

Risk Matrix

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|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| Impact | | | | | |

ERW Risk Register



June 2017

School Improvement - Ceredigion



Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
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| | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | School categorisation results in increasing numbers of amber / red schools | Managing Director, Chief Education Officer / Director and Head of Hub | Possible | Medium | 4 | Treat | Ensure robust categorisation, with regular team meetings and QA to ensure that all ChAD are fully up to date with amendments to categorisation; especially in light of Step 1 changes. | Some schools will be amber due to changes in leadership. | | | | | | March 2015 | |
| 3 | Difficulties in recruiting school leaders results in lower leadership standards in schools | Managing Director, Chief Education Officer / Director and Head of Hub | Likely | High | 9 | Escalate | Consistent recruitment drive with HR | Currently 1 primary Headteacher vacancy. Maths secondary vacancies in 2 secondary school - Penglais and Penweddig | | | | | | | |
| 4 | Insufficient monitoring of and support to schools causing concern | Head of Hub and Chief Education Officers | Possible | Medium | 4 | Treat and Transfer | Hof Hub and Tim Hyn meetings; Schools Causing Concern register | Penglais in Estyn monitoring - new HT; potential for more rapid improvement however early. | | | | | | May 2015 | |
| 5 | LA staff (including Challenge Advisers) unnecessarily undertaking activity outside the regional strategy | Directors | Possible | Medium | 4 | Treat | HofHub and Tim Hyn meetings | Ongoing risk as LA staff capacity reduces | | | | | | July 2015 | |
| 6 | Current PwC review could lead to service cuts in school advisory service | Chief Education Officer and HofH | Likely | High | 9 | Tolerate and transfer | N/A | | | | | | | October 2015 | |
| 7 | Failure to raise standards, specifically for Efsm pupils | Directors | Likely | Medium | 6 | | Focus in CV and with advisory staff | Reduction in % at GCSE attaining L2+ from 44% in 2016 to 33% in 2017, with reduced cohort However, good standards for e fsm learners Foundation Phase- KS3. | | | | | | July 2015 | |

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| 1 | School categorisation results in increasing numbers of amber / red schools | Managing Director, Chief Education Officer / Director and Head of Hub | Possible | medium | 4 | Treat | Ensure robust categorisation, with regular team meetings and QA to ensure that all ChAD are fully up to date with ammendements to categorisation; especially in light of Step 1 changes. | | Newtown HS a concern re. wellbeing issues, however progress made. | On LA risk register | | | | May 16 | |
| 2 | Estyn visits result in high proportion of schools being placed in follow up / special measures | Chief Education Officers and Heads of Hub | Likely | High | 9 | Treat and Transfer | Additional secondary capacity added 12 months ago. School to school support such as Bryntawe/Bro Hyddgen and Caereinion/Gwernyfed is adding valuable capacity. | | Good progress made at Caereinion and Llanfyllin. Llandrindod HS not making progress as required. Builth Wells making progress, but GCSE results below expectation. | | | | | March 2015 | |
| 3 | Insufficient monitoring of and support to schools causing concern (secondary specific) | Head of Hub and Chief Education Officers | Likely | High | 9 | Treat and Transfer | see above | | see above | | | | | May 2015 | |
| 4 | LA staff (including Challenge Advisers) unnecessarily undertaking activity outside the regional strategy | Directors | Possible | Medium | 4 | Treat | | Ongoing risk and LA staff capacity reduces | | | | | | July 2015 | |
| 5 | Difficulty in recruiting school leaders results in lower leadership stabbards | Chief Education Officer and HofH | Likely | High | 9 | Escalate | | | | | | | | October 2015 | |
| 6 | Failure to further improve key performance indicators at secondary, in particular L2+ | Chief Education Officer and HofH | Likely | Medium | 6 | Treat | | | | | | | | October 2015 | |

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| 7 | Failure to raise standards, specifically for Efsm pupils | Directors | Likely | Medium | 6 | | | | | | | | | July 2015 | |

