Care provided in your own home by paid care workers to help you with your daily life.

Integrated Care – Joined up, coordinated health and social care that is planned and organised around the needs and preferences of the individual and their carer and family.

Joint Commissioning – When two or more organisations in a local area – usually the NHS and local council – work together to plan services to meet the needs of people who live in the area.

Learning Disability – A term that is used to describe a brain impairment that may have made it difficult for someone to communicate, to understand new or complex information, or to learn new skills.

Mental Capacity Act – A law that is designed to protect people who are unable to make decisions about their own care and support, property or finances, because of a mental health condition, learning disability, brain injury or illness.

Mental Health Problems – Problems with the way you think, feel and react, which affect your ability to cope with life, make choices and relate to other people.

Model of Care – A way of providing care based on a set of beliefs and principles about what is right and works best.

Multi-agency working – When different organisations work together to provide a range of support for people who have a wide range of needs.

Multi-disciplinary Team – A team of different professionals working together to provide care and support that meets your needs.

NHS England – The organisation that decides what the most important health issues in England are and how NHS money should be spent. It is given money by the Department of Health and shares this out to local areas and Clinical Commissioning Groups.

Older People – Are the largest group of people who use adult social care services. Some councils define people over the age of 50 as 'older', but social care services for older people are usually for people over the age of 65.

Outcomes – In Social Care, an 'outcome' refers to an aim or objective you would like to achieve or need to happen, for example, continuing to live in your own home, or being able to go out and about.

Public Health England – The part of the Department of Health in England that works with the Government and local councils to make the population healthier.

Quality of Life – Your satisfaction with your life in terms of wellbeing and happiness.

Reablement – A way of helping you remain independent, by giving you the opportunity to relearn or regain some of the skills for daily living that may have been lost as a result of illness, accident or disability.

Residential Care – Care in a care home, with or without nursing, for older people with disabilities who require 24-hour care.

Safeguarding – The process of ensuring that adults at risk are not being abused, neglected or exploited.

Section 42 – An enquiry is any action that is taken by a Local Authority in response to indications of abuse or neglect in relation to an adult with care and support needs.

Service User – A person who receives services from a care and support provider.

Step-down care – Care that may be provided if you are ready to leave hospital but not yet ready to return to your home.

Supported Living – An alternative to residential care or living with family that enables adults with disabilities to live in their own home, with the help they need to be independent.

Transfer of Care – When you move from one place of care to another, such as from hospital to your home, supported housing or residential care.

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Report No.
CS18195

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Date: Wednesday 21st November 2018

Decision Type: Non-Urgent Non-Executive Non-Key

Title: EDUCATION, CARE AND HEALTH SERVICES RISK REGISTER – QUARTER 2, 2018/19

Contact Officer: Denise Mantell, Senior Planning and Development Officer
Tel: 020 8313 4113 E-mail: denise.mantell@bromley.gov.uk

Chief Officer: Ade Adetosoye, Deputy Chief Executive & Executive Director: ECHS

Ward: Not Applicable

1. Reason for report

1.1 Risk Management is the identification, analysis and overall control of those risks which can impact on the Council's ability to deliver its priorities and objectives. Education, Care and Health Services' Risk Register covers those risks which impact on its ability to deliver its priorities and objectives. This report enables Children, Education and Families Budget and Performance Monitoring Sub-Committee to scrutinise those risks and the actions taken to control them in line with Audit Sub-Committee recommendations.

2. RECOMMENDATIONS

2.1 Members are asked to note:

- i) The current Education, Care and Health Services' Risk Register and the existing controls in place to mitigate the risks.
- ii) The recommendation from the Executive, Resources and Contracts PDS Committee for relevant PDS Committees to monitor all high (red) risks at each of its meetings until they are no longer high risks.

Impact on Vulnerable Adults and Children

1. Summary of Impact: Not Applicable
-

Corporate Policy

1. Policy Status: Not Applicable
 2. BBB Priority: Excellent Council Safe Bromley Supporting Independence Healthy Bromley
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Not Applicable
 4. Total current budget for this head: £Not Applicable
 5. Source of funding: Not Applicable
-

Personnel

1. Number of staff (current and additional): Not Applicable
 2. If from existing staff resources, number of staff hours: Not Applicable
-

Legal

1. Legal Requirement: None: Not Applicable
 2. Call-in: Not Applicable: No Executive Decision
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Not Applicable
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

3. COMMENTARY

Background

- 3.1 Risk Management is the identification, analysis and overall control of those risks which can impact on the Council's ability to deliver its priorities and objectives. The Education, Care and Health Services Risk Register feeds into the Corporate Risk Register, via the Corporate Risk Management Group, and comprises the high level departmental risks which are underpinned by more detailed registers contained within the divisional business plans.
- 3.2 Audit Sub-Committee agreed that the Corporate and Departmental Risk Registers would be reviewed at their meetings twice a year and then subsequently scrutinised by the relevant PDS Committee. Internal processes require that the departmental risk registers be updated and agreed by the Departmental Leadership Team (DLT) on a quarterly basis and be reviewed by the Corporate Risk Management Group.
- 3.3 In line with recommendations from Audit Sub-Committee the ECHS risk register has been updated on a quarterly basis and agreed by ECHS Departmental Leadership Team. The Risk Register 2018/19 Quarter 2 update was agreed by ECH DLT in October 2018.
- 3.4 The Education, Care and Health Services Risk Register is attached as Appendix 1. The Education, Care and Health Services Risk Register is attached as Appendix 1. Members' attention is drawn to those risks of relevance to the Children, Education and Families Portfolio as detailed in the table below.

Risk Reference	Risk
1	Failure to deliver ECHS Financial Strategy
2	Failure to deliver effective Adult Social Care services
2a	Failure to deliver effective Learning Disability services
4	Recruitment and Retention
5	Failure to deliver effective Housing Needs services
5a	Temporary Accommodation
5b	Capital Grant
6	Inability to deliver an effective Public Health service
7	Business Interruption / Emergency Planning
8	Contracts and Service Level Agreements
18	Welfare Reform
19	Deprivation of Liberty Safeguards
20	Data Collections
22	Failure to deliver partial implementation of Health & Social Care Integration

- 3.5 Since June 2018, when this PDS last saw the Risk Register, there have been no changes to the gross and net (current) risks outlined above.
- 3.6 Mitigating actions have seen 5 high risks reduced to significant risk, all 3 significant risks reduced to medium risk and 1 medium risk reduced to low risk.

