

**Risk Register - Norfolk County Council**

Risk Register Name		Adult Social Care Departmental Risk Register											Red							
Prepared by		Sarah Rank and SMT											Amber							
Date updated		December 2017											Green							
Next update due													Met							
Service	Risk number	Risk name	Risk Description	Date entered on risk register	Original Likelihood	Original Impact	Original Risk Score	Current Likelihood	Current Impact	Current Risk Score	Tasks to mitigate the risk	Progress update	Target Likelihood	Target Impact	Target Risk Score	Target Date	Prospects of meeting Target Risk Score by Target Date	Risk Owner	Reviewed and/or updated by	Date of review and/or update
C	Adults Services	RM023	Failure to understand and act upon changes to demography, funding, and government policy. Cause: Changes to demography, funding, and government policy. Event: The Council fails to plan and adapt to change effectively for the future. Effect: Outcomes for Norfolk citizens may worsen.	18/08/2017	5	5	25	4	5	20	1) Implementation of Promoting Independence Strategy. This strategy is shaped by the Care Act with its call to action across public services to prevent, reduce and delay the demand for social care. The strategy aims to ensure that demand is understood and managed, and there is a sustainable model for the future. 2) As part of the strategy, a shift of spend towards targeted prevention, reablement services, enablement, and strengthened interim care. 3) Implementation of Better Care Fund plans which promote integration with the NHS and protect, sustain and improve the social care system. 4) A new set of NCC corporate priorities which aims to address longer-term demand management in children's and adult services.	1) Promoting Independence change programme established. First set of change activities prioritised and agreed; robust and extended (to 5 years) target demand model in place to model scenarios and set volume and saving targets. 2) Business cases for change prioritised to address key shifts which need to be made; underpinned by and aligned to commissioning and de-commissioning. Critical enabler is embedding strengths-based practice. 3a) Initial plans for investment of additional Better Care Fund monies discussed with Health and Wellbeing Board; clear alignment with Promoting Independence and STP expectations. Significant delays in publication of national guidance on BCF which has delayed production of a local two year BCF Plan. When finalised this will include an Integration Plan with objectives linked to STP. 3b) Performance management arrangements for the BCF to provide additional assurance and progress on shared BCF targets including reablement, and reductions in residential care. 4) Analysis of workload patterns across adults social services; agreement by Adults committee to invest in additional social work capacity and recruitment launched. Critical enabler is embedding strengths-based practice; innovation site began on 12th September 2017, with two further sites to be rolled out.	2	4	8	31/03/2020	Amber	James Bullion	Debbie Bartlett	05/12/2017
C	Adult Services (Lead Director) Shared Re-procurement of social care system for Adults, Children's and Finance Departments -	RM019	Failure to deliver a new fit for purpose social care system on time and to budget.	24/02/2016	4	5	20	3	5	15	1) Ensure effective governance is in place 2) Set up a project team to manage the project. 3) Determine go live dates for Adults Services, Children's Services, and Finance. 4) Deliver implementation of the new system 5) Complete User Acceptance and Data Migration Testing 6) Deliver change and training	1a) Clear governance is in place. The Project Sponsors are Janice Dane (Adults), Debby McKechnie (Children's) and John Baldwin (Finance). This is overseen by CLT: a Programme Board was set up to replace JLAG (Joint Leadership Advisory Group) including the Directors of Adults, Children's and Finance and Commercial Services. 1b) There are weekly Joint Leadership Advisory Group (JLAG) Lead sessions with the Project Sponsors and the Project Team; and regular updates to Adults Committee and to CLT. 2) A core Project Team has been up and running since January 2016 (with strong practitioner involvement). A network of champions has been established in Adult Social Services and Children's Services. 3) Adults and Finance successfully went live on 22 November 2017 and Children's and Finance are planned to go live in March 2018. 4) Delivery of implementation is proceeding in line with the plan. Adults and Finance Go Live - Considering the scale of the change that has happened, requiring some significant changes to behaviours in staff and managers, this process has been relatively smooth. Payment and billing runs have been made from the system and approximately 70 providers are using the Provider Portal. A support helpdesk is up and running in a central location. 