

Care & Repair Leeds Risk Register – 2023/24

How it works

Each risk is scored according to the probability of it happening (1-5) and the impact of it happening (1-5) using the criteria below. This score is then applied to the matrix below to give the risk an overall rating of green, amber or red. The risks are outlined in the tables on page 2 onwards. For each risk there is a description, actions required to manage or reduce the risk, the person/post responsible for managing that risk and the rating of that risk as green, amber or red. The purpose of the risk register is to ensure that risks are recognised and managed.

Risks have been categorised into: 1. Financial 2. Strategic 3. Culture 4. Governance 5. Cyber Security
Each risk is attributed to a lead staff member / Trustees

Risk Probability Setting

Probability	Criteria
1. Very Low	Extremely unlikely or virtually impossible
2. Low	Low but not impossible
3. Medium	Fairly likely to occur
4. High	More likely to occur than not
5. Very High	Almost certainly will occur

Risk Impact Setting

Impact	Criteria
1. Very Low	Likely to have minor impact in one or a few areas in C&R
2. Low	Likely to have minor impact in many areas in C&R
3. Medium	Likely to have major impact in one or a few areas in C&R
4. High	Likely to have major impact in many areas in C&R
5. Very High	Likely to have major impact on the whole of C&R

Risk Scoring Matrix

		Probability				
Impact		1. Very Low	2. Low	3. Medium	4. High	5. Very High
	1. Very Low	1	2	3	4	5
	2. Low	2	4	6	8	10
	3. Medium	3	6	9	12	15
	4. High	4	8	12	16	20
	5. Very High	5	10	15	20	25

1. Financial Risks

Ref	Date Raised	Description	Action to Mitigate Risk	Lead	Review Date	Rating
			Key: ü If action is complete ? If action is pending û If action will not be progressed / completed.			
F1	01/04/2020	Failure to comply with financial regulations	ü Financial Manager has relevant accounting qualification and experience and maintains CPD. ü Treasurer Trustee has relevant financial experience ü Financial Standing Orders adopted and reviewed and updated every two years. ü Audit of financial information undertaken by regulated auditor annually. ü Reserves policy adopted and reviewed every two years. ü Investment Sub-Committee created to manage investment of reserves. ? Tax audit being considered. ? Financial standing orders under review ? ESG principles for investment being considered.	CEO / Finance Manager/NC	ongoing	Green 4

F2	01/04/2020	Financial information is inadequate or incomplete	<ul style="list-style-type: none"> ü Financial reports presented to the Strategy & Finance Sub-Committee on a 6-weekly basis and to the Board on a quarterly basis which include: <ul style="list-style-type: none"> - Budget v actuals - Forecasts - Breakdown by fund / service area - Balance sheet ü Financial reports include KPIs to show under and over performance. ü Pension deficit payment to be included in financial reports. <p>? Budget and strategy plan for next financial year being prepared for Board meeting in March 2023</p>	CEO / Finance Manager	ongoing	Green 4
F3	01/04/2013	Financial viability - Disabled adaptation income	<ul style="list-style-type: none"> ü Memorandum of Understanding with Leeds City Council with agreed fee of 15% (or 12% if LCC provide plans) ü MOU guarantees a minimum 35 scheme referrals per year - MOU agreed and signed for 2021/22 ü On Leeds City Council's contractor framework for Disabled Facilities Grant schemes ü Adequate staffing and capacity of technical team ü Marketing Plan to increase private self-funding clients. ü On reserve list for LCC bathing adaptations in owner-occupied properties ü Forecasting of adaptation income when preparing budget for each financial year <p>? In close contact with Colin Moss of LCC re-funding for projects due to restricted budgets at LCC</p>	CEO / Technical Manager	June 2021	Amber 8
F4	01/04/2019	Financial viability - reliance on Leeds City Council funding	<ul style="list-style-type: none"> ü Marketing Plan to promote technical service to private self-funders – work ongoing. 	CEO / Technical Manager	ongoing	Amber 12

			<ul style="list-style-type: none"> ü Further income sources identified and sought – all possible options for funding are investigated as they arise. ü Regular meetings with LCC to build close working relationships, review performance and expand services. ü DFG tender contract confirmed for a max of 5 years. <p style="color: red;">? Private works marketing being targeted to more affluent areas. Projects where the fees do not adequately cover our costs will be avoided. ? Seeking opportunities with Wakefield DFG and Barnsley DFG team</p>			
F5	01/04/2020	Financial viability - Homeplus	<ul style="list-style-type: none"> ü Home Plus LCC contract funding is in place until September 2023 (24-month extension) ü Positive relationships with Adults & Health commissioners ü Contract Key Performance Indicators achieved ü The Outreach Worker funding received ü Fuel Poverty funding combined with Homeplus funding. <p style="color: red;">? Waiting for details from LCC to start preparing Homeplus retender. ? Homeplus team structure to be reviewed in line with retender.</p>	CEO	Nov 2021	Green 4
F6	01/04/2013	Budgetary pressure of pension deficit payments	<ul style="list-style-type: none"> ü Obligation to pay a past deficit contribution from previous membership of the Pensions Trust Social Housing Defined Benefit Scheme – no actions to remedy risk. 	CEO / Finance Manager	Ongoing	Red 15