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School Improvement - NPT 


Inherent Risk

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| | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | Estyn visits result in high proportion of schools being placed in follow up / special measures | Chief Education Officers and Heads of Hub | Possible | High | 6 | Treat and Transfer | | Analysis of data and effective support from challenge advisers; programme of school improvement ; building capacity of schools to support others. An increased number of schools in EM is emerging in NPT. Closer scrutiny of CV1/ Categorisation reports required in 2016. Work programme of Quality Manager and review of schools causing concern. Over reliance on data without looking at books must be eradicated. Special measures primary questioned by Estyn. The profile of EM in NPT primary schools increased in 2016-2017. Director has commissioned a strategy on improving leadership in primary schools. HOH has produced draft strategy with Lead CA and CA responsible for leadership. Strategy is an amalgam of ERW provision available, new leadership standards aligned to future leadership academy and specific activity to support DHTs and HTs in NPT. | | | Possible | Medium | 4 | March 2015 | |
| 2 | School categorisation results in increasing numbers of amber / red schools | Managing Director | Possible | Medium | 4 | Treat | | Reduction in number of amber schools between 2015 and 2016. However, numbers of green support school has not increased during this period. LA has introduced a leadership wellbeing project in 2017. Evaluation of leadership wellbeing project now required in 2018. Further work on leadership has been undertaken and all amber/ red schools have amber plans. A few yellow schools may have benefitted from amber support given recent inspection outcomes. Leadership strategy to commence in September 2017 to bring coherence to support available. Director will champion the strategy. | | | Possible | Medium | 4 | March 2015 | |
| 3 | Challenge advisers unable to monitor schools where there is a threat of action short of strike action. | Lead HR Officer | Likely | High | 9 | Treat where possible, tolerate | | Communication arrangements strengthened and inform TUs of work. TU relations improved through improved central talks with ERW. No current issues on schools unwilling for monitoring activities to be undertaken by challenge advisers. By September 2017 there are strong partnerships with schools. The move from 2 to 3 visits per annum will need to be communicated thoroughly at local level. | | | Likely | Medium | 6 | March 2015 | |
| 4 | Inconsistency in support to Schools through variability in work of individual Challenge Advisers | Head of Quality and Standards & Head of Hub | Possible | High | 6 | Treat and Transfer | 3 different secondary challengers in as many years. | All LA Chief Education Officers | | | Unlikely | Medium | 2 | March 2015 | |
| 5 | Categorisation judgements undermined by advisers not following process | Managing Director | Likely | High | 9 | Treat and Transfer (All LAs) | | Comprehensive training provided to ensure consistency. Clear distinction required between categorisation of additional LA risk factors. National training in July 2017 should be implemented. Useful materials should be provided to CAs to aid consistency. Menu of Support is unclear and requires further work. | | | Unlikely | High | 3 | March 2015 | |

Sep-17

Risk Matrix

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School Improvement - NPT 

Inherent Risk

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| | | | | | | | | | | | Probability | Impact | Risk Score | | | |
| 6 | Local School Improvement risks not fully mitigated at LA level - specifically elements of duplication | Head of Hub and Chief Education Officer | Likely | High | 9 | Transfer | Hub level risk assessment reviewed at Hub QA Meeting. Hub risk register created after June Meeting 2015. Risk pertain to Hub and should be revisited termly. There are still elements of duplication. Overall, in comparison to 2015 the level of duplication has reduced and school improvement work is aligned to regional expectation. This has been facilitated by Rhwyd, CA guidance and Ladder of Support. Internal intranet has helped communication and improved compliance with agreed activity. | ERW risk register is now distinctly different to a list of schools with additional risk factors. The risk register is a standing agenda item and the inherent service risks are discussed throughout half termly meetings. The register is now more accessible to all. Are all risks shared and discussed in earnest at challenge adviser level? In September 2017, the risk register should be discussed in team meetings as well as Hub QA. | NPT | | Unlikely | Medium | 2 | March 2015 | | |
| 7 | Insufficient monitoring of action plans for schools causing concern or amber support action plans | Head of Hub and Chief Education Officer | Possible | Medium | 4 | Treat and Transfer | Standing item on Hub QA. Practice is shared across the Hub to reduce the risks. Guidance provided on monitoring Estyn and have to coordinate support effectively. NPT have decided not to produce an amber plan if a PIAP already exists. Questions have been raised about duplication in schools causing concern log and LA action plans for red/ amber schools. Used for two purposes so both must be maintained. | Monitoring the impact of schools causing concern is now logged centrally and for September 2016 new concern schools have a specific plan in addition to the log. Precise actions for schools need to be sharper in the log and this is under review. Challenge advisers have gradually adapted to the need for closely monitored plans and are now familiar with expectations. Where PIAPS exist, the NPT challenge advisers have been advised not to create a new action plan. From 2017 all new amber/ red schools should continue to have a plan in place that can be monitored at least on a half termly basis. | | | Unlikely | High | 3 | May 2015 | | |
| 8 | Across the Hub, 26% of reports had 'concerns' as reported by Estyn between 2015-2017 | Directors | Likely | High | 9 | Treat | Reports are QAd in triplicate to ensure reports are stronger/more evaluative. Sign off is required by LA. Head of Education Improvement provides suggested changes. New workforce needs additional support. Where reports lacked rigor in NPT, it was mainly on overgenerosity on the impact of leadership and low validity on the evidence provided to Estyn. The risks have now been treated by HOH and Lead CA. There are good arrangements in place for NPT CA to know and understand the new Estyn CIF well and to be able to support schools with their SERS - this has been facilitated by the Lead CA. | Risk is now lower. Nearly all challenge advisers produce good quality reports. Going forward, Estyn will require the last core visit report on a school for pilot schools in 2016-2017. This places greater weighting on QA of core visits. New report templates across region should harmonise approach to reporting to Estyn. Training provided in how to evaluate rather than describe performance. Greater emphasis placed on what CAs hear and see in schools required. | | | Unlikely | Medium | 2 | July 2015 | | |
| 9 | LA staff (including Challenge Advisers) unnecessarily undertaking activity outside the regional strategy | Directors | Possible | Medium | 4 | Treat | There is greater clarity on the menu of support this year where CAs are better equipped to broker the support required. However, off menu activity for Teacher Development Officers is a risk. Examples of this are engagement with commercial companies and lack of S2S methodology. All subject specialists have spent 4 days planning the regional menu of support. It now needs to be delivered. For 2017-2018, the capacity to deliver the Menu of Support has reduced so S2S is required to deliver. The new Leadership Menu of Support will be delivered by 30 schools but there were no self-nominations from NPT for this. | Local discussion to ensure appropriate capacity. The ERW 2017-2018 Professional Learning Prospectus that contains the Menu of Support has now been shared with NPT schools. However, clarity on who does what and why on a local level is still required to ensure that NPT receive quality support in a timely fashion. | | | Unlikely | Medium | 2 | July 2015 | | |
| 10 | Failure to raise standards, specifically for Efsm pupils | Directors | Likely | Medium | 6 | Treat | Targeted interventions and sharing most effective practice. Commissioned research. | | | | | Possible | Medium | 4 | July 2015 | |