5) Children's and Finance -For the social care and early help part of the system the third round of testing was completed on 21 November and for the finance part of the system the iterative cycle of build and test will continue until mid-December. The Children's half of the programme is approaching the implementation phase once the fourth round of testing is completed in mid-January 2018. After this point the class room training will commence, the dry run of the go live process will be completed with the go live and manual migration work will commence w/c 19 March. 6) Final preparations are underway to set-up the e-learning and training enrolment process for Children's.	1	4	4	30/04/2018	Green	James Bullion	Janice Dane	05/12/2017
C	Adult's Services	RM014b	The savings to be made on Adult Social Services transport are not achieved.	04/11/2015	3	3	9	3	3	9	1) Whilst we have managed to achieve £0.487m of the budgeted savings, as we were unable to achieve the savings in full, the savings have been reprofiled to future years (2017/18 and 2019/20). 2) A review of transport is also taking place. 3) Transport Guidance has been updated in line with the revised transport policy 4) Refurbishment of a site in Thetford to provide day services and respite care to prevent people from having to travel long distances. 5) Under the Younger Adults of the Promoting Independence Workstream, we're developing a joint approach to disability and transition from Children's to Adults. 6) Exploring the use of an application to help with monitoring of the cost of transport. This application is currently being used by Children with Special Educational Needs.	1) Adult Social Care Committee agreed on 4 September 2017 to amend the transport savings to £0.700m in 2018-19 (from £3m) and £1m in 2019-20 (from £0.800m) and that the difference of £2.1m in savings will be made through the purchase of care budget as a result of changes to patterns of care. 2) Travel Independence Training Across the Nation (Titan) training is being rolled out. Have recruited to ASS specific posts to enable more people to use public transport. 3) The revised Transport Guidance and Policy was agreed by ASC Committee on 6 March 2017 and shared with staff. This is being implemented for new service users now and for existing people at the point of review. This now links with the work on assessments and reviews as part of the Promoting Independence Programme. It appears that this is being embedded in working practices, given the forecast underspend on transport. 4) The department has been advised that there is potentially scope for the development of the Elm Road site on a bigger scale. In light of this, the review of Learning Difficulties day services and the potential new opportunities this could lead to, the department is reviewing the Elm Road project. 5) This is currently being developed. We have carried out the fieldwork to understand the current transition process from Children's services to Adult services. We have taken a joint approach and carried out 50 interviews with senior stakeholders from children's services, adult services and health, as well as meeting with transition workers, team managers and other key staff from children with disability teams, looked after care teams, leaving Care teams, Adult LD, Adult mental health and adult Physical disability team.	2	2	4	31/03/2020	Green	James Bullion	Janice Dane	05/12/2017

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												We have also engaged with NSFT Youth Service for their views, and will be incorporating the views of young people who have been through transition. We also made a visit to the Transition service used by Essex Social Services team, and learning from this will be incorporated into the overall review. Transition review interviews will be completed by early October and then an overview of the findings will be drawn up to be shared as part of a Transition planning workshop in early November. The aim of this workshop is to look at the key findings and plan options going forward. The output of this phase will be to draw up a current state report and to identify options to explore what a new service might look like. The plan is to complete this report by the end of December. 6) IMT have developed the first version of a Transport application for use by Adult Social Services and Travel and Transport where you can see for each day centre where people are travelling from, whether they are travelling alone/with others and which day services other people charged to that budget code are going to. It is based on an application IMT developed for Children with Special Education Needs. The application looks useful, and provides a clearer picture of transport provision than analysing pages of reports. The department is checking the viewer application and it will be trialled with Business Support initially.															05/12/2017
