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| **Appendix A: Corporate Risk & Opportunity Register Q3 2017/18** | | | | | | | | | |
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| **Risk Identification Number (RIN)** | **Risk Description** | **Risk Type** | **Possible Consequences** | **Current Controls** | **Risk Score** | **Mitigating Actions** | **Residual Score** | **Risk Owner** | **Direction of Travel** |
|  |  |  |  |  |  |  |  |  |  |
| CR1 | Failure to implement fully the Council's medium term financial strategy including the delivery of planned budget reductions | Economic | Financial Savings not achieved resulting in in-year overspends with pressure on following year budget and reserves depleted more quickly than planned. Reductions in service and/or drop in quality of delivery leading to Judicial Review and/or damage to the Council's reputation. New legislative requirements not being met and uncertainty over being able to deliver and/or implement future large projects. Potential for infrastructure to deteriorate. | * Monthly budget monitoring processes for Heads of Service and Directors with particular focus on agreed savings delivery. * Ensure key programmes of activity (particularly linked to savings / downsizing) are adequately resourced. * Quarterly Money Matters budget monitoring reports, MTFS, reserves and Treasury Management reports presented to members (includes capital). * Management Team actions to monitor key areas of expenditure and consider remedial courses of action to address budgetary pressures. * Robust Medium Term Financial Strategy and Plan, updated to reflect variations to resource and demand assumptions. Reserves regularly monitored and reviewed. * Resources allocated to Base Budget Review. Rebalance budget savings via an ongoing risk assessment. | 25 | * Recommendations from Zero Based Budget Review agree by Full Council on 9th February 2017. * Improve commercial and financial acumen. * Continuously revalidate budget assumptions. * Communicating with stakeholders to ensure an understanding of the council's financial position and need for change. * Communicating specific proposals and service developments in the context of the financial scenario. * Programme Office supporting services to deliver savings and bring forward savings wherever possible. * An additional £2 billion to councils over the next 3 years to spend on adult social care services. For the council this equates to £48M. * Work being undertaken to identify lowest quartile offer as part of budget savings * October Cabinet agreed further savings subject to Equality Impact Assessments * Forecast underspend of £7.498M on the 2017/18 revenue budget. The forecast position includes £93.513M from reserves. * November Cabinet noted the revised Medium Term Financial Strategy and agreed several budget proposals for consultation, where necessary with the Trades Unions, the outcome of the consultation to be reported back to Cabinet at a future meeting. | 16 | Section 151 Officer | As time progresses the risk to some extent reduces. However, the risk cannot be fully mitigated until all the necessary enabling decisions have been taken and the relevant budget options have been realised. |
| CR2 | Risk to the ongoing longer-term Financial Viability of the County Council | Economic/ Political/Social | Problems stored up for the future as a combination of delivery issues in CR1 and further national funding reductions causing minimum reserve position not to be maintained with the risk of not being able to set a balanced legal budget in future years. | * Base Budget Review has identified the risk of the County Council not being able to meet statutory obligations by 2018/19. The actual timing of when this situation may occur will be identified from the various monitoring and review process outlined in CR1 above | 25 | * Risk of the County Council not being able to meet its statutory obligations by 2018/19 as validated by PWC * Zero Based Review activity (focus on lower quartile) will determine the scope for additional savings in all remaining services within the County Council (ongoing). * Links to Combined Authority work including Healthier Lancashire programme with the NHS as to any opportunities / additional pressures (ongoing). Lobbying – Treasury and DCLG by utilising ongoing existing networks MP's / Members, LGA, CCN, SCT (ongoing) * Development of response to the Treasury and DCLG of future needs assessment/allocation formula. * Communicating with stakeholders to ensure an understanding of the Councils financial position and need for change * Communicating specific proposals and service developments in the context of the financial scenario. * An additional £2 billion to councils over the next 3 years to spend on adult social care services. For the council this equates to £48M * October Cabinet agreed further savings subject to Equality Impact Assessments * Forecast underspend of £7.498M on the 2017/18 revenue budget. The forecast position includes £93.513M from reserves. * November Cabinet noted the revised Medium Term Financial Strategy and agreed several budget proposals for consultation, where necessary, with the Trades Unions, the outcome of the consultation to be reported back to Cabinet at a future meeting. | 25 | MT | Level |
| CR4 | Delivering organisational transformation including capacity, capability and resilience | Organisational | The failure to clearly implement the draft corporate strategy that sets out our vision, aims and priorities could result in a lack of purpose, direction and have an impact on service delivery and produce an adverse external audit report. The new structure that seeks to provide the ability to join up our services in a new way may not be fit for purpose. Ineffective employee engagement and buy in. A fall in staff morale could increase sickness absence and stress. Loss of knowledge and skills due to turnover puts demand on remaining staff which can expose the council to key person dependency and the risk of poor resilience.  