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School Improvement - NPT



Inherent Risk

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| 11 | Heightened risk of budgetary constrains on support services and schools impacting adversely on staff | Directors | Likely | High | 9 | Treat | | There is an emerging need to greater align the work of CAs to wellbeing/ care, support and guidance because of greater demand, curriculum reform/ ALN reform and local needs. The work of the Support for Learning Priority Board will be crucial in shaping this agenda for CAs in CSV2s and CSV3s. | | | | | | October 2015 | |

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School Improvement - Swansea 

Inherent Risk

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| | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | Estyn visits result in high proportion of schools being placed in follow up / special measures | Chief Education Officers and Heads of Hub | possible | High | 6 | Treat and Transfer Analysis of data and effective support from Challenge Advisers; programme of school improvement ; building capacity of schools to support others. Work programme of Quality Manager and review of schools causing concern. Take a firm stance on absence at training events. Increase the number of full time challenge advisers if possible. Ensure that there is better validity of evidence when monitoring schools. | | Training and professional development opportunities provided and clear guidance and systems. National accuracy of TA. Risk is heightened if new staff do not follow national and regional guidance or fail to attend training. | Swansea | Estyn have named Swansea as highest outside of Cardiff with 4/17 in statutory category. By October 2016 there are no longer any schools in a statutory category. There is an emerging increase of schools in Estyn monitoring follow-up category at October 2016. By May 2017, one primary in need of SI due to fragility of leadership. By September 2017, significant staff changes at lead challenge adviser and challenge adviser level pose a risk in terms of continuity and consistency. It has been agreed with CEO that absence at training events poses a further risk. | Possible | Medium | 4 | March 2015 | |
| 2 | Challenge advisers unable to monitor schools because of threat of action short of strike action | Managing Director | Unlikely | Medium | 2 | Treat Analysis of data and effective support from Challenge Advisers; programme of school improvement. Common consistent training for Advisers. Communication with schools via headteacher fora is vital to ensure that there are no misconceptions of challenge adviser work. Ladder of Support should be updated for 2017-2018 so that all schools know what to expect. | | More Challenge Advisers required. Red Schools occur beyond categorisation criteria. Sufficient CAs in place from September 2016. Amber plans in place. Pre-inspection support required in amber schools facing inspection. No lead challenge adviser for primary in Swansea between January and May 2017. Role fulfilled by Head of Hub. Guidance for CV2 followed. No issues with TTUs. | | | Unlikely | Medium | 2 | March 2015 | |
| 3 | Inconsistency in support to schools through variability in work of individual challenge advisers | Managing Director and Executive Board | Likely | Medium | 9 | Treat Ensure that all central ERW and national categorisation guidance is accessible and adhered to. Remind CAs that their work is to evaluate leadership and teaching/learning thoroughly so that schools access support. There is a risk of too many schools receiving little support when they are not highly effective yet. | | Asking CAs to work outside regional strategy. Duplication of effort still apparent. By October 2016 there is greater understanding of the CA role. However, evidence suggests that headteachers are now less sceptical of regional work. Part-time workforce has resulted in variability. Unable to recruit high calibre permanent CAs. Additional activity during CSVs could dilute the experience. However, in individual schools, where there are particular concerns then matters should be explored. If ALN requires further exploration, the LA may wish to commission reviews, where appropriate. | | | Possible | Medium | 4 | March 2015 | |
| 4 | New school improvement professionals unaware of regional business plan and how this is aligned to local operational plans. | Lead HR Officer | Likely | Medium | 6 | Treat where possible, tolerate Communication arrangements strengthened and inform TUs of work. Changing strategies led by new HR Lead. Ensure current 2017-2020 Business Plan is accessible to challenge advisers on ERW website. | | Misconceptions of Challenge Adviser work apparent. More resistance in Swansea than NPT. Problems seem to have arisen from central talks. Individual conversations have been helpful to aid clarity. Central talks reported as much improved. Information from strategy meetings are fed back locally by May 2017. | | | Likely | Medium | 6 | March 2015 | |