D	Finance	RM13926	Failure to meet budget savings	If we do not meet our budget savings targets over the next three years it would lead to significant overspends in a number of areas. This would result in significant financial pressures across the Council and mean we do not achieve the expected improvements to our services	30/04/2011	3	5	15	4	5	20	1) Efficiency and savings targets are being managed through the Promoting Independence Programme Board and the Finance and Performance Board. 2) Monthly monitoring, locality team meetings and continued development of forecast to ensure timely focus on key budgets and any emerging issues 3) Norsecare Liaison Board to develop and monitor delivery of savings related to the Norsecare contract 4) County Council agreed budget for 2017-18 included investment and reprofiling of savings to future years 5) Senior and concerted focus on transforming the LD service.	1) Promoting Independence programme of work refreshed and delivery plan developed. Target demand model complete and focussed work on entry points, processes for older people and younger adults, cross-cutting behavioural change and commissioning projects. 2) Finance and Performance Board have moved to a panel style approach providing senior management scrutiny along with locality finance meetings. Mid year close down undertaken to improve accuracy of forecast. 3) Work continues with Norsecare to deliver savings. 4) Additional social care funding has been received and plans agreed by NCC and health partners. In addition to funding to support protection of social care and to support market stability, there are invest to save projects that will both support discharge from hospital and wider demand management. 5) Reshaped management of the LD service and dedicated younger adults workstream within the PI programme 6) Norfolk Future's programme in place, including Promoting Independence for vulnerable adults, smarter information and advice, towards a Norfolk housing strategy, Digital Norfolk, Commercialisation and Local Service Strategy. The programme will provide further support for delivery of savings.	3	5	15	31/03/2018	Red	James Bullion	Susanne Baldwin	05/12/2017						
D	Locality and hospital teams	RM13931	A rise in acute hospital admissions and discharges and pressure on acute services.	A significant rise in acute hospital admissions / services would certainly increase pressure and demand on Adult Social Care. Potential adverse impacts include rise in Delayed Transfers of Care (DTOCs), pressure on Purchase of Care spend, assessment staff capacity and NCC reputation.	30/06/2011 revised 21/04/2016	3	4	12	4	4	16	1) Integrated structure between NCC and NCHC allows AD's to make quick decisions and to flex resources to minimise impact. 2) Integration programme developing new approaches to reduce delays and prevent admissions 3) Daily participation in whole system escalation process. 4) DTOC Improvement Plan is now in place 5) Senior manager oversight of emerging issues. 6) Careful management of reputational risk.	1) Daily Capacity mapped and monitored and given high priority. 2) Build on delivery in phase 2, real emphasis on where we can achieve most benefit to the individual receiving our services and link to the wider strategic agenda. Within Phase 3 we are concentrating on flow and capacity and working closely with the Promoting independence team to alter the bed based offer for short term placements. Also the introduction of accommodation based reablement beds across Norfolk will aid the flow from the acute and community hospitals and reduce strain on the purchase of care budget and assist the department to meet DTOC targets. 3) Work closely with health colleagues on silver calls. 4) The DTOC Improvement Plan includes weekly meetings to monitor the figures and to take action as required. 5) Director of Integrated Care coordinates senior manager oversight to effectively manage issues. 6) SMT presence at A&E delivery Board which helps to improve reputation.	2	3	6	31/03/2018	Amber	James Bullion	Lorrayne Barrett	05/12/2017						