Level of Risk	Gross Risk		Net Risk	
	No.	%	No.	%
High	8	57%	3	21%
Significant	3	21%	5	36%
Medium	2	14%	4	29%
Low	1	7%	2	14%
Total	14	100	14	100

3.7 At its meeting on 5 September 2018, Executive, Resources and Contracts Policy Development and Scrutiny Committee requested that any risks marked as 'red' (high), needed to be presented to each meeting of the relevant PDS Committee for monitoring until they were no longer red. Accordingly a paper on 'red' (high) risks will be brought to this Sub-Committee at those meetings which do not include a full update of the Risk Register.

4. IMPACT ON VULNERABLE ADULTS AND CHILDREN

4.1 The controls already in place and the further actions outlined in the Risk Register mitigate against adverse impacts on vulnerable children.

5. POLICY IMPLICATIONS

5.1 There are no policy implications arising directly from this report. Any policy implications arising from the existing controls and the further action required to mitigate against the risks are reported to the Sub-Committee separately.

6. FINANCIAL IMPLICATIONS

6.1 There are no financial implications arising directly from this report. Any financial implications arising from the existing controls and the further action required to mitigate against the risks are reported to the Sub-Committee separately.

7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications arising directly from this report. Any personal implications arising from the existing controls and further action to mitigate against the risks are reported to the Sub-Committee separately.

8. LEGAL IMPLICATIONS

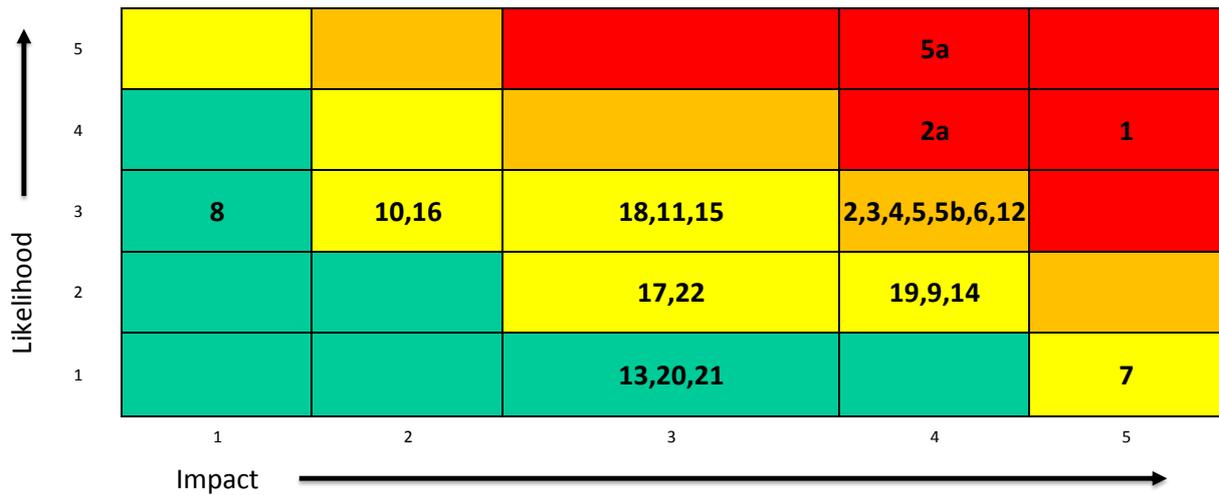
8.1 There are no legal implications arising directly from this report. Any legal implications arising from the existing controls and further action to mitigate against the risks are reported to the Sub-Committee separately.

9. PROCUREMENT IMPLICATIONS

9.1 There are no procurement implications arising directly from this report. Any procurement implications arising from the existing controls and further action to mitigate against the risks are reported to the Sub-Committee separately.

Non-Applicable Sections:	Not Applicable
Background Documents: (Access via Contact Officer)	Not Applicable

ECHS Risk Register



Risk Ref	Risk Description	Gross Risk Rating	Net Risk Rating
1	Failure to deliver ECHS Financial Strategy	25	20
2	Failure to deliver effective Adult Social Care services	16	12
2a	Failure to deliver effective Learning Disability services	16	16
3	Failure to deliver effective Children's services	20	12
4	Recruitment and Retention	20	12
5	Failure to deliver effective Housing Needs services	16	12
5a	Temporary Accommodation	20	20
5b	Capital Grant	16	12
6	Inability to deliver an effective Public Health service	16	12
7	Business Interruption / Emergency Planning	10	5
8	Contracts and Service Level Agreements	4	3
9	School Place Planning	12	8
10	Not in Education, Employment or Training (NEET)	6	6
11	SEND Transport	9	9
12	SEND Reforms	16	12
13	School Standards	4	3
14	Youth Offending	12	8
15	Out of Borough Placements (Children and Young People)	9	9
16	Foster Carers	8	6
17	Care Leavers' accommodation	9	6
18	Welfare Reform	12	9
19	Deprivation of Liberty Safeguards	12	8
20	Data Collections	9	3
21	30 hours funded childcare for three and four year olds of working parents	6	3
22	Failure to deliver partial implementation of Health & Social Care Integration	6	6