| 5 | Local School Improvement risks not fully mitigated at LA level as a result of interim arrangements in the secondary sector. | Head of Quality and Standards & Head of Hub | Likely | High | 9 | Treat and Transfer New arrangements to recruit HTs to support additional capacity. Clear agreed arrangements set out with consistent entitlement to schools. Revised ladder of support 2015-16. Comprehensive Training Programme. Performance management harmonisation. Continuity and progression remains a challenge in the secondary sector. By October 2017 there will be two full time secondary challenge advisers and 5 ad hoc secondary challenge advisers. There is further work to be done to | | QA process is adequate and should be preserved at different levels. Individual coaching of staff proves to be beneficial. New recruits require better induction than currently on offer. Challenge adviser handbook and stop the clock activities support improved quality. Part-time challenge advisers need to adhere to guidance. Too much time taken to write reports. Better brokerage of support for key stage 4 required. | Behaviours and communication needs to be reiterated and risks noted. And high risk of not working within agreed boundaries. New CAs require good induction. Evidence in October 2016 suggests that there are schools receiving less support than required and that green schools do not always influence their sector sufficiently. By September 2017 there are suitable amber support plans in place for two schools. However, plans vary in quality. | Likely | Medium | 6 | March 2015 | | |

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| 6 | Insufficient monitoring of schools causing concern action plans or amber support school action plans | Head of Quality and Standards & Head of Hub | Unlikely | High | 3 | Treat | Ensure that new lead challenge advisers are aware of their duties to a) maintain and update the schools causing concern support log on a half-termly basis b) ensure that all amber/ red support plans are visible, updated and shared with stakeholders, ensure that the support log is updated by CAS within teams. | | | Operational plans in Swansea now refer to the ERW business plan. There needs to be a note of instruction from Swansea to identify the particular key priorities for ERW to deliver on. The new annex to business plan 2017-2020 will feature Swansea's priorities. HOH has shared with lead CAS. | | Possible | Medium | 4 | March 2015 | | |
| 7 | New subject specialists and challenge advisers undertaking work beyond the regional strategy. | Heads of Hub | Possible | High | 6 | Transfer | Hub level risk assessment reviewed at Hub QA Meeting. Communication with schools now less of a risk. A better understanding of consortia functions has been achieved but will need to be maintained by the incoming CEO. | | | The regional agendas for core visits should be adhered to. Use of consultants is not part of the regional strategy for literacy and numeracy and should be avoided. There should be local operational plans in place to deliver regional strategies e.g. Menu of Support. | | Possible | Medium | 4 | March 2015 | | |
| 8 | Failure to raise standards, specifically for E fsm pupils | Head of Hub and Chief Education Officers | Possible | Medium | 4 | Treat and Transfer | Greater scrutiny of PDG planning and intervention required. Is their evidence that the resource improves standards? Gap in fsm and non-fsm performance is widening at key stage 4. | | | This is a key priority for KS4 in Swansea as progress has stalled. Interschool practice is now shared in order to maximise fsm learner potential. | | Unlikely | Medium | 2 | May 2015 | | |
| 9 | Heightened risk of budgetary constrains on support services and schools impacting adversely on staff | Directors | Likely | High | 9 | Treat | ALN services are stretched, in particular. It is important that challenge advisers upskill themselves on the challenges faced by schools. Ringfenced school improvement levels preserved for FY 2017-2018 and split into primary, secondary and curriculum units to ensure best value for money and closer budget monitoring. | | Schools have dwindling resource for staff CPD in primary schools because of Foundation Phase element of EIG. New TALC model requires explanation so that clusters can nominate a lead practitioner and get the money back to help with CPD. | | | Possible | High | 6 | July 2015 | | |
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School Improvement - Swansea 

