**Risk Management for The Enquire Learning Trust**

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10. **Introduction**

**Purpose of this document**

This document sets out the key risks as assessed by the Trustees, both financial and non-­‐financial. The document records the assessment made by the Trustees and is to be revisited on a regular basis.

The relative importance of each of the risks identified has been assessed – through consideration of the likelihood of incidence and the potential impact on the Enquire Learning Trust***.*** The matrix uses a simple scoring system as follows:

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| **Likelihood** | **Impact** |
| 3 – Likely: expected – more than even chance of happening | 3 – Critical: Will make a material difference |
| 2 – Possible: even chance of happening | 2 – Major: will make a difference |
| 1 – Remote: Extremely unlikely | 1 – Manageable: Impact deemed to be manageable |

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| **Impact** |  | **Remote** | **Possible** | **Likely** |
| **Critical** | **2** | **3** | **3** |
| **Major** | **1** | **2** | **3** |
| **Manageable** | **1** | **1** | **2** |

Controls in place which mitigate the risks identified have been recorded along with the names of the individuals assigned responsibility for the operation and monitoring of those controls.

In cases where further action is required, the steps to be taken have been recorded.

1. **Mission and Objectives**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| The Trust’s aims/ objectives do not accord with the Constitution | 1 | 1 | Protocol for reviewing new projects to ensure consistency with objects, powers and terms of funding and consistency with Constitution | D. Holmes | Review/Update Business & Growth Plan annually  Regular contact with Solicitors  Reports to Trustees |  |
| Activities and future developments restricted by objects | 1 | 1 | Protocol for reviewing new projects to ensure consistency with objects, powers and  terms of funding  Authorisation procedures, monitoring and reporting  Financial systems to identify restricted funds and their application | D. Holmes | Review/Update Business & Growth Plan annually  Regular contact with Solicitors  Reports to Trustees  Accounts Returns completed and submitted to ESFA |  |
| The Trust lacks direction, strategy and forward planning | 1 | 1 | Creation of a strategic plan which sets out the key aims, objectives and policies  Creation of financial plans and budgets  Monitoring of financial and operational performance | D. Holmes | Review/update Business & Growth Plan annually  Monthly close down of accounts  Cash Flow constantly under review  Budgets/Financial plans agreed by Trustees  Regular routine monitoring reports to Trustees  Audit, Risk and Finance committee established from September 2017 |  |

1. **Law and Regulation/Compliance**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Failure to operate within Charitable Objects | 1 | 1 | As above | D Holmes | Regular contact with Solicitors  Annual Audit and regular contact with External Auditors  Reports to Trustees | Regularly review updates from regulatory authorities |
| Breach of statutory requirements *(e.g., Health & Safety at Work legislation, Charities Act, Companies Act, Trustees Act, etc.)* | 2 | 1 | Policies and procedures documented and communicated to all employees as appropriate | D Holmes | Reports to Trustees  Policies and procedures in place  Training and Development  Regular contact with Solicitors and Auditors (Annual Audit)  Routine monitoring of academies | Further develop training and development of key staff |
| Adverse Regulator’s monitoring visit | 2 | 1 | As above | P. Kennedy | Reports to Trustees  Policies and procedures in place  Training and Development  Regular contact with Solicitors and Auditors (Annual Audit)  RO monitoring of academies | Further training and development of key staff |
| Penalties or restrictions imposed following control visits | 2 | 2 | Policies and procedures documented and communicated to visitors & staff as appropriate | P. Kennedy | Reports to Trustees  Policies and procedures in place  Training and Development  Regular contact with Solicitors and Auditors (Annual Audit)  RO monitoring of academies | Further training and development of key staff |