ECHS Risk Register

REF	DIVISION	RISK TITLE & DESCRIPTION (a line break - press shift & return - must be entered after the risk title)	RISK CAUSE & EFFECT	CATEGORY	GROSS RISK RATING (See next tab for guidance)			EXISTING CONTROLS IN PLACE TO MITIGATE THE RISK	CURRENT RISK RATING (See next tab for guidance)			FURTHER ACTION REQUIRED	RISK OWNER
					LIKELIHOOD	IMPACT	RISK RATING		LIKELIHOOD	IMPACT	RISK RATING		
1	All	Failure to deliver ECHS Financial Strategy	<p>Cause(s):</p> <ul style="list-style-type: none"> - Continual reduction in Central Government funding - Demographic changes - Increased demand for services - Demand led statutory services (c. 80% of operations) which can be difficult to predict - Increasing cost volatility due to rise of complex, high cost families or placements requiring services. <p>Effect(s):</p> <ul style="list-style-type: none"> - Lower than anticipated levels of financial resource - Failure to achieve a balanced budget - Failure to secure economy, efficiency, and effectiveness of use of resources leading to a Qualified Independent Auditors' Report - Objectives of the service not met - Reputation is impacted - Wider goals of the Council are not achieved 	Financial	5	5	25	<ul style="list-style-type: none"> - Budget monitoring and forecasting - Regular review of medium term strategy - Regular reporting to DLT and Members via the Committee reporting process - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Monitor demographics, economic indicators and develop insight into future demand - Match financial planning to Council priorities - Internal audit framework - Early intervention with service users - Constantly reviewing service operations for potential efficiencies - Developed a series of commissioning plans for Children's Social Care, Adult Social Care (Mental Health, Learning Disabilities and Older People) and SEND including mitigating actions addressing financial pressures - Growth and mitigation discussions - Service strategies in place to mitigate growth 	4	5	20	<ul style="list-style-type: none"> -Plans covering 10 projects in Children's Social Care went to the Corporate Commissioning Board in September 2018 outlining savings proposals to be implemented. -Plans are in place in Children's Social Care for improving sufficiency whilst reducing identified areas of budget. - Proposals for an increased supply of housing to mitigate the cost of temporary accommodation are being presented to RRH PDS for approval in November 2018. - Continue to monitor commissioning plans 	Ade Adetosoye, Janet Bailey, Sara Bowrey, Naheed Chaudhry, Paul Feven, Stephen John, Nada Lemic, Gillian Palmer.
2	Adult Social Care	Failure to deliver effective Adult Social Care services The Council is unable to deliver an effective adult social care service to fulfil its statutory obligations including the safeguarding of Adults	<p>Cause(s):</p> <ul style="list-style-type: none"> - Increasing demand - Above compounded by associated longer waiting lists leading to deteriorating condition and ultimately increased service user/ carer costs - Failure to deliver effective safeguarding arrangements - Failure to comply with statutory requirements including the Care Act <p>Effect(s):</p> <ul style="list-style-type: none"> - Impact on life chances and outcomes for service users - Failure to keep vulnerable adults safe from harm or abuse 	Legal, Reputation al	4	4	16	<p>Care Act - Redesigned processes, including amending forms, and operational procedures in place and Care Act compliance training</p> <p>Improved Better Care Fund - Programme overseen by the Interim Director of Programmes and the CCG</p> <p>Safeguarding - 1. Multi Agency Bromley Adult Safeguarding Board (BSAB) in place. 2. BSAB Training programme (E Learning and Face to Face). 3. Awareness training for vulnerable groups. 4. Care Act compliance training</p> <p>Recruitment - Dedicated HR programme of support in place to recruit social workers to front line posts</p> <p>Performance Monitoring Framework - Review of Performance Management Indicators</p> <p>Procurement and Contract Monitoring - Effective procurement framework and contract monitoring arrangements to ensure acceptable quality of service provision and value for money</p>	3	4	12		Director, Adult Social Care (Stephen John)
2a	Learning Disability Service	Failure to deliver effective Learning Disability services Failure to assess service users, establish eligibility criteria and carry out the review process.	<p>Cause(s):</p> <ul style="list-style-type: none"> - Failure to identify and meet service users' needs - Provision of service to ineligible clients - Provision of service prior to/without appropriate authorisation - Failure to manage the transition process of service users from Children's Services to Adult Services leading to increased risk of Judicial Review <p>Effect(s):</p> <ul style="list-style-type: none"> - Costs associated with Legal process - Ongoing care package costs as a result of Legal process outcome - Placement predictions leading to financial pressures (cross refer ECHS Budget risk) 	Legal, Reputation al	4	4	16	<ul style="list-style-type: none"> - Close monitoring of placements and eligibility criteria - Budget monitoring and forecasting - Regular review of medium term strategy - Regular reporting to DLT and Care Services PDS - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Hold provider to account for poor performance - Monitor demographics, economic indicators and develop insight into future demand 	4	4	16		Director, Adult Social Care (Stephen John)