2. Strategic Risks

Ref	Date raised	Description	Action to Mitigate Risk	Lead	Review Date	Rating
S1	01/10/2018	Failure to meet key performance outcomes of Home Plus contract, the Fuel Poverty56 contract and the Enhance contract	<ul style="list-style-type: none"> ü Monthly monitoring enabling early identification of any issues ü HIA Case Manager system adapted to record all client information and collate reports required to populate monitoring workbook for commissioners ü Regular meetings with delivery partners ü Quarterly contract meetings with commissioner ü City-wide promotion of the service across statutory and voluntary sector ü Good feedback from commissioning manager on results, wants us to concentrate on reaching more people who could benefit from the service ü ü Adequate staffing and training to share workload ü Monthly reporting to view achievements against KPI's <p>? training to be carried out on System One (patient details system used by GPs) using the underspend in the Enhance budget, still awaiting approval for this training.</p> <p>? improved sharing of workloads following resignation of part time Support Worker to maintain achievement KPIs</p>	Service Delivery Manager	Ongoing	Green 4
S2	01/10/2018	Failure to deliver responsibilities as Lead Organisation for the Home Plus contract	<ul style="list-style-type: none"> ü Robust Partnership Agreement in place with partners ü Partnership Steering Group meets quarterly to provide strategic direction and monitor progress with key stakeholders and commissioners ü Quarterly partnership operational meetings ü Assessed in May 2021 as 'Well Led' under LCC Quality Management Framework <p>ü Assessed as Safe under LCC Quality Management Framework?</p> <ul style="list-style-type: none"> ü Leading the Fuel Poverty project. 	CEO	Ongoing	Green 4

			<p>? Invoicing process was discussed at recent Partners meeting and improvements on accuracy and timeliness agreed.</p> <p>? Agreed how each partner would support the Homeplus retender process.</p>			
S3	01/04/2013	Low level of referrals for disabled adaptations affecting income	<ul style="list-style-type: none"> ü MOU in place with Leeds City Council guaranteeing a minimum of 35 major scheme referrals per year. ü Fortnightly scheme / referral meetings held with LCC Health & Housing ü On Leeds City Council's contractor framework for Disabled Facilities Grant schemes until 2024 with a possible extension of 2 x 12 months ü LCC Health & Housing promote our services to clients who want to use their DFG for a preferred scheme. City Council which could lead to more work. ü Marketing Plan to increase private self-funding clients ü On reserve list for LCC bathing adaptations in owner-occupied properties ü Confirmation from Bradford Council that DFG extension to proceed at circa. £70k- date to commence still not received. We have just had confirmation that this is not going ahead as it's been cancelled. ü Monthly assessment of projects, income and costs <p>? Forecasting of adaptation income with budget for next financial year 23/24</p> <p>? New Technical Team structure to be approved by Board.</p> <p>? Recruitment of second Graduate on a temporary contract to improve meeting current capacity.</p>	CEO / Technical Manager	Ongoing monthly	Green 4
S4	01/12/2020	Failure to expand into the private market to increase private self-funded clients, increase fee income and reduce the reliance on LCC	<ul style="list-style-type: none"> ü Marketing Plan to promote technical service to private self-funders – work ongoing. ü Creation of marketing materials – leaflets, website, video ü Targeting of private works marketing to more affluent areas. ü Improved fee structure ü Project efficiencies assessed. 	CEO / Technical Manager	June 2021	Amber 9

			<ul style="list-style-type: none"> ü Cost ineffective projects avoided. ü Adequate staffing and capacity in the Technical Team ü Cross-referral of services to Technical Team by Homeplus Team <p style="color: red;">? Understanding of competition and our USP ? Review of relevant publications ? Seeking opportunities with other local authorities and associations</p>			
S5	01/04/2020	Turbulent economic/political environment may lead to changing Local Authority & CCG policy / funding for preventative services	<ul style="list-style-type: none"> ü Home Plus contract in place until September 2023. ü Attendance at strategic forums to maintain profile of how the organisation can assist with LCC and Leeds Integrated Care Partnership services and priorities. ü Keep up-to-date with the economic and political environment, and funding available ü Keep up-to-date and involved in the changing health landscape, and funding available. 	CEO	Ongoing	Amber 9
S6	01/11/21	Inability to recruit the right calibre of staff within required timescales could impact the success of the business.	<ul style="list-style-type: none"> ü Ongoing assessment of staffing capacity ü Use a variety of recruitment methods and assess each one for results, adjust/change where necessary. <p style="color: red;">? Include recruitment in budget and strategy plan for each financial year. ? New Technical Team structure to improve retention and recruitment. ? New Homeplus Team structure to improve retention and recruitment</p>	CEO	Ongoing	