1. **Governance**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Structure/membership of the Board of Trustees and  Managing committees is inappropriate | 2 | 1 | Review of structure and constitutional change to ensure that the Board contains the necessary experience and skills  Skills review  Competence frame work and job descriptions  Training  Recruitment process  Organisation chart and clear understanding of roles and responsibilities | L Thompson | Ensure all trustees complete a skills assessment, continue to review structures and develop committees when required and in line with statutory requirements  Report to trustees | Recruit additional members to the boards and ensure a full understanding is available. |
| Relationship between the Board of Trustees, local governing body and senior staff poor | 2 | 1 | Formal and informal lines of communication are clearly understood and documented as appropriate | L Thompson |  | Develop and utilize the intranet to ensure  Regular session update with senior staff and governors  Included in the development programme with LGB |
| Effectiveness of local governing bodies | 3 | 2 | Recruitment and retention of effective governors is difficult. | L Thompson | Quality Assurance Report | Review the local governance structures |
| Reporting to the Trustees is inadequate | 1 | 1 | Proper strategic planning, objective setting and budgeting processes  Timely and accurate reports shared with Trustees  Project assessment and authorization procedures in place  Regular contact between Trustees and Trust Leadership Team | Central team | All reports submitted to trustees 1 week before the meeting.  Regular updates sent to Trustees | Standardisation of reports to trustees and agree deadlines for information to be sent to trustees.  Develop a system to improve communication with members |
| Conflict of interest | 2 | 2 | Understanding of trust law  Protocol for disclosure of potential conflicts of interest  Procedures for standing down on certain decisions  Recruitment and selection processes | L Thompson | Declaration of business interests annually with all employees | Regular monitoring with auditors, solicitors and DfE.  Annual report to trustees for ratification.  Ensure compliance with Academies Financial Handbook. |
| Lack of strategic plan, or poorly implemented | 1 | 2 | Proper strategic planning, objectives setting and budgeting processes in place, requiring Trustee approval | L Thompson | Regularly updating Business and Growth plan | Establish a timeline for local governance in relation to SEF, AIP and Budget |
| Dominance of key individual(s)on the Board of Trustees | 2 | 1 | Consider the structure of the Board and their independence  Mechanisms agreed to deal with potential conflicts of interest  Recruitment and appointment processes and constitutional validity  Procedural framework for meetings and recording decisions | L Thompson | Skills audit,  Annual Report to trustees |  |
| Trustees and Local Governors are benefiting from the charity | 1 | 2 | Ensure legal authority for payment or benefit  Terms and procedures to authorise/approve expenses and payments  Procedures and methods to establish fair payment, conducted separately from “interested” Trustee  Approved by the Board | L Thompson/ J Younger | Trustees agree works/fees involving from connected parties  Finance Policy in place – reflects current AFH  Regular contact with Auditors and Solicitors  Annual Audit | Regular update on Scheme of Delegation and Finance Policy  Introduced separate Audit, Risk and Finance Committee |
| Problems exist with Trust and wider Leadership Team (supervision, communication) | 1 | 3 | Organisation chart and clear understanding of roles and responsibilities  Competence framework and role descriptions  Delegation and monitoring, which is documented and communicated, is consistent with good practice | D Holmes | Clear organisational structures in place and agreed by Trustees  Scheme of Delegation in place and communicated to LGBs and employees  Leadership and Management reviewed.  PDR processes in place  All activities and processes risk assessed | More training and explanation required for the orgnaisational structure.  Principals and governors not fully aware of the trust structure.  Performance Management of all Leaders |
| Information Governance | 2 | 3 | Understand accountability and devise policies  Review and action current policies and necessary changes  Ensure policies are adhered to Trust wide | L Thompson | Ensure central policies are current and relevant  Ensure local policies and procedures are in place to adhere to central policies  Regular and accredited training  Regular spot checks | Work with academies to create local processes to adhere to central policies  External audits  Statutory monitoring of GDPR |