ECHS Risk Register

REF	DIVISION	RISK TITLE & DESCRIPTION (a line break - press shift & return - must be entered after the risk title)	RISK CAUSE & EFFECT	CATEGORY	GROSS RISK RATING (See next tab for guidance)			EXISTING CONTROLS IN PLACE TO MITIGATE THE RISK	CURRENT RISK RATING (See next tab for guidance)			FURTHER ACTION REQUIRED	RISK OWNER
					LIKELIHOOD	IMPACT	RISK RATING		LIKELIHOOD	IMPACT	RISK RATING		
3	All Children's Social Care and Safeguarding Sections	Failure to deliver effective Children's services The Council is unable to deliver an effective children's service to fulfil its statutory obligations in safeguarding and protect those at risk of significant harm or death, sexual exploitation or missing from care	Cause(s): - Increasing demand - The Secretary of State could determine that the Council is failing to deliver its Children's Social Care services to an adequate standard and approve alternative delivery arrangements as the most effective way of securing and sustaining improvement. This arrangement could include the removal of service control from the authority. Effect(s): - Impact on life chances and outcomes for children	Legal, Reputational	4	5	20	- Multi Agency Bromley Children's Safeguarding Board (BCSB) in place and BCSB Training programme - Dedicated HR programme of support in place to recruit social workers to front line posts - Review of Performance Management Framework and Indicators - Effective procurement framework and contract monitoring arrangements to ensure acceptable quality of service provision and value for money - under review - Appointment of Deputy Chief Executive with Director of Children's Services responsibility (in post December 2016) - Appointment of Director, Children's Services (in post December 2016) - £950k available for immediate use to build capacity and £2.3m available on a recurring basis for Children's services - Quality Assurance Audit Programme Phase 2 - Children's Service Improvement Action Plan refocussed to ensure that Heads of Service and Group Managers are delivering the actions relevant to their teams - 15% of 306 actions outstanding. Phase 2 commenced 2018 - Key events and supporting material developed to ensure improving practice is at the heart of the organisation - Review of team structures completed - New process for authorising placements implemented - Continued reduction of caseloads & within Caseload Promise on average - Atlas Team reviewed and moved to MASH to improve safeguarding - Identified training plan for qualified social workers and other professionals reviewed and updated quarterly	3	4	12	Validation by Ofsted in forthcoming inspection.	Director, Children's Services Janet Bailey)
4	All	Recruitment and Retention Failure to recruit and retain key skilled staff with suitable experience/qualifications	Cause(s): - Failure to compete with other organisations to recruit the highest quality candidates to build an agile workforce - Small pool of experienced Social Workers, particularly children's Effect(s): - Failure to identify and meet service user needs - Provision of service to ineligible clients - Provision of service prior to/without appropriate authorisation - Lack of skill set results in an inability to deliver effective adults, children's and public health services to fulfil statutory safeguarding obligations, impacting on life chances and outcomes	Personnel	5	4	20	- Dedicated HR role to support managers in recruiting social workers to front line posts - Joint meetings held between HR and employment agencies to improve the quality and speed of locum assignments - Repromotion and review of the current Recruitment and Retention package - Repromotion of the 'no quit' policy - Recruitment drive to convert locums to permanent staff - Commissioning of improvements to the Council's recruitment web site to include a video virtual tour of the Council - Support in effectively managing staff performance - Provision of training measures to include targeted leadership and management training programmes including partners and other stakeholders - Tailored individual career plan for staff - Bespoke training for first line managers - Training and quality assurance of practice - Provision of regular monitoring information to feed into the corporate governance dashboard - Role on Recruitment and Retention Board - Dedicated HR worker to focus on Adult Social Care recruitment	3	4	12	- Review the recruitment/retention of housing and adult social care staff including packages for retaining staff	Director, Adult Social Care (Stephen John) Director, Children's Services (Janet Bailey) Director, Public Health (Nada Lemic) Director, Housing (Sara

ECHS Risk Register

REF	DIVISION	RISK TITLE & DESCRIPTION (a line break - press shift & return - must be entered after the risk title)	RISK CAUSE & EFFECT	CATEGORY	GROSS RISK RATING (See next tab for guidance)			EXISTING CONTROLS IN PLACE TO MITIGATE THE RISK	CURRENT RISK RATING (See next tab for guidance)			FURTHER ACTION REQUIRED	RISK OWNER
					LIKELIHOOD	IMPACT	RISK RATING		LIKELIHOOD	IMPACT	RISK RATING		
5	Housing Needs	Failure to deliver effective Housing Needs services The Council is unable to deliver an effective Housing Needs service to fulfil its statutory obligations	Cause(s): - very demand led - lack of trained staff - homelessness is increasing number and complexity of cases Effect(s): - Impact on life chances and outcomes for individuals and families in need of Housing Services - Reputational damage - Legal challenge	Legal	4	4	16	- Focus on preventing homelessness and diversion to alternative housing options through:- - Landlord and Tenancy advice support and sustainment - Assistance (including financial aid) to access the private rented sector - Access to employment and training - Debt, money, budgeting and welfare benefits advice, including assistance to resolve rent and mortgage arrears - Sanctuary scheme for the protection of victims of domestic violence - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Implementation of the More Homes Bromley initiative to ensure the supply reduces the reliance on nightly paid accommodation - Implementing the Homelessness Strategy - setting up the multi-agency Homelessness Forum and taking forward the priorities of the Strategy	3	4	12	- Seek new and alternative forms/supply of temporary accommodation - An options paper will be presented to Committee in November for the new supply of temporary and settled housing - Continue to develop partnership working with private sector landlords to assist households to remain in private sector accommodation - New incentive campaign for private sector landlords launched - Work innovatively with a range of providers to increase access to a supply of affordable accommodation - Monitoring impact of implementation of Homelessness Reduction Act	Director, Housing (Sara Bowrey)
5a	Housing Needs	Temporary Accommodation Inability to effectively manage the volume of people presenting themselves as homeless and the additional pressures placed on the homelessness budgets	Causes: - changes in government funding - rising number of placements (approx. 20 per month) Effect(s): - Failure to fulfil statutory obligations - Impact on life chances and outcomes for individuals and families in temporary accommodation - Increased risk of legal challenge due to provision of unsuitable accommodation (including shared accommodation) - Pressure on other services	Social	5	4	20	- Focus on preventing homelessness and diversion to alternative housing options through:- - Landlord and Tenancy advice support and sustainment - Assistance (including financial aid) to access the private rented sector - Access to employment and training - Debt, money, budgeting and welfare benefits advice, including assistance to resolve rent and mortgage arrears - Sanctuary scheme for the protection of victims of domestic violence - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Implementation of the More Homes Bromley initiative to ensure the supply reduces the reliance on nightly paid accommodation - Implementing the Homelessness Strategy - setting up the multi-agency Homelessness Forum and taking forward the priorities of the Strategy	5	4	20	- Seek new and alternative forms/supply of temporary accommodation - An options paper will be presented to Committee in November for the new supply of temporary and settled housing - Continue to develop partnership working with private sector landlords to assist households to remain in private sector accommodation - New incentive campaign for private sector landlords - Work innovatively with a range of providers to increase access to a supply of affordable accommodation - Monitoring impact of implementation of Homelessness Reduction Act - Complete tender process for modular homes supplier for temporary accommodation	Director, Housing (Sara Bowrey)