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| | | | | | | | | Ringfenced school improvement levels preserved for FY 2017-2018 and split into primary, secondary and curriculum units to ensure best value for money and closer budget monitoring. | | | | | | October 2015 | |

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ERW Risk Register



June 2017

School Improvement - Pembrokeshire



Inherent Risk

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| 1 | Estyn visits result in high proportion of schools being placed in follow up / special measures | Chief Education Officers and Heads of Hub | Possible | High | 6 | Treat and Transfer | Analyses of range of data and ongoing monitoring by ChAds provides early indications. Consistent programme of school improvement through brokered 'menu of support.' Leadership Strategy and KS4 Improvement Plan in place. Enhanced capacity of school-to-school support. DCEO leading SCC reviews supported by PCA and Hub Lead. Work programme of ERW Head of Stds provides additional support. | Additional regional resources provide support and capacity for more focused local activity (ChAd deployment). Ongoing ERW training and professional development opportunities continue to provide guidance and facilitate improvement. | | | Possible | Medium | 4 | March 2015 | | |
| 2 | School categorisation results in increasing numbers of amber / red schools | Managing Director | Possible | Medium | 4 | Treat | Ongoing effective support from ChAds and wider team members provides a consistent programme of school improvement through the individual brokered 'menu of support' (agreed with school during CSV1 - Autumn Term). Consistent CSV1 training for ChAds enhances implementation and improved targeting of potential risks. Early moderation activities support implementation of provision based on 'current needs.' Ongoing focus on enhancing leadership and provision through range of HT Seminars and Network activities | Await outcome of national discussions on role / impact of 'Judgement 1 - Standards' and potential following influence on Leadership/Provision judgements. Content and findings of Core Support Visit agendas will support accuracy / level of need. | | | Unlikely | Medium | 2 | March 2015 | | |
| 3 | Inconsistency in support to Schools through variability in work of individual Challenge Advisers | Head of Quality and Standards & PCAs | Possible | High | 6 | Treat and Transfer | Defined support arrangements for schools are set out clearly to ensure a consistent entitlement via the 'menu of support' and shared with all parties. Comprehensive training and awareness raising programmes are in place. Hub QA meetings support monitoring of school progress at an individual level / any potential risks. Recent ERW training packages have continued to support the 'consistency agenda.' Rhwyd package provides consistent template / level of expectation. | | All LA Chief Education Officers | | | Unlikely | High | 3 | March 2015 | |
| 4 | Insufficient monitoring of and support to schools causing concern | Hub QA Team members, PCAs and Chief Education Officers | unlikely | High | 3 | Treat and Transfer | PCC strategic documentation includes KS4 Improvement Plan, SCC Protocol and specific Improvement Strategies (Leadership, T&L, efsm etc). Standing item on Hub QA. SCC Plans led by DCEO with support from Head of Huub and PCA. Hub QA monitoring progress and impact on a regular basis. | Appt of PCC DCEO completed and enhancing current SCC arrangements. | | | Unlikely | High | 3 | May 2015 | | |
| 5 | LA staff (including Challenge Advisers) unnecessarily undertaking activity outside the regional strategy | Directors | Possible | High | 6 | Treat | PCC realignment of strategic responsibilities and duties undertaken - reinforces consistency. Hub QA & PCA / ChAd Team meetings review workload and impact to ensure early identification of issues / risks. | Clarity on ChAd role supported by revised Core Support Visit schedules. However, any potential risks need to remain under review. | | | Possible | high | 6 | July 2015 | | |

Risk Matrix

| | | | | | |
|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| | | Impact | | | |