1. **Business and Operations including Estates, Technology and Information Governance**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Reputation impact of fraud, accident, media coverage etc. | 2 | 2 | Financial control procedures  Segregation of duties  Authorisation limits  Security of assets  Insurable risks  Complaints procedures (both internal and external)  Proper review procedures for complaints  Business Continuity plan for handling, consistency of key messages, nominated spokesperson etc. | D. Holmes | Reports to Trustees  Fraud and Whistleblowing policy in place, on intranet  Asset and inventory registers  Complaints procedures in place and available on website  L Thompson – link | Further training and development of key staff  Review procedures |
| Supplier dependency/ difficulties/ bargaining power | 2 | 2 | Use of competitive tendering for larger contracts  Procedures for obtaining quotations  Authorised suppliers listing  Monitoring of quality/timeliness of provision  Use of service level agreements  Use of buying consortia | P. Kennedy | Reports to Trustees  Finance Policy in place – in line with AFH  Separate Procurement Policy  Scheme of Delegation | Further training and development of key staff  Review of policy and procedures |
| Contract risk– onerous terms, uncompetitive | 1 | 2 | Cost/ project appraisal procedures Authorisation procedures Professional advice on terms and conditions  Performance monitoring arrangements  Insurable risks cover | P. Kennedy | Reports to Trustees  Finance Policy in place – in line with AFH  Separate Procurement Policy  Scheme of Delegation  RPA in place | Further training and development of key staff  GDPR compliance |
| Safeguarding of assets *(insurance, maintenance, etc.)* | 1 | 2 | Review of security  Asset register and inspection programme  Facility management arrangements  Safe custody arrangements for title documents  Management of patent and intellectual property  Insurance reviews | P Kennedy | Reports to Trustees  Finance Policy in place – in line with AFH  Separate Procurement Policy  Scheme of Delegation  RPA in place |  |
| Intellectual property inadequately protected | 1 | 3 | Registration of trademarks and patents  Security of electronically held data | P. Kennedy  B. Webster | Information Governance policy and procedures in place  Trust Operational service | Review underway  Training of key staff |
| Physical security or abuse of staff | 2 | 2 | Review of security  Recruitment procedures–including vetting of staff and volunteers  Training and supervision procedures | L Stones | Reports to Trustees  Safer recruitment training undertaken across the Trust  SCRs across Trust | Review as part of H&S and HR |
| Capacity and use of resources including tangible fixed assets | 1 | 2 | Building and plant inspection programme  Repair and maintenance programme Capital expenditure budgets Efficiency review | P. Kennedy | Reports to Trustees  Conditions surveys of building and plant | Capital Program in place and CIF priorities identified. |
| Competition from other bodies | 1 | 1 | Public and authority awareness of the charity | D. Holmes | Reports to Trustees  Review academy framework and developing trends |  |
| Poor security of site from unauthorized usage | 2 | 1 | Review of security  Authorisation procedures for usage of charity property | P Kennedy & Principals | Reports to Trustees  Reviewed as part of H&S inspection | Further training of key staff  All sites and premises security requirements accessed. |
| Lack of control of third party users (lettings) | 1 | 1 | Review of security  Training and supervision procedures | Principals | Reports to Trustees  Reviewed as part of H&S inspection | Further training of key staff  Raise awareness of potential damage |
| Lack of planning & control of offsite activities e.g. *Trips & expeditions* | 2 | 2 | Review of security  Review and communication of procedures  Recruitment procedures–including vetting of staff and volunteers  Use of Evolve system  Training and supervision procedures | D Holmes | Reports to Trustees  Evolve introduced across Trust – key staff trained in usage  As above |  |
| Lack of written policies and procedures or failure to keep them  up-to-­date | 1 | 2 | Proper documentation of policies and procedures  Audit and review of systems | L Thompson | Reports to Trustees  Reviewed annually and presented to Trustees  Available via intranet/internet |  |
| Disaster recovery procedures in place | 2 | 3 | Disaster recovery plan and procedures in place addressing operations in addition to IT | P Kennedy | Reports to Trustees  Recovery plan in place  Reviewed as part of H&S inspection | Raise awareness  Employed a H&S Officer to ensure all academies are aware of the plan |
| Breach of regulations e.g. Data protection Act, Food Standards, Children’s Act | 2 | 3 | Appropriate policies and procedures in place; documented and communicated to visitors and staff as appropriate | D Holmes | Reports to Trustees  Appropriate policies and procedures in place | Further training of key staff  Raise awareness of potential damage  Information Governance Policy introduced  Operational services in place |
| Increased need to invest in new technology/ poor use of IT | 2 | 3 | Appraisal of systems needs and options | B Webster/Principals | Periodic reviews of ICT Provision. Detailed Development Plans and budget setting. Continued CPD required. | Focus action on;  BW to list academies  Initiate core ICT platform |
| Failure of key software/hardware | 2 | 3 | Security and authorization procedures  Implementation and development procedures  Use of service and support contracts  Disaster recovery procedures  Outsourcing  Insurable loss | B Webster | Key systems supported by SLA. Backup systems in place and monitored. Disaster recovery plan in place. | Move to centralised framework |
| Weak systems selection and implementation procedures | 2 | 1 | Appraisal of systems needs and options | B Webster | Tender process undertaken for key systems. Trials and discussions across all levels (Trustees, Central Team, Academies) to make informed decision |  |
| Lack of disaster recovery planning, including backups | 3 | 3 | IT recovery plan  Data back-­‐up procedures and precautions  Insurance cover  Disaster recovery plan for alternative accommodation | B Webster | Backup systems in place across the Trust and its systems. Monitored daily. DR plan in place for key systems. | Cloud based back up systems form part of Operational Service \*see below |
| Over reliance placed on a supplier | 1 | 1 | Alternative sources of supply identified  Formal tender processes for selecting key suppliers | B Webster | Tender process invoked for key/large implementations. Multiple suppliers requested quotations to prove best value for all purchases. | Update Scheme of Delegation to ensure procurement for ICT is completed by B Webster |
| Not implementing uniform ICT infrastructure across the Trust and academies | 1 | 3 | Standardised infrastructure to prevent, and provide reactivity to security breaches that may arise:  Firewall  Internet Provision  Content Filtering  Anti Virus  Software Updates  Backups  Remote Support & Management | B Webster | Automated reporting.  Regular spot checks.  Requests for reports from Anti Virus and Backup systems to ensure they’re completing successfully  Ability to support academies remotely when required | Completed checklists to be signed and declared by Principals stating all infrastructure items are in place and configured as requested |