ECHS Risk Register

REF	DIVISION	RISK TITLE & DESCRIPTION (a line break - press shift & return - must be entered after the risk title)	RISK CAUSE & EFFECT	CATEGORY	GROSS RISK RATING (See next tab for guidance)			EXISTING CONTROLS IN PLACE TO MITIGATE THE RISK	CURRENT RISK RATING (See next tab for guidance)			FURTHER ACTION REQUIRED	RISK OWNER
					LIKELIHOOD	IMPACT	RISK RATING		LIKELIHOOD	IMPACT	RISK RATING		
5b	Housing Needs (Housing Strategy)	Capital Grant Failure to deliver the Council's affordable housing strategy in support of statutory obligations Lack of infrastructure in place where growth is occurring (Section 106 monies)	Cause(s): - Lack of availability of external capital grant (Housing Associations) to deliver key housing schemes - Lack of available suitable sites within the borough on which to develop new affordable housing schemes over the short to medium term Effect(s): - An inadequate supply of housing will lead to an inability to meet housing needs of a range of client groups in support of statutory housing and homelessness duties.	Social	4	4	16	- Lead negotiations on the affordable housing provision on section 106 applications, ensuring that the affordable housing obligation reflects local adopted planning policy and local statutory and high priority housing need - Determination at planning stage to ensure collection of obligations due - Conditions attached to funding received to ensure it is spent on preventing homelessness	3	4	12	- Review of proposed legislation as it develops - An options paper for capital funding for development will be going to Committee in November. - Additional measures will be explored once the Housing Strategy is developed.	Director, Housing (Sara Bowrey)
6	Public Health	Inability to deliver an effective Public Health service The Council is unable to deliver an effective Public Health service to fulfil its statutory obligations	Cause(s): Reduced budget which has led to funding cuts, reduced service and redundancies. Withdrawal of non-statutory services. Effect(s): - Increased clinical risk to patients and Bromley residents - Reputational risk to council - Gaps and potential blocks in health service between NHS and Local Authority	Professional, Legal, Reputational	4	4	16	- Working with partners including the CCG and Hospital Trust to jointly deliver Public Health functions and mitigate impact of cuts - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money	3	4	12	Plans for further integration of some functions and services with CCG	Director, Public Health (Nada Lemic)
7	All ECHS Divisions	Business Interruption / Emergency Planning Failure to provide Council services or statutory requirements of mass illness/fatalities scenario following a business interruption or emergency planning event	Cause(s): - Business Interruption could be caused by Loss of Facility (fire, flood etc.), Staff (illness, strike) or IT (cyber attack). - Mass fatalities or illness has a range of causes and this risk to the council could be caused by council staff being impacted resulting in failure to manage statutory requirements of mass illness/fatalities scenario (e.g. registering of deaths within timescales) Effect(s): - Business interruption - failure to deliver services, loss of customer / resident satisfaction. - Emergency planning - failure to deliver statutory duties.	Personnel, Reputational	2	5	10	Business Interruption - Civil protection and emergency planning policies in place at corporate level overseen by the Corporate Risk Management Group - Business Continuity Plans in place at service level - Contracts contain business continuity provision - Communication to all staff prior to all impending industrial action, informing of any possible service disruption as well as explaining implications of strike action for individual staff members Emergency Planning - Robust plans in place, including Outbreak Plan, Flu Plan and Pandemic Flu Plan - Alert system via the South East London Health Protection Unit (SEL HPU) - Annual Flu vaccination programme in place - Introduction of Humanitarian and Lead Officer (HALO) role	1	5	5		ECHS DLT
Page 49	All ECHS Divisions	Contracts and Service Level Agreements Failure to effectively procure and/or manage key contractors or partners, leading to the department being unable to deliver key services, including attracting appropriate contractors or partners to deliver services	Cause(s): - Failure of provider - Provider withdrawing from the contract Effect(s): - Failure to deliver required quality/quantity/value for money services	Contractual, Partnership	4	1	4	- Timely and effective procurement process - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Business Continuity plans - Contracts Sub-Committee established (a sub-committee of the Executive and Resources PDS Committee which considers a range of contracts issues including legal requirements, contract clauses and contract management to ensure value for money). - Traffic light system in use to assess the current status of each procurement project, as part of the Corporate Contract Management System) and any projects with a red status are tracked and reported to fortnightly divisional management team meetings - Commissioners and Procurement and Contract Compliance staff implement recovery plans for projects with red status alerts in order to mitigate all risks and to ensure that the department operates within financial regulations	3	1	3	- Ensuring appropriate adjustment of prices following introduction of the National Living Wage	ECHS DLT

ECHS Risk Register

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9	Education	School Place Planning Failure to meet the statutory requirement to ensure sufficient school places to meet the needs of the population in the area	Cause(s): - Failure to secure sufficient Primary and Secondary school places in the area - Failure to secure sufficient educational placements for children with disabilities and special educational needs - Failure to secure sufficient alternative provision Effect(s): - Disruption to the education of children and impact on their life chances	Political, Legal, Professional	3	4	12	- Strategic needs analysis (birth rate, dwelling stock and migration) to project demand - Review analysis of demand annually - SEN sufficiency strategy will inform long term planning of specialist provision - Implement Basic Need and PSB programmes - Maintain relationships with ESFA	2	4	8	- Keep under review the provision of places for September 2019 at Bullers Wood School for Boys	Director, Education (Gillian Palmer)
10	Children's Social Care	Not in Education, Employment or Training (NEET) Failure to meet requirements of Education, Care and Skills Act 2008 - duty on all young people to participate in Education, Employment or Training until their 18th birthday	Cause(s): - Lack of control over Academies Effect(s): - Disruption to Education - Impact on life chances for young people	Professional, Legal	3	2	6	- Provision offered by Bromley Youth Support Programme (BYSP) - Advice and Guidance Drop in sessions - One to one support - Looked After Children NEET support - YOT NEET support - Provision offered by Bromley Education Business Partnership (BEBP) - Bromley Youth Employment Scheme (YES) - Bromley Flexible Learning programme - Mentoring programme - Skills Xtra - Work experience for Children Looked After - Tracking service in conjunction with South London CCIS Service - 'Door knocking' - Additional NEET worker started, based in Leaving Care service - a 4 year pilot programme, in partnership with Lewisham and Greenwich, providing support for care leavers most at risk of NEET.	3	2	6		Director, Children's Services (Janet Bailey)
11	Education	SEND Transport Failure to provide appropriate home to school transport assistance for children and young people with special educational needs and disabilities	Cause(s): - Fluctuating demand year on year - Rising numbers of children meeting criteria for transport provision and associated increase in costs Effect(s): - Disruption to education - Impact on life chances and outcomes for children and young people	Legal Financial	3	3	9	- Budget monitoring and forecasting - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Travel Training Programme - Route review and rationalisation - Gateway review to improve efficiency	3	3	9	Review of policy	Director, Education (Gillian Palmer)