ERW Risk Register



June 2017

School Improvement - Pembrokeshire



Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
|----------------|--|------------|-------------|--------|------------|--------------------------|---|---|----------|---|----------------------|--------|------------|-----------------------------|-----------------------------|
| | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 6 | Failure to raise standards, specifically for Efsm pupils | Directors | Possible | High | 6 | Treat | PCC eFSM Strategy in place and shared with all partners. Ongoing targeted interventions and sharing of most effective practice. Additional PCC Reviews of use / impact of PDG funding. ERW CSV1 clarifying any further actions for 'menu of support' on an individual school basis. | PCC Efsm Strategy in place. Additional PCC PDG Reviews. | | | Unlikely | high | 3 | July 2015 | |

Risk Matrix

| | | | | | |
|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (6) | High (8) | High (12) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (9) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| | | Impact | | | |

ERW Risk Register



June 2017

School Improvement - Carmarthenshire



Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
|----------------|--|--|-------------|--------|------------|---|---|---|----------|--|----------------------|--------|------------|-----------------------------|-----------------------------|
| | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | Estyn visits result in high proportion of schools being placed in follow up / special measures | Chief Education Officers and Heads of Hub | Possible | High | 6 | Treat and Transfer Analyses of range of data and ongoing monitoring by ChAds provides early indications. Consistent programme of school improvement through brokered 'menu of support.' Enhanced capacity of school-to-school support. Additional support and challenge provided in light of revised Estyn Framework and National Categorisation requirements to ensure parity between findings of both parties (ERW and Estyn). SCC review activity and ongoing monitoring of schools' progress / needs (including Category of Support programme) led by PCAs. Ongoing work programme of PCAs/Head of School Effectiveness and Hub QA Team provides additional support. | | Ongoing training and professional development programme provided to support all ChAds with clear guidance. Additional early identification of risks through moderation activities (Autumn Term). Rhwyd QA and analyses of CV1 and 2 provides constructive support. | | LA capacity (ability to support and challenge) remains under review with ongoing recruitment programme in place. | Unlikely | Medium | 2 | March 2015 | |
| 2 | School categorisation results in increasing numbers of amber / red schools | Managing Director | Possible | Medium | 4 | Treat Ongoing effective support from ChAds and wider team members provides a consistent programme of school improvement through the individual brokered 'menu of support' (agreed with school during CSV1 - Autumn Term). Consistent CSV1 training for ChAds enhances implementation and improved targeting of potential risks. Early moderation activities support implementation of provision based on 'current needs.' Ongoing focus on enhancing leadership and provision through range of HT Seminars and Network activities e.g. Action Research Projects. | | Await outcome of national discussions on role / impact of 'Judgement 1 - Standards' and potential following influence on Leadership/Provision judgements. Content and findings of Core Support Visit agendas will support accuracy / level of need. | | | Unlikely | Medium | 2 | March 2015 | |
| 3 | Inconsistency in support to Schools through variability in work of individual Challenge Advisers | Head of Support and Performance & PCAs | Possible | Medium | 4 | Treat and Transfer Defined support arrangements for schools are set out clearly to ensure a consistent entitlement via the 'menu of support' and shared with all parties. Comprehensive training and awareness raising programmes are in place. Hub QA meetings support monitoring of school progress at an individual level / any potential risks. Recent ERW training packages have continued to support the 'consistency agenda.' Rhwyd package provides consistent template / level of expectation. | | Regular Team Meetings (weekly) provide additional opportunities for sharing good practice and any potential concerns. Line management systems are robust and provide additional support if necessary. Successful completion of ongoing ChAd recruitment programme will further support capacity and any consistency issues. | | | Unlikely | Medium | 2 | March 2015 | |
| 4 | Insufficient monitoring of and support to schools causing concern | PCAs, Hub QA Team Members and Chief Education Officers | Unlikely | High | 3 | Treat and Transfer ERW SCC Protocols support ChAd activity. Standing item on Hub QA. SCC Plans in place with monitoring and review support from Hub QA Team and PCAs. Hub QA focused on monitoring progress and impact on a regular and individual basis. Improvement Panels implemented in specific targeted schools. Consistent approach and impact gained across the LA. | | | | | Unlikely | Medium | 2 | May 2015 | |
| 5 | LA staff (including Challenge Advisers) unnecessarily undertaking activity outside the regional strategy | Directors | Possible | High | 6 | Treat Hub QA & PCA / ChAd Team meetings review workload and impact to ensure early identification of issues / risks. | | Clarity on ChAd role supported by revised Core Support Visit schedules. However, any potential risks need to remain under review. | | | Possible | High | 6 | July 2015 | |
| 6 | Failure to raise standards, specifically for Efsm pupils | Directors | Unlikely | High | 3 | Treat Ongoing targeted interventions re being implemented and sharing of most effective practice across schools networks continues to benefit learners. ERW CSV1 to analyses PDG plans and clarify any further actions for 'menu of support.' CCC eFSM Scrutiny Panel Report has been published and supported identification of 'good practice' and potential risks. | | | | | Unlikely | High | 3 | July 2015 | |