D	SMT	RM14237	Deprivation of Liberty Safeguarding	Following the Cheshire West ruling it has been identified that we're not meeting our responsibilities around Deprivation of Liberty Safeguards (DoLS). This could lead to us being judicially reviewed.	08/05/2015	3	4	12	4	4	16	1) Reviewed staffing compliment 2) Reviewed processes and systems to ensure cases are dealt with in a timely manner. 3) Improved data quality and reporting to allow cases to be monitored. 4) Implementation of Liquid Logic may impact whilst staff become used to a new system.	1) Limited DoH grant funds remain. Remaining Best Interest Assessor (BIA) post is only for 6 months. SCCE have therefore agreed to receive referrals from April 18. This will free up DoLS staff as they currently manage their own referral line. These staff will be used to undertake reviews on the outstanding work. 1b) Relief BIA employment is being sought and BIA staff on rota will be used to undertake review work. 2) Processes and systems are working well to manage priority decisions. 3) There is currently one legal challenge and two potential – but all are around objection to the DoLS and not NCC process.	2	4	8	31/03/2018	Red	Lorna Bright	Alison Simpkin	05/12/2017						
D	Finance	RM14262	The potential risk of shortfall between funding and pressures through integration of capital and revenue funding between the Council, health organisations and district councils	The integrated health and social care agenda has seen pooling of capital and revenue resources through the Better Care Fund and further policy drive to manage the transfer of people with learning disabilities from inpatient settings to community settings. There is a risk that this will have a negative impact on available resources for delivery of adult social care	16/06/2016	3	5	15	3	5	15	1) Section 75 agreements to manage forward planning and joint arrangements 2) Partnership Boards in place attended by NCC. 3) Transforming Care Plan project in place and NCC involvement on all workstreams. 4) Introduction of the Improved Better Care Fund including planned use for additional social care grant.	1) Section 75 agreements to be renewed for 17/18 once final allocations and detailed BCF guidance is received. 2) Consolidated Better Care Fund Programme Board is in place. BCF plans in place and signed off. 3) Transforming Care Plan programme in place and baseline completed. Progress achieved with moving people from inpatient settings to community placements. Further work completed on joint protocols, which have not been agreed. Work is progressing to develop criteria in line with operational processes. 4) The introduction of the Improved BCF from April 2017, including additional one-off funding for social care. Additional social care funding has been received and plans agreed by NCC and health partners. In addition to funding to support protection of social care and to support market stability, there are invest to save projects that will both support discharge from hospital and wider demand management.	2	4	8	31/03/2019	Amber	James Bullion	Susanne Baldwin	05/12/2017						
D	Transformation	RM13923	Risk of failing to deliver Promoting Independence, change programme for Adult Social Services in Norfolk	Promoting Independence Change Programme oversees and co-ordinates the linked change and transformation activities required to deliver the strategy. If we fail to deliver the programme this will lead to a failure in developing a sustainable model for adult social care and a failure to deliver a balanced budget	30/04/2011	4	3	12	3	4	12	1) Robust programme management arrangements with properly resourced capacity and skills in place 2) Defined suite of business cases which are prioritised and sequenced to maximise impact and make best use of resources 3) Clear leadership from senior managers to sponsor and champion changes 4) Strong performance framework to measure and monitor the impact of change activities and to take action to address any issues	1) Programme manager and four project managers now in place. 2) Business cases are being prepared on a priority basis and are presented to the Promoting Independence Board or SMT as required. 3) Workstream sponsors engaged and owning priorities. Temporary business lead roles appointed to the Programme. 4) Initial set of high level measures agreed – effectively a set of 'vital signs' for the programme. Requires targets to be set against these, and metrics disaggregated to workstream and project level.	2	4	8	31/03/2018	Amber	James Bullion	Debbie Bartlett	05/12/2017						

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D	Adult Social Services Department	RM 14261	Staff behaviour and practice changes to deliver the Promoting Independence Strategy	A significant change in staff behaviour and social care practice is required to deliver the Promoting Independence Strategy. Failure to make the culture change needed across the workforce would greatly impact the transformation of the service and its ability to deliver associated budget savings'	25/04/2016	3	5	15	3	4	12	1) Robust OD plan signed off by the PI Programme Board. 2) Reviewing staff supervision and process and training. 3) Management Development Programme for Team Managers and Practice Consultants will be rolled out throughout the year.	1 - 3) Living Well – 3 Conversations work has started. Recruitment for additional social workers well under way. The Management Development Programme starts in November for Team Managers and Practice Consultants.	2	4	8	31/03/2018	Amber	James Bullion	Lucy Hohnen	05/12/2017