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12	Education	SEND Reforms Failure to meet expectation of SEND reforms	Cause(s): - Ineffective and inaccurate identification of SEND - Failure of schools to make reasonable adjustments to meet needs of individual children and young people - Failure to provide appropriate and effective support for children with identified needs and their schools - Pattern of provision which does not meet the needs of the local population resulting in placements in independent schools Effect(s): - Costs associated with the Legal process - Escalating cost of provision - Impact on education and life chances of children and young people	Financial Legal Professional	4	4	16	- SEND4Change completed a root and branch review of Bromley's response to SEND reforms - An Improvement Plan agreed for 2018/19 - Transfer of statements to EHC Plans completed March 2018 - SEN service realigned to improve decision making and management oversight	3	4	12	- Readiness for SEND inspection monitored - QA programme for placements in independent schools to be implemented - Realignment of advisory teams in progress to increase capacity to support mainstream schools to meet a wider range of needs - Bromley Teaching Schools leading SEN training collaborative to support school improvement.	Director, Education (Gillian Palmer)
13	Education	School Standards Failure to meet duty to promote educational achievement of all children	Cause(s): - Abdication of responsibility for outcomes for all children - Failure to use available intelligence to recognise when schools are letting children down - Failure to intervene effectively when schools let children down Effect(s): Impact on life chances and outcomes for children and young people	Political Legal Professional Reputational	1	4	4	- Improve collation and analysis of information about performance of schools and outcomes for children - Establish pathways to challenge and support school improvement and outcomes for children - Maximise every contact with schools to balance lack of school improvement and resources - Relationship with teaching schools to support school improvement	1	3	3		Director, Education (Gillian Palmer)
14	Children's Social Care	Youth Offending Failure to deliver effective youth offending services to protect children and young people and reduce their vulnerability	Cause(s): - Increase in youth offending Effect(s): - Impact on life chances and outcomes for children - Failure to protect the public and actual or potential victims (assessment of risk to others and planning to manage the risk and protect the public)	Professional Reputational	3	4	12	- Learning from the Youth Justice follow up Inspection of February 2017. Action plan developed, fortnightly Improvement Board implemented to ensure action plan carried out. - Improved inspection result - Good in 2017 - Implementation of Strategic Plan 2017/19 - Youth Justice Board self-assessment audit of National Standards - 2 moderation exercises carried out and YJB assured that this reflected service standards - Bi-monthly audits with quality assurance check by SIT Team - Monthly YOS performance meeting to review national KPIs, act upon trends and drive improvement plan - Triage support to divert low level offenders from YJS - Packages of support to manage young people's risk appropriately in the community for those who are sent to custody. YOS Partnership Improvement Board is overseeing the Improvement Plan	2	4	8		Director, Children's Services (Janet Bailey)
15	Children's Social Care	Out of Borough Placements (Children and Young People) Inability to reduce reliance on out of borough placements Financial implications	Cause(s): - Failure to provide/commission sufficient local placements for children with disabilities and children in care Effect(s): - Cost implications of out of borough placements (Cross refer ECHS Budget risk) - Impact for children's welfare and development	Professional Financial	3	3	9	- Close monitoring of placements and eligibility criteria - Budget monitoring and forecasting - Regular review of medium term strategy - Effective contract monitoring arrangements to ensure acceptable quality of service provision and value for money - Monitor demographics, economic indicators and develop insight into future demand - Out of borough officer in Placements Team reviewing OOB placements and those placed in Bromley from other authorities - Tendering for 9 bedded unit to reduce OOB placements	3	3	9	- Carrying out a review of how to move this forward. - The feasibility for a 9 bedded unit to reduce OOB placements is being reviewed - following the lack of tenders being submitted, conversations are being held with individual providers.	Director, Children's Services (Janet Bailey)