3. Cultural Risks

Ref	Date raised	Description	Action to Mitigate Risk	Lead	Review Date	Rating
C1	01/04/2013	Staffing Culture negatively impacts on service delivery and reputation	<ul style="list-style-type: none"> ü Managers hold monthly one-to-ones with their staff ü Annual performance appraisals, reviewing performance and behaviour against Core Values, setting service and personal objectives. ü Personal training and development opportunities ü Employee Handbook reviewed annually. ü Regular and open communication ensures staff are aware of the organisational achievements, focus and risks. ü Robust performance management procedures in place and used appropriately. ü All managers attended ACAS training on performance management training, including Discipline & Grievance ü Member of Mindful Employer Network giving access to Managers resource toolkit ü Policy and procedures in place re sickness and absence management. ü Mental Health and Well Being policy created and shared with the forum team ü Regular staff forum meetings ü Regular staff team building activities including the Xmas celebration in Dec 22 <p style="color: red;"> ? Ongoing assessment of staff performance ? New Technical Team structure to be approved by Board. Will improve engagement and retention. ? Review of Homeplus Team structure in line with Homeplus retender. ? Managing of high staff sickness to ensure we continue to meet KPI requirements. </p>	CEO / SMT	Ongoing	Green 4

C2	01/04/2013	Loss of credibility arising from complaints	<ul style="list-style-type: none"> ü Complaints policy and procedure in place, and complaints log ü Standing item on SMT monthly agenda. ü Quarterly reporting to the Board of Trustees ü Learning taken from complaints to inform service delivery improvements. ü Process mapping of projects considers areas where poor communications could lead to misunderstandings and issues further on within the project. <p>? The number of calls to past clients to request one to one feedback, has been increased significantly. This has improved the percentage of feedback received. Clients can also feedback online if preferred.</p>	CEO	Ongoing	Green 4
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4. Governance

Ref:	Date raised	Description	Action to Mitigate Risk	Lead	Review Date	Rating
G1	01/04/2020	Governance structure is inappropriate and governance processes are not in place, monitored or reviewed	<ul style="list-style-type: none"> ü Structure of governing body reviewed and Rules revised and updated. ü Trustee induction training provided to understand governance role and the organisation. ü Trustees encouraged to attend external training. ü Terms of reference for Board and Strategy & Finance Sub-Committee reviewed on an annual basis. ü Appropriate policies and procedures in place and regularly reviewed. <ul style="list-style-type: none"> - Conflict of Interest - Code of Conduct - Risk Management 	Chairman / CEO	Ongoing	Green 4

			? Terms of reference for Investment Sub-Committee to be finalised. ? ESG Principles for investment sub- committee to be finalised			
G2	01/04/2020	Key Trustee roles cannot be filled	ü Identify key Trustee roles and record/monitor 'step down' timescales. ü Job descriptions for Officer roles in place and reviewed and updated. ü Recruitment process in place and undertaken in a timely manner. ü Handover / training / shadowing period for Trustees new into key roles ? Desirable to recruit Trustee with medical expertise	CEO	Ongoing	Amber 9
G3		Care & Repair's Trustees are not adequately protected	ü Trustee Executive Liability insurance purchased, is included within the Employees liability	CEO	Complete for 2021/22	Green 4

5. Cyber Security

Ref:	Date raised	Description	Action to Mitigate Risk	Lead	Review Date	Rating
Cs1	01/01/2021	Threats to the organisation's security from: <ul style="list-style-type: none"> • Ransomware • Phishing • Data leakage • Hacking • Insider (employees) 	ü All computers, tablets and devices have anti-virus / antimalware software which is kept up-to-date as updates become available ü Security updates are checked at each login, and advice is given to staff on setting and managing passwords. ü All software used is supported by the supplier. ü IT system suppliers have cyber security certificates. ü Data back-up is in the cloud. ü Role-based access to defined levels and areas, and record of staff access to personal and confidential data ü Induction programme covers data security, protection and cyber security and employment contract contains data security requirements.	CEO / IT Support Office	Ongoing	Green 4

		<ul style="list-style-type: none"> ü All staff have completed training on GDPR and cyber security. ü IT policies and procedures – Confidentiality, Computer Usage, social media - which are reviewed and regular spot checks carried out ü All staff have signed the Portable Information Technology Devices Usage Policy and understand how to report data breaches ü Registered with the Information Commissioners Office Reg.No: ZA124425 ü Third parties are used to destroy confidential paper and obsolete equipment that holds personal data, and destruction certificates are supplied. ü Data Security Audit (Pen test) Complete, report indicates 4 medium risk actions that should take place, none that are urgent so we are in a secure state in terms of IT security. BSN have given quotes on work needed, we will assess priority and organise work based on this <p style="color: red;">? To check all Trustees have completed cyber training via Care & Repair or similar training via work.</p>			
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Date of last review by Trustees	Next Review by Trustees
Board meeting 2 nd Dec 2022	27 th January 2023