D	Support & Development	RM13925	Lack of capacity in ICT systems	A lack of capacity in IT systems and services to support Adult Social Services delivery, in addition to the poor network capacity out into the County, could lead to a breakdown in services to the public or an inability of staff to process forms and financial information in for example Care First.	30/04/2011	4	4	16	3	4	12	1) As part of the Business Continuity plan steps are in place to mitigate any system loss and downtime. 2) To ensure effective Integration, staff must have access to the relevant systems regardless of where they are located. Please also refer to Risk RM019	1) Recovery steps are outlined in the Business Continuity plan. These are always reviewed following any serious incidents and updated where necessary. 2) ICT Capacity and solutions for integrated working are discussed at the Integration Programme Board. Issues are being progressed as a key priority. NCHC staff now have access to NCC Outlook calendars. We are working with NCHC to arrange NCC staff having access to NCHC Outlook calendars.	3	2	6	31/03/2018	Amber	James Bullion	Sarah Rank	05/12/2017
D	Information Management	RM14085	Failure to follow data protection procedures	Failure to follow data protection procedures can lead to loss or inappropriate disclosure of personal information resulting in a breach of the Data Protection Act and failure to safeguard service users and vulnerable staff, monetary penalties, prosecution and civil claims.	30/09/2011	3	5	15	3	4	12	1) New staff not allowed computing access until they have completed the data protection and information security e-learning courses. 2) Mandatory refresher training and monitoring rates of completion of training. 3) Monthly reports to CLT around data breaches 4) An Information Compliance Group (with representation across each department) meet on a bi-monthly basis and reports back any issues to the Information Management Board. 5) Changes to Data Protection rules will come into effect in May 2018 - we are working closely with Information Management to ensure all of our policies and procedures are compliant.	2) Reminders to individual staff to complete Data Protection e-Learning courses are sent out and managers are informed of staff who have not completed the e-learning course. The refresher e-learning course has now moved from every three year's to two year's in line with guidance received from the ICO.	1	3	3	31/03/2018	Green	Lorna Bright	Sarah Rank	05/12/2017
D	Adult Social Services Commissioning	RM14290	Negative outcome of the Judicial Review into fee uplift to care providers	A successful Judicial Review being brought by a group of residential care providers may result in additional costs which were not anticipated in budget planning for the year.	07/09/2015	3	4	12	3	4	12	1) Following the Older People residential and nursing care cost of care exercise and consultation process, the outcome and revised usual prices was recommended to the Adult Social Care Committee on 29th April 2016 and implemented. 2) Ongoing work with the market to discuss annual increases to fees	1) The 2017/18 uplifts were recommended to Committee and implemented following consultation 2) Project in place to review working age adults fee framework 3) Discussion around increase to fees with market to understand cost implications and pressures. Recommendations will be reported to Committee in January alongside budget planning proposals.	1	4	4	31/03/2018	Amber	James Bullion	Susanne Baldwin	05/12/2017
D	Adult Social Services Commissioning	RM14247	Failure in the care market	The council contracts with independent care services for over £200m of care services. Risk of failure in care services would mean services are of inadequate quality or that the necessary supply is not available. The council has a duty under the Care Act to secure an adequate care market. If services fail the consequence may be risk to safeguarding of vulnerable people. Market failure may be faced due to provider financial problems, recruitment difficulties, decisions by providers to withdraw from provision, for example. Further reductions in funding for Adult Social Care significantly increases the risk of business failure.	07/09/2015	4	3	12	4	3	12	1) A Quality Assurance Framework in place which provides a risk based approach to the market of care services, collating intelligence from a range of sources and triangulating to identify services for targeted intervention 2) Prioritising care workforce capacity within the learning and development programme 3) Revision of a market failure protocol based on established good practice 4) Liaison with Care Quality Commission to engage with their work with Norfolk care services 5) Procuring new domiciliary care contracts 6) Appropriate investment in the care market 7) Effective management of market failure	2) A recruitment and retention project is underway which was launched in March 17. 