Risk Matrix

| | | | | | |
|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| Impact | | | | | |

ERW Risk Register



June 2017

Financial

Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
|----------------|--|--|-------------|--------|------------|-------------|---|---|--|----------|---|----------------------|--------|------------|-----------------------------|-----------------------------|
| | | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | WG Funding may not be timely resulting in underspend at the end of the financial year | Managing Director / Section 151 Officer | Likely | High | 9 | Tolerate | Effective plans locally to mitigate impact. Financial forward planning with contingency arrangements so that essential implementation is not hindered. Constant communication with WG to improve expectation. Communication to WG | | 2016-17 commitment form WG to work more effective with regions and LAs, should help situation. MD success at getting fair funding formula for all regions will positively impact on ERW | N/A | | Likely | Medium | 6 | March 2015 | |
| 2 | Measured impact does not reflect value for money on ERW's work outcomes | Managing Director | Likely | Medium | 6 | Treat | Comprehensive VFM Framework in place. In house monitoring of effectiveness; support in any identified areas of concern. Regular reports to Exec. Board. VFM monitoring and recommendations from Internal Audit undertaken. | | Suggest taking of register after Exec. Board and Joint Committee review VFM Framework and reports. Due to report to JC July 2016 comparison data with other regions. | N/A | | Unlikely | Low | 1 | March 2015 | |
| 3 | Individual LAs fail to comply with Grant Regulations and limited assurance given from other LA's to PCC | Section 151 Officer and Head of Internal Audit | Likely | High | 9 | Treat | Clear agreed financial guidance and procedures. Correspondence from Section 151 Officer and Internal Audit to all LA's. Assurance for PCC from each LA. Improved communication and understanding of roles, responsibilities and risks. Training and termly finance officers meeting. | | | N/A | | Possible | Medium | 4 | March 2015 | |
| 4 | Region not funded fairly by WG in proportion to number of schools, pupils and teachers | | Likely | High | 9 | Escalate WG | On-going correspondence to WG over past year. Commitment given re sparsity | | Constant on-going discussions with WG. JC opt not to write to WG but to raise via representatives. Limited control on external factors. Breakthrough in discussions but nothing confirmed in writing 10.5.16 | N/A | | Unlikely | Low | 1 | March 2015 | |
| 5 | Financial pressures in each LA leading to cuts affecting school services | LAs | Likely | High | 9 | | ERW maintains high delegation rate to schools | | On-going information and discussion. Impact on capacity and willingness of schools to engage on self improving system. Further work with HT board to ensure clarity around expectations of HT to collaborate and the remuneration. | | All | Almost Certain | High | 12 | October 2015 | |
| 6 | The region has received two letters from WG outlining the concerns that ERW is not using its "Regional Grants" within the spirit of the terms and conditions. Risk that funding may be withdrawn | Managing Director, Directors | Likely | High | 9 | | Review of financial arrangements authorised by Joint Committee | | | | | | | | | |



Managing a risk register should be seen as a supportive and helpful way of recording issues and the support required to get the actions in place to mitigate the risk. In a partnership, the process of escalating and sharing each others risks are complex.

Risk register format has matured in recent months and has been agreed by Joint Committee (June 2015) as fit for purpose. Joint Committee agreed that under leadership of Karen Jones (NPT, Head of Corporate Development) that we should further mature process ready for new financial year.

Key Actions:

- * Identify Hub and LA owner where necessary.
- * Collation of LA/Hub risks can be collated for Hub QA, reducing duplication.
- * Review risk profile after mitigation and actions.
- * Discuss lessons learnt as part of review process.
- * Include review at Executive and Joint Committee.
- * Prioritise risks and order levels of risks.
- * Link to self evaluations.