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16	Children's Social Care	Foster Carers Failure to meet the statutory requirement to ensure sufficient local placements to satisfy need	<p>Cause(s):</p> <ul style="list-style-type: none"> - Failure to recruit sufficient carers, particularly for adolescents, siblings, disabled children, parent and child placements, and BME children <p>Effect(s):</p> <ul style="list-style-type: none"> - Lack of suitable carers from independent foster care sources leading to the arrangement of more expensive alternatives - Impact on life chances and outcomes for children 	Professional	4	2	8	<ul style="list-style-type: none"> - Reviewed and refreshed recruitment strategy - dedicated fostering recruitment officer appointed - Reviewed and refreshed Fostering web pages including rebranding and improved navigation - Carried out two borough wide leaflet distributions, via council tax information and environmental information - Publicity on buses and petrol station pumps - Appointed 26 new foster carers between July 17 - February 2018 - Awarded first Kite Mark in country for fostering - Monthly drop in sessions being held closer to foster carer homes within Children and Family Centres - Support to SGO carers provided in C&F Centres - Out of hours fostering support commenced in July 2018 - Coram psychologist accessible to carers 2 days a week - Support for grandparents and other family members who are providing full time care through Grandparents Plus - Joint training of social work professionals and foster carers - Head of Service attending Fostering Network Groups - Fostering and Adoption Panels merged in January 2018 	3	2	6	<ul style="list-style-type: none"> - Head of Service to lead on the development of improved support and training packages for Foster carers to enable them to Care for children and young people with complex needs and/or challenging behaviour 	Director, Children's Services (Janet Bailey)
17	Housing Needs	Care Leavers' accommodation Failure to provide a sufficient range of safe and suitable housing for care leavers	<p>Cause(s):</p> <ul style="list-style-type: none"> - Failure to appropriately risk assess housing provision offered to care leavers <p>Effect(s):</p> <ul style="list-style-type: none"> - Impact on life chances and outcomes for Care Leavers 	Legal	3	3	9	<ul style="list-style-type: none"> - Review of all young people in B&B accommodation (post 18 years) undertaken - no young people housed in B&B. - Pathway plans updated to ensure appropriate support provided in relation to health and education needs. - Full strategic needs assessment of Bromley's young people's accommodation needs funded by DCLG commissioned from St Basils (a specialist service in young people's housing) to inform future decision making and help streamline the housing pathway. - BIS team to work closely with colleagues in the Housing Teams (S&R and Allocations) to review the housing pathway for care leavers and to identify suitable accommodation options for care leavers. - Homelessness strategy reviewed, including the priority of housing all young people. - Develop a policy for vulnerable homeless and care leavers as part of the homelessness strategy, outlining the housing pathways, all placement options and alternatives to bed and breakfast accommodation. - Develop and implement a risk assessment framework for care leavers to be used before any placement in new accommodation. - Amend the wider housing policy to ensure it aligns to the new care leaver placement strategy - The BIS Team to adopt the risk assessment tool in practice to ensure that all accommodation to be provided to care leavers is assessed for its suitability, as a safe and secure base, prior to the placement being commissioned. 	2	3	6	<ul style="list-style-type: none"> - A Gateway report will go to Committee in October for tendering the Care Leavers Accommodation Service 	<p>Director, Housing (Sara Bowrey)</p> <p>Director, Children's Services (Janet Bailey)</p>
Page 52	Housing Needs	Welfare Reform Impact of Welfare Reform legislation (including Universal Credit).	<p>Cause(s):</p> <ul style="list-style-type: none"> - Universal Credit payments commenced on 18th January 2016 in Bromley for single people only. From this time, there is no separate Housing. - Benefit payment direct to the Landlord - Further roll out planned for 2018 which will increase the impact of this reform <p>Effect(s):</p> <ul style="list-style-type: none"> - Increased Rent Arrears - Subsequent evictions and landlords reluctant to rent properties to claimants. 	Social	4	3	12	<ul style="list-style-type: none"> - Notification, advice and support provided through:- - Housing Association transfers - Negotiations with landlords - Budgeting/debt advice - Moves to cheaper areas - Prevention grants/welfare fund/Credit union loans and savings - Access to child care and employment - Awareness raising campaign for Universal Credit Digital rollout and monitor impact from July 2018. - Structures to support changes are in place and will be reviewed in autumn 2018. 	3	3	9	<ul style="list-style-type: none"> - Work in partnership with Housing Benefit, the DWP, partner landlords and Social Care to minimise the impact of the Welfare Reform Act 	Director, Housing (Sara Bowrey)

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19	Adult Social Care	Deprivation of Liberty Safeguards Failure to prevent unlawful deprivation of liberty	Cause(s): - Risk increased due to change in legislation increasing scope. Effect(s): - Failure to comply with statutory requirements pursuant to Section 4 and paras 129, 180 and 182 of Schedule A of the Mental Capacity Act 2005 (as amended to incorporate the Deprivation of Liberty Safeguards 2009)	Legal	3	4	12	- Core administrative function maintained - Framework in place to deliver the functions of the Best Interest Assessor and the 'Section 12' Doctor - Rolling out training for all social workers to become Best Interest Assessors - Reviewed IR 35 agreement to manage response to demand	2	4	8	-Awaiting outcome of legislative change	Director, Adult Social Care (Stephen John)
20	Strategic & Business Support Services	Data Collections Failure to undertake statutory statistical data collections; including pupil census, attainment data and key adults' and children's social care information, thereby adversely affecting government grant allocations and performance assessments	Cause(s): - Business Interruption Effect(s): - Failure to commission effectively - Adverse impact on the timing and quality of decision making	Data and Information	3	3	9	- Schedule of statutory returns has been incorporated into the Performance and Information team's work programme - Specialist members of the team for each area - Other staff trained to provide 'back up' for specialist members of the team - Good project planning in place to co-ordinate all data collections including contributions from other services	1	3	3		Assistant Director, Strategic and Business Support Services (Naheed Chaudhry)
21	Education	30 hours funded childcare for three and four year olds of working parents The Council is unable to provide sufficient places within the local sector to fulfil its Statutory Duty	Cause(s): - Insufficient places within local sector resulting in Local Authority failure to meet its statutory duty - Inability to implement a suitable IT system which supports efficient and timely processing of funding claims Effect(s): - Parental dissatisfaction - Official notification from DfE regarding failure to fulfil statutory duty - Delays in payment to providers, destabilising local businesses.	Political, Reputational	2	3	6	- Work to stimulate the market is increasing capacity overall although some local pockets of pressure remain - Monitor eligibility, confirmations and take up of places to predict growth of demand - Work carried out with IT provider to ensure best fit IT solution within deadlines	1	3	3		Director, Education (Gillian Palmer)
22	Programmes	Failure to deliver partial implementation of Health & Social Care Integration Plans are not in place to deliver partial integration by 2020	Cause(s): - Difficulty in achieving rapid change in a system as complex as health and social care - Rising social care costs due to ageing population and people living longer with increasing complex needs - Difficulties with agreeing budgets (given likely funding reductions going forward), complex governance arrangements and workforce planning - Need to focus on collaborative working (cultural differences) - Pressure for social care services to be accessible 7 days a week in terms of our own workforce and contracts with external providers in line with NHS priority to deliver 7 day working across the health sector - LBB will need to contribute to a whole system review (led by BCCG) to ensure that funding follows the patient Effect(s): - Failure to deliver statutory duties - Failure to achieve our Building a Better Bromley priorities	Financial Reputational Compliance /Regulation	2	3	6	- A draft 2020 integration plan for health and social care integrated service delivery and commissioning across the borough was developed by May 2018 by ECHS/BCCG - Continued work with health partners to deliver the main transformation programmes eg Bromley Well and the transformation of prevention - Building on the work already delivered through S75 agreement with Oxleas and being implemented through the Better Care Fund workstreams eg Winter Resilience work, Transfer of Care Bureau, Integrated Care Records and Discharge to Assess - New governance structure between LBB and BCCG feeding into the Health and Wellbeing Board via the Integrated Commissioning Board (strategic) and Commissioning Network (operational)	2	3	6		Director, Programmes (Paul Feven) Director, Integrated Commissioning- BCCG Graham Mackenzie