2b) New real time quality (risk) dashboard produced 3) Market resilience strategy under development 4) Refreshed working arrangements with CQC 4b) Revised and improved carers service that will support informal carers - being procured for delivery in Sept 17. 5) New 'patch' based contracts procured in the North, East and West of the county with a roll out to Norwich and South during 2017. 6) Stabilisation of provider market and channelling of investment proposed as part of the improved Better Care Fund. 7) Provider engagement and dialogue included in the 'cost of care' exercise which will support accurate identification of costs of provision and ensure investment targeted appropriately	2	3	6	31/03/2018	Amber	Sera Hall	Steve Holland	05/12/2017
D	Adult Social Services Commissioning	RM 14260	Failure of the care market (through the independent providers) due to difficulties in recruiting staff into the sector.	The council invests over £54m through approximately 120 independent providers in provision of homecare to over 4000 vulnerable people at any one time. Failure of the care market (through the independent providers) due to problems recruiting staff into the sector may result in a risk to safeguarding of vulnerable people, delays in discharging people from hospital and inappropriate admissions to hospitals and care homes. Problems recruiting into and retaining care workers in the care sector are particularly acute in the west and north of the county but are experienced across the county as a whole.	16/05/2016	4	4	16	4	3	12	1) A Quality Assurance Framework provides a risk based approach to the market of care services 2) Ensure robust procurement processes that ensure providers cost provision adequately 3) Work with providers, workforce professionals and other partners to develop and implement a workforce development plan and to ensure workforce terms and conditions are equitable 4) Development of a care contingency network and emergency provision 5) Clear communication needed with the market to publicise areas of need and future commissioning intentions	2) Market testing conducted using a range of techniques that enable providers to accurately identify costs 3) An executive board has been created to take responsibility for the promotion and delivery of a sector skills action plan and this includes a clear accountability structure with named leads for each priority 3b) Inclusion of Unison Ethical Care Charter in all new Home support contracts 3c) Website for care workers which includes information and advice around the caring profession. There is also a recruitment portal for providers to advertise vacancies and a promotional campaign in order to make the profession more attractive. 4) Emergency capacity which provides additional funding for providers put in place over winter 5) Use of in house resources when market cannot provide 6) Development and implementation of framework provision which is planned to stabilise provision and provide recompense for provision in very rural areas	2	3	6	31/03/2018	Amber	Sera Hall	Steve Holland	05/12/2017
D	Integration	RM13936	Potential for integration to adversely affect delivery of statutory responsibilities or impact on reputation	Pressure on integrated staff could have an adverse impact on joint teams regarding capacity and take them away from departmental priorities impacting on reputation / ability to deliver.	30/06/2011 - revised 18/04/2016	3	5	15	2	5	10	1) Pressure closely monitored by AD's and escalated to Director Integrated Services. 2) Integration Programme Board monitors and considers implications and costs across both organisations. 3) Issues can be escalated to S75 Monitoring Board (membership includes Committee Chair and Executive Director) for resolution.	1) SMIT (Senior Managers Integration Team) regularly discuss capacity issues and take action. 3) Issues are escalated as and when necessary.	1	5	5	31/03/2018	Green	James Bullion	Lorraine Barrett	05/12/2017