Below is the Risk Matrix:-

| Risk Matrix | | | | | |
|-------------|----------------|------------|---------------|---------------|---------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| Impact | | | | | |

Risk Matrix

| | | | | | |
|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| Impact | | | | | |

ERW Risk Register



June 2017

Central

Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | Treatment | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
|----------------|---|--|-------------|--------|------------|----------------------------|--|---|--|--|---|----------------------|--------|------------|-----------------------------|-----------------------------|
| | | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 1 | Estyn visits result in LAs being placed in follow up / special measures or requiring further attention | Chief Education Officers | Likely | High | 9 | Transfer to 3rd Party / LA | Robust self evaluation and monitoring at LA level, with regional strategies to support. Pembrokeshire support network established by ERW by mutual consent. Review of evidence work reaims of concern. | Place on Pembrokeshire Risk Register | Email sent | Pembrokeshire | N/A | Likely | High | 9 | March 2015 | |
| 2 | Inspection of Region or any single LA finds less than adequate standards, provision or leadership | Managing Director and 6 Directors | Likely | High | 9 | Treat and Mitigate | Alternative support lead ChAd for schools causing concern required in LA. all alliance members the ownership on details and accountability. Effective BP in place. Clear plan for improvement as part of improvement planning, but heightened urgency pre inspection. Taken swift effective action against recommendations of Estyn review. Good track record of impact on outcomes. Quality systems secure. Infrastructure clear. | All | Risk for all LAs but specifically Pembrokeshire, where pace of improvement has not been good enough and high proportion of secondaries causing concern. | All | N/A | Unlikely | Medium | 2 | March 2015 | |
| 3 | Insufficient capacity of Central Team and Challenge Adviser Team to deliver Business Plan to high standard | Directors and Managing Director | Likely | High | 9 | Treat and Mitigate | Effective planning Central Team capacity to coordinate and facilitate change. position remains same and is critical. Discuss with all Directors 24/07/15. All agreed capacity and restructure of Central Team. Improved planning and training on key workload issues. Challenge adviser capacity agreed to maintain at full Sept 2015 | N/A | Review leads to need to reaffirm from all LAs the commitment as set out in legal agreement Joint committee paper on comparing regions is likely to raise issue and further action is likely. Central team capacity discussion with LD 14/10/16 | Pembrokeshire; Carmarthenshire, Sswansea, Ceredigion | N/A | Likely | High | 9 | March 2015 | |
| 4 | Governance and Legal footing of ERW found to be ineffective at securing consistent improvement across all LAs by Estyn / WAO / WG / Self Evaluation | Managing Director, Directors and Monitoring Officer | Possible | High | 6 | Treat and Mitigate | Evidence of effective communication, planning and accountability. Impact on outcomes is clear. Remaining risk is system knowledge by external stakeholders. Action by LA to respond to identified risks in Register | | Additional comms briefing scheduled. Review paper on effectiveness of governance underway | N/A | N/A | Possible | Medium | 4 | March 2015 | |
| 5 | Support and intervention coupled with local plans and strategies do not lead to improvement in PCC | Lead Chief Exec., Lead Director, Managing Director and PCC Corporate Leadership Team | Likely | High | 9 | Treat and Mitigate | plans agreed and committed to by Exec in Dec 2015. network underway and chaired by Lead Chief exec. Estyn and WG sighted of plans - work to action necessary | transfer to LA register necessary | agreement between MD and Director as to support for all key schools causing concern. Remains concern in reviewing support provided for key schools. Duplication remains a concern. | Pembs | | likely | High | | October 2015 | |

Risk Matrix

| | | | | | |
|-------------|----------------|---------|------------|------------|------------|
| Probability | Almost Certain | Low (4) | Medium (8) | High (12) | High (16) |
| | Likely | Low (3) | Medium (6) | Medium (9) | High (12) |
| | Possible | Low (2) | Low (4) | Medium (6) | Medium (8) |
| | Unlikely | Low (1) | Low (2) | Low (3) | Low (4) |
| | | Low | Medium | High | Extreme |
| Impact | | | | | |

ERW Risk Register



June 2017

Central

Inherent Risk

| Risk Reference | Nature / Description of Risk | Risk Owner | Probability | Impact | Risk Score | Treatment | Actions to Mitigate Risk | Transfer detail (if necessary and date) | Additional Detail | LA / Hub | Escalation from LA detail (if necessary and date) | Following Mitigation | | | Date appear on ERW Register | Date taken off ERW Register |
|----------------|---|--------------------------------|-------------|--------|------------|-----------|--|---|---|----------|---|----------------------|--------|------------|-----------------------------|-----------------------------|
| | | | | | | | | | | | | Probability | Impact | Risk Score | | |
| 6 | Failure to address or implement key areas of ERW BP | MD / Chairs of Priority Boards | likely | High | 3 | Treat | Focus on bringing pace to groups through effective minutes/actions.increased central capacity to monitor quality and actions/ focus. Target additional support for Support for Learning Groups. | | All alliance members should adhere to agreed code of conduct, BP actions and Legal agreement. Capacity issues in central team , and capacity of LAs to respond to Legal Agreement commitment and SLAs | N/A | | likely | Medium | 2 | March 2015 | |