1. **Human Resources**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Loss of key members of staff–*i.e. ,lack of succession-­‐planning* | 2 | 2 | Succession planning  Documentation of systems, plans and projects  Training programmes  Notice periods and handovers  Recruitment processes | D Holmes & L.Stones | Reports to Trustees  Identify recruitment issues in each region/Hub | Develop rel / partnership with ITT, Universities  PPR for our academies  Re design adverts, application pack |
| Difficulties in recruiting/retaining staff | 2 | 3 | Established recruitment process, subject to regular review  Review of staff performance and salary levels  Marketing and advertising activity | L.Stones | Monitoring impact of recruitment policies and procedures. Monitoring of retention statistics to identify issues. | Introduce salary sacrifice – child care, Cycle 2 work  To maintain national pay and conditions.  Proactive HR processes |
| Failures in staff-­ vetting procedures (transferred staff) | 1 | 3 | Recruitment processes  Reference and qualification checking procedures, job descriptions, contracts of employment, appraisals and feedback procedures  Job training and development  Health and safety training and monitoring  Staff vetting and legal requirement checks  Legal support from Solicitors as part of TUPE process into the Trust | L. Stones | Vigorous procedures in place. Monitoring of recruitment across the trust. Training for staff involvement in recruitment. | HR audit of personnel files across the trust. |
| Failures in staff vetting procedures | 1 | 2 | As Above | L Stones | As above |  |
| Poor working practices e.g. discrimination or bullying | 1 | 3 | Equal opportunities policies in place–  Documented and communicated  Where inappropriate behavior identified appropriate action taken | L Stones | Impact of policies in place. Close relationship with HR’s and TU’s. training for relevant employees. Effective policies in | Develop policies, and provide CPD for staff  Meeting with local TU reps & regional reps to discuss the working relationship with the Trust |
| Poor staff morale | 2 | 2 | Interview and assessment processes  Fair and open competition appointment for key posts  Job descriptions, performance appraisal and feedback  Conduct “exit” interviews  Consider rates of pay, training, working conditions, job satisfaction | L Stones | Staff satisfaction surveys. Discussions with staff and Principal’s. | Westfield – as above  Staff surveys to be completed  Exit interviews conducted |
| Breaches of employment laws, e.g. working time  directive, stakeholder pensions | 1 | 3 | Change in regulations monitored and documented  Contracts of employment amended form new legislation as appropriate | L Stones | Policies and procedures in places, training and advice given. Involvement with SLT’s at an early stage. | Policies, procedures, training BMs,  Regular updates – change in regulations  Develop trust wide training programme |
| Poor or lack of terms and conditions | 1 | 2 | Job descriptions, contracts of employment, appraisal and feedback processes in place | L Stones |  | National T&Cs  Review specific policies  Review T&C – term time form |
| Poor staff training and development | 1 | 1 | Job descriptions and formal appraisal process  Training needs formally identified and addressed | L Stones | With Principals. Identification of needs in house. Appraisal process structured and monitored. | Audit of appraisal process at year end |
| Dependence on a key individual | 1 | 3 | Established recruitment process, subject to regular review  Succession planning in place | L Stones/ Principals | Central team staff employed to carry out specific role. | Identify work areas that require additional support for continuation of key operational activities.  Restructure of central team undertaken  \*See above |
| Poor recruitment procedures | 1 | 2 | Procedures documented and reviewed | L Stones | Policies and guidance in place. Training on recruitment practices. | Enforcement of appropriate procedures.  Increase involvement in recruitment |
| Inadequate supervision or control of volunteers | 1 | 2 | Appropriate policy documented and communicated to staff and volunteers  Monitoring and assessment of supervision | L Stones |  | Policy and guidance provided |