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D	Adult Social Services Department - Commissioning	RM14238	Failure in our responsibilities towards carers.	The failure of Adult Social Services to meet its statutory duties under the Care Act will result in poorer outcomes for service users and have a negative impact on our reputation. Funding reductions by health and other partners may adversely impact on provision of countywide carers services	27/05/2015	2	3	6	2	3	6	1) Co-production with providers and users of service resulted in revised carers services specification 2) Maintaining existing health investment in commissioned services 3) Strong engagement and dialogue with Carers Council 4) Competitive procurement of Carers Service to deliver in Sept 2017 5) Proposed investment as part of the improved Better Care Fund for enhanced support for carers. 6) Review of our offer to carers around respite, direct payments and commissioned services.	1-5) A tender process is now complete and a new service was put into place on 1/10/17. 6) A review of the respite policy has been considered by SMT and is now being developed further. 7) A Carers Charter has been proposed by Members - a working group is now actively developing this	1	1	1	31/03/2018	Amber	Sera Hall	Emma Bugg	05/12/2017
D	Transformation	RM14149	Impact of the Care Act	Impact of the Social Care Act/Changes in Social Care funding (significant increase in number of people eligible for funding, increase in volume of care - and social care - and financial assessments, potential increase in purchase of care expenditure, reduction in service user contributions)	27/11/2013	4	3	12	1	5	5	1) Project for Implementation of the Care Act. Ensure processes and resources in place to deliver Government requirements. Estimate financial implications. 2) Keep NCC Councillors informed of issues and risks.	1) Project delivered necessary changes for April 2015 (part one of the Care Act). On 17 July 2015 the Government announced that Part Two of the Care Act is deferred until 2020. 2) ASC Committee members agreed to keep this on the risk register until government guidance was clearer. No further information has been received from Government.	1	3	3	31/03/2020	Green	Janice Dane	Janice Dane	05/12/2017
D	Safeguarding	RM14287	Potential failure to meet the needs and safeguarding of adults in Norfolk.	There is a national risk that Adults Social Service do not provide adequate safeguarding controls.	14/12/2016	2	5	10	2	5	10	1) Multiagency Safeguarding Policy & Local Procedures in place. 2) Adults Safeguarding Board in place. 3) Delivery of Safeguarding training to providers. 4) Appropriate checks / vetting of staff. 5) Serious case reviews actioned where appropriate. 6) Any recommendations made by Safeguarding Adults Review's (SAR's) are monitored by the Safeguarding Adults Review Group and also disseminated 1/4ly to all managers via the Quarterly Managers Forum (QMF).	1) Multiagency safeguarding policy and procedure refreshed and updated by the Learning, Improvement and Policy sub group of the Norfolk Safeguarding Adults Board (NSAB). Now published on the NSAB and publicised among partners. 2) Board is well established and has an independent chair. 3) Specific training for providers is delivered (at a cost) via the commissioned training provider, St Thomas'. The NSAB can also signpost providers to safeguarding training. 4) Enhanced DBS checks are carried out for all customer-facing staff in ASSD. 5) ASSD has a representative on the multiagency Safeguarding Adult's Review (SAR) Group and the group is attended by NPLaw. There is a robust process in place for evaluating cases referred to the SAR Group against the SAR criteria. Claire Crawley (Senior Policy Advisor for the Department of Health) has visited the NSAB and has given advice on the interpretation of the SAR criteria and the importance of identifying and actioning learning. 6) The SAR Group holds and monitors action plans for each SAR and is developing a thematic approach. They also have a standing item on the NSAB agenda to update the board on progress with actions, and any forthcoming reviews. The Head of Service (for Safeguarding) presents learning from SARs and reviews this alongside the relevant locality Assistant Director/Head of Operations. The learning is used as a platform for a more detailed look at a particular theme for ASSD.	2	4	8	31/03/2018	Green	Lorna Bright	Helen Thacker	05/12/2017
D	Adult Social Services Department	RM14314	Delayed Transfers of Care (DTC)	A significant increase in DTC might jeopardise additional funding (IBCF) and have adverse consequences as well as for the quality of care This would further increase financial pressures on the health and social care system.	05/12/2017	4	4	16	4	5	20	1) DTC Improvement Plan is now in place 2) Improved Better Care Fund is targetted, in part, on reducing DTC	1) Performance reporting mechanism established. 1b) Daily capacity mapped and monitored and given high priority 1c) The DTC Improvement Plan includes weekly meetings to monitor the figures and take action as required 1d) Senior NCC presence at A&E Delivery Board which helps to ensure an integrated and coherent approach 1e) Ongoing work with providers to increase capacity in the market to support safe discharges	3	4	12	31/03/2018	Amber	James Bullion	Sera Hall	05/12/2017