Risk Assessment Guidance

Likelihood	Almost Certain (5)	5	10	15	20	25	<table border="1" style="margin-left: 20px;"> <tr><td style="background-color: red;">15+</td><td>High Risk - review controls and actions every month</td></tr> <tr><td style="background-color: orange;">10 - 12</td><td>Significant Risk - review controls and actions every 3 months</td></tr> <tr><td style="background-color: yellow;">5 - 9</td><td>Medium Risk - review controls and actions every 6 months</td></tr> <tr><td style="background-color: green;">1 - 4</td><td>Low Risk - review controls and actions at least annually</td></tr> </table>	15+	High Risk - review controls and actions every month	10 - 12	Significant Risk - review controls and actions every 3 months	5 - 9	Medium Risk - review controls and actions every 6 months	1 - 4	Low Risk - review controls and actions at least annually
	15+	High Risk - review controls and actions every month													
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	1 - 4	Low Risk - review controls and actions at least annually													
Highly likely (4)	4	8	12	16	20										
Likely (3)	3	6	9	12	15										
Unlikely (2)	2	4	6	8	10										
Remote (1)	1	2	3	4	5										
		Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)	Impact								

Risk Likelihood Key					
	Score - 1	Score - 2	Score - 3	Score - 4	Score - 5
	Remote	Unlikely	Possible	Likely	Definite
Expected frequency	10 - yearly	3 - yearly	Annually	Quarterly	Monthly

Risk Impact Key					
Risk Impact	Score - 1	Score - 2	Score - 3	Score - 4	Score - 5
	Insignificant	Minor	Moderate	Major	Catastrophic
Compliance & Regulation	Minor breach of internal regulations, not reportable	Minor breach of external regulations, not reportable	Breach of internal regulations leading to disciplinary action Breach of external regulations, reportable	Significant breach of external regulations leading to intervention or sanctions	Major breach leading to suspension or discontinuation of business and services
Financial	Less than £50,000	Between £50,000 and £100,000	Between £100,000 and £1,000,000	Between £1,000,000 and £5,000,000	More than £5,000,000
Service Delivery	Disruption to one service for a period of 1 week or less	Disruption to one service for a period of 2 weeks	Loss of one service for between 2-4 weeks	Loss of one or more services for a period of 1 month or more	Permanent cessation of service(s)
Reputation	Complaints from individuals / small groups of residents Low local coverage	Complaints from local stakeholders Adverse local media coverage	Broader based general dissatisfaction with the running of the council Adverse national media coverage	Significant adverse national media coverage Resignation of Director(s)	Persistent adverse national media coverage Resignation / removal of CEX / elected Member
Health & Safety	Minor incident resulting in little harm	Minor Injury to Council employee or someone in the Council's care	Serious Injury to Council employee or someone in the Council's care	Fatality to Council employee or someone in the Council's care	Multiple fatalities to Council employees or individuals in the Council's care

<p>Risk Management is an important element of the system of internal control. It is based on a process designed to identify and prioritise risks to achieving Bromley's policies, aims and objectives.</p> <p>The Risk Management process is a continuous cycle:</p> <p>Using your objectives Identify your risks> Assess your risks > Control your risks> Monitor and Review your risks.</p> <p>Useful definitions:</p> <p>Risk Management is the identification, analysis and overall control of those risks which can impact on the Council's ability to deliver its priorities and objectives.</p> <p>Risk is the chance of something happening which will have an impact on objectives.</p> <p>The message is that if you don't manage your risks then you are unlikely to achieve your objectives</p>	<p>Brainstorming session using IE&E plans and departmental objectives, to identify threats and opportunities.</p> <p>Useful analytical tools:</p> <p>Political Economic Social Technological Legal Environmental</p> <p>PESTLE provides a simple and useful framework for identifying and analysing external factors which may have an impact on your service.</p> <p>Strengths Weaknesses Opportunities Threats</p> <p>Using the PESTLE output SWOT is a technique that can help a service to focus on areas for improvement and opportunities that could be pursued.</p> <p>Remember if it can go wrong it will go wrong.</p>	<p>We use a 5 x 5 matrix to assess risks (see Risk Assessment Guidance tab).</p> <p>Risk is scored using a traffic light system:</p> <p>Red = High Amber = Significant Yellow = Medium Green = Low</p> <p>There are two risk variables that make up the overall risk rating:</p> <p>Impact – how minor / severe is it when it happens?</p> <p>Likelihood – how likely is it / how often does it happen?</p> <p>The Risk Management Toolkit provides detailed guidance on how to score these.</p> <p>Some of these assessments can be based on past experience. In other cases you will need to take a view.</p> <p>We measure both gross risk (before any controls are taken into account) and net or residual risk.</p>	<p>Consider the controls you have in place to mitigate or reduce the risk.</p> <p>What further controls are required? Record these as actions until they are completed.</p> <p>Consider the cost of any controls against the potential benefit gained.</p> <p>What is our Risk Appetite? An element of risk is unavoidable or we would never do anything!</p> <p>AVOID a risk – stop doing the activity</p> <p>REDUCE a risk – put additional controls in place</p> <p>TRANSFER a risk – by insuring or passing the risk to a third party</p> <p>TAKE a risk – monitor to ensure the impact and likelihood do not change</p> <p>Risk of service failure can be minimised by ensuring effective Business Continuity Plans are in place. For guidance contact Laurie Grasty x4764..</p>	<p>Risks should be reviewed at least annually and whenever your business plans change.</p> <p>Remember risks evolve and change over time. Are the controls still effective?</p> <p>Your aim should be to:</p> <p>Manage threats that may hinder delivery of priorities and maximise opportunities that will help to deliver them.</p> <p>The Bromley Risk Register is maintained centrally by Audit and includes details of the risks, risk owners, controls and actions. Contact James Newell x4842.</p> <p>Further guidance on Risk Management can be found in the Managers' Toolkit on onebromley. This also provides links to the Risk Management Strategy, Risk Management Toolkit and Risk Register.</p> <p>The site also provides a link to the Health and Safety Unit who carry out H&S risk assessments. For guidance contact the Corporate Safety Advisor Charlotte Faint x7584.</p>
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