1. **Finance including Funding, fraud and funds**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Weak or ineffective financial controls and Inadequate financial planning and forecasting | 1 | 2 | Budgets linked to business planning and objectives  Timely and accurate monitoring and reporting  Proper costing procedures for product or service delivery  Adequate skills base to produce and interpret budgetary and financial report  Procedures to review and action budget/ cash flow variances | J Younger | RO visits  Month end procedures and reviews  Support from Trust Finance Lead | Continuous monitoring  Financial weaknesses identified as part of risk assessment |
| Poor or inaccurate financial reporting and management accounts | 2 | 2 | As above | J Younger | Month end reviews by J. Younger | Continuous monitoring and training as required |
| Income levels inadequate | 1 | 3 | Policies and procedures  For approval of charges and income levels(budgets)  Marketing strategy and capability  Review and assessment of competitor markets and strategies | J Younger | Cash flow forecasts ongoing | BREXIT action plan to be developed |
| Poor investment management and performance | 3 | 1 | Investment policy  Proper investment advice or management  Diversity, prudence and liquidity criteria  Adequate reserves policy  Regular performance monitoring | P Kennedy | Investment and Reserves policy in place  Regular monitoring of performance data  Cash flow monitored | To Review low risk investments |
| Qualified external audit report | 1 | 2 | Policies and procedures documented  Review procedures in place | J Younger/ P Kennedy | Annual Audits undertaken across the Trust |  |
| Unplanned tax/VAT  liabilities | 1 | 2 | Monitoring of the position to ensure compliance | J Younger | Ongoing month end monitoring |  |
| Inadequate or inappropriate insurance cover | 1 | 2 | Review of insurance requirements  Policies and procedures for negotiating insurance terms and claims | L Thompson | RPA in place across the Trust |  |
| Capital expenditure plans not defined | 1 | 2 | Appropriate budgeting processes requiring Trustee approval  Regular monitoring of performance and capital expenditure | P. Kennedy | Budget review centrally  Reports to Trustees  CIF requirements adhered to |  |
| Lack of reserves | 1 | 3 | Appropriate reserves policy approved by the Trustees and communicated  Reserves policy fully explained in the  Annual Trustees’ report | P Kennedy | Reserves Policy in place and referenced as part of the Annual Return |  |
| Sensitive cash flow situation resulting in pressures to meet financial commitments and adversely impacting operational activities | 2 | 3 | Adequate cash flow projections (prudence of assumptions) Identification of major sensitivities  Adequate information flow from operational managers  Monitoring arrangements and reporting | J Younger & BM’s | Cash flow forecasts to be completed and continuously reviewed and updated | Training on cash flow to business managers |
| Non-­compliance with donor imposed restrictions | 1 | 2 | Systems to identify restricted receipts  Budget control, monitoring and reporting arrangements | Principals & BMs | Internal records kept of restricted spends |  |
| Pension commitments are not being met | 2 | 3 | Review and approval of monthly payroll | P Kennedy | Month end procedures in place |  |
| Breach of Inland Revenue rules on small scale trading | 2 | 2 | Appropriate monitoring of trading activity  Establishment of trading subsidiary or other vehicle | P. Kennedy |  |  |
| Non-­‐compliance with laws and regulations regarding fundraising activities, including use of professional fundraisers | 1 | 1 | Appraisal, budgeting and authorization procedures  Review of regulatory compliance  Monitoring of the adequacy of financial returns achieved (benchmarking comparisons)  Complaints review procedures | Principals |  |  |
| Fraud | 1 | 3 | Fraud is assessed as a risk  The different types of fraud to which the charity is exposed have been identified and appropriate policies, procedures and responsibilities for managing the risk are in place | P Kennedy / J Younger | Fraud and Whistleblowing policy in place, available via intranet  Regular financial monitoring  Principals/ABMs  RO visits  Annual Audit – external auditors | Further training of key staff  Raise awareness of potential damage |
| Response to fraud is inappropriate | 1 | 3 | A documented plan of action is in place to be followed in the event of a fraud being detected  All instances of suspected fraud are investigated  Where fraud is detected and proven appropriate action is taken to recover any loss and deter occurrence | P Kennedy / J Younger | Fraud and Whistleblowing policy in place, available via intranet  Regular financial monitoring  Principals/ABMs  RO visits  Annual Audit – external auditors | Further training of key staff  Raise awareness of potential damage |
| Poor employee education and understanding of the implications of fraud | 1 | 3 | The charity has a fraud policy statement which is communicated to all employees  The fraud policy statement is regularly reviewed for compliance and updated  A fraud prevention education/ training programme is in place  The charity has a clear whistle-blowing policy  Recruitment and ongoing personnel policies are in place, which address the risk of fraud | P Kennedy /J Younger | Policies in place and reviewed regularly | Regular training/communication to employees re fraud |
| Poor internal controls which impinge on ability to detect fraud | 1 | 3 | Policies, procedures and controls in place in respect of the transaction and accounting systems  Controls in place over the security of assets/ property  Appropriate budgeting and management accounting and other reporting in place to aid monitoring of performance | P Kennedy / J Younger | Finance Policy in place  Reports to Trustees  RO visits  Month end close down and monitoring  Principals/ABMs  Training and development of key staff | Ongoing training and development |
| SEND Funding |  |  | Academies not receiving appropriate funding for SEND pupils. | D Holmes | Work closely with local authorities to ensure that the funding formulas are correct | Regular meetings with LAs |

1. **External**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Change in political regime | 3 | 2 | Monitoring of proposed legal and regulatory changes  Membership of umbrella bodies | D Holmes | Reports to Trustees  Regular contact with Auditors and Solicitors |  |
| Change in public perception of academies | 2 | 3 | Communication with supporters and beneficiaries  Quality financial, annual report and review reporting  PR training/procedures | D Holmes | Reports to Trustees | Regular newsletter, PR, website, social media |
| Acts of God, impact of adverse weather conditions | 2 | 3 | State of repair of buildings kept under review  Repairs and maintenance budget  Appropriate insurance in place | P Kennedy | Reports to Trustees  Health and safety inspections  Adequate insurances in place | Conditions surveys undertaken on all buildings and plant  Long term Capital Program developed - CIF  Business Continuity Plan  Due Dilligence around conversion process |
| Changes in charity taxation, including VAT rules | 2 | 1 | Formal monitoring of the position to understand implications of changes  Working with specialists (appointed accountants) who provide appropriate advice | P. Kennedy | Reports to Trustees  Regular contact with Auditors and Solicitors | Regularly review updates from regulatory authorities |
| Social and demographic changes | 2 | 2 | Monitoring of changes and implications | D. Holmes | Reports to Trustees | Monitor Admissions  Close liaison with partner local authorities.  Monitor Free School Meals & Pupil Premium  Conduct Pupil Premium review in schools identified as risk |
| BREXIT | 3 | 3 |  | Trustees | Close monitoring of government policy | On going monitoring |
| Pandemic | 3 | 3 | Mitigate risk in line with HMG guidance. | Trustees | Close monitoring and interpretation of government policy.  [COVID 19](https://enquirelearningtrust-my.sharepoint.com/:f:/g/personal/brett_webster_enquirelearningtrust_org/Er31O3IPb6RBqaj1hz_NPzwBHDJKR-_ARH2VDde4e8VcRA?e=NpmAdd) | On going monitoring |

1. **Learning and Development including Standards and Improvement**

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| **Risk Factor** | **Risk likelihood remote (1), Possible (2) or likely (3)** | **Risk Impact manageable (1)**  **Major (2)**  **Critical (3)** | **Control Procedure** | **Individual Responsibility** | **Monitoring Process** | **Further Action Required** |
| Lack of Strategic Partners | 1 | 1 | Continue with engagement with other Trust and participation on RSC Network | D. Holmes | Report to Trustees |  |
| Establish a Teaching School | 2 | 2 | Trust would benefit from secured funding to lead CPD across the Trust | R. Clayton | Report to Trust Leadership Team |  |
| Trust wide Data System | 2 | 2 | Continue to review system | R. Clayton | Report to Trustees |  |
| Trust KPIs show successive decline over three terms | 2 | 3 | External review of trust central functions | Trustees | Report to Trust Board |  |
| Pupil outcomes fall significantly in an individual academy | 1 | 2 | Rigorous implementation of Academy Improvement Policy: re-designate school and initiate engagement plan.  Review leadership arrangements. | J. Holbrook | Report to Trust Leadership Team |  |
| Pupil outcomes fall significantly in one or more areas across the whole Trust. | 1 | 3 | Review the AIP  Restructure central team finances to address outcome deficit – appointment of additional expertise to central team | D. Holmes | Report to Trust Board |  |
| Academy drops a grade in Ofsted inspection | 2 | 2 | Rigorous implementation of Academy Improvement Policy: re-designate school and initiate engagement plan.  Review leadership arrangements. | J. Holbrook | Report to Trust Leadership Team |  |
| More than one academy drops a grade in Ofsted Inspection. | 1 | 3 | Review the AIP  Restructure central team finances to address outcome deficit – appointment of additional expertise to central team. | D. Holmes | Report to Trust Board |  |
| A school is deemed to be inadequate | 1 | 3 | Review the AIP  Restructure central team finances to address outcome deficit – appointment of additional expertise to central team.  Removal of local leadership and review Development and Supervision arrangement. | D. Holmes | Report to Trust Leadership Team |  |
| SEND provision | 2 | 2 | Lack of SEND provision available to pupils in the local area |  | Report to Trust Leadership Team and Trustees | Review current provisions and work with the local authorities to develop provisions. |