Failure to deliver sizeable saving programmes | * As part of the base budget review process options for service delivery and redesign have been developed including proposals to stop some services. * Management Team approval of all new appointments and cessation of temporary staff contracts. * Senior Management Development programme implemented. * Positive employee communication and engagement. * Wellbeing initiatives and support for managers and employees. * Introduced a new scheme of delegation for heads of service. * Existing change/programme management support already committed and risk of slowing down this delivery if divert to other major change opportunities including LD. P2l programme has highlighted the need for extra capacity and skill to drive and direct large scale programmes and for the organisational need to build that skill and expertise and augment with external recruitment. | 16 | * Interim structures to reflect the base budget review options are being developed and implemented. * Independent challenge * See specific actions in relation to other risk entries i.e. Ofsted inspection * Use of transformation reserves to fund temporary staffing * Implementation of recruitment and retention strategies * Defining new service models across the organisation * Children's service transformation – pilot programme in Fylde & Wyre - ongoing * Extensive information is made available through the councils website which is also used by the customer service centre as a core council information resource * Promoting recognition and benefits of working at the council * Capitalise on the support and expertise that is currently available via Newton Europe to start the identification and skill development of key personnel to a transformation type team and look to use apprenticeship levy to fund training and support * New Senior Management Structure to be implemented wef January 2018 | 12 | MT | Level |
| CR5 | Failure to adequately protect and safeguard children | Social | Children are put at risk of harm. | * MASH (Multi-Agency Safeguarding Hub) to ensure appropriate multi-agency response where there are safeguarding concerns about a child. * Serious incident reporting to ensure appropriate management oversight. * Quarterly Safeguarding Report, including LSCB. * Serious Case Review learning shared to improve safeguarding practice. * Case file audits to promote learning. * Multi-agency inspections. Sector led Peer Review. Challenge undertaken. * Supervision with HOS. * Performance monitoring - action taken to address areas of underperformance. | 25 | * Caseloads are in line with Improvement Board targets for "good and outstanding". * MASH redesign has progressed - 3 virtual locality teams now in place and consistent working practices established. * Director of Children's Services "line of sight" to frontline practice to ensure adequate protection and safeguarding of children in place. * Heat maps established to monitor performance. * Increasing numbers of experienced workers in post:   April 17 - over 50% of Social Workers (SWs) were ASYE (Assessed & Supported Year in Employment), in Aug 17 this had reduced to 42%. Likewise the proportion of SWs with 3 or more years' experience has grown from 22% (Apr 17) to 34% (Aug 17).   * Ofsted Monitoring Visit October 2017 - improvements noted in quality of practice - "good to requires improvement"; practice is compliant with statutory requirements; audit effective and leads to actions (Focus on Children In Need). | 16 | Director of Children's Services | The risk is being managed and continues to reduce. |
| CR6 | Failure to comply with statutory requirements and duties relating to children looked after, children in need and children leaving care. | Legal/  Political | LA is legally and possibly financially liable, judicial review. Further OFSTED intervention. | * Corporate legal oversight. * Quarterly Safeguarding Report. * Serious incident reporting to ensure appropriate management oversight. * Serious Case Review learning shared. * Peer Review and Challenge. * Stronger management oversight in Districts. * Advanced Practitioners in post. * Case file audits check compliance and quality of practice. * Multi-agency inspections. Sector led Peer Review. * Performance monitoring - action taken to address areas of underperformance. | 25 | * Ofsted Monitoring Visit October 2017 - improvements noted in quality of practice - "good to requires improvement"; practice is compliant with statutory requirements; audit effective and leads to actions (Focus on CIN). * Work in line with residential and sufficiency strategies is being progressed. | 16 | Director of Children's Services | The risk is being managed and continues to reduce. |
| CR7 | Failure to recruit and retain experienced Social Work staff  Failure to recruit and retain Independent Reviewing Officers.  Failure to recruit and retain experienced BSO staff. | Organisational | Inability to deliver effective services.  High caseloads.  Lack of management oversight.  Increased staff turnover. Increased agency spend. | * Vacancy monitoring. * Children's Services Workforce Development Strategy and scorecard developed to improve recruitment & retention of staff. * Quarterly Safeguarding Report. | 25 | * As at April 17 over 50% of Social Workers were Assessed & Supported Year in Employments. In Aug 17 this had reduced to 42%. Likewise the proportion of SWs with 3 or more years' experience has grown from 22% (Apr 17) to 34% (Aug 17). | 16 | Director of Children's Services | The risk is being managed and the position is improving overall, although there are still parts of the county where recruitment & retention remains a significant challenge. |
| CR8 | Reputational damage and risk of Direct Intervention by DFE.  Negative media exposure. | Reputational | DFE manages services directly and removes them from the LA. Commission arrangements brought in.  Loss of reputation. Impact on partner agencies. | * Safeguarding and Audit arrangements. Direct management oversight of services. * Media planning around key issues and Serious Case Reviews. Scrutiny of key reports and information. Communication with Comms Team*.* | 25 | * 6 monthly DfE review held 2/3 November, informal feedback was positive. Outcome letter awaited. | 16 | Director of Children's Services | The risk is being managed and is reducing. |
| CR12 | Failure to implement/maintain systems that produce effective management information  Failure to improve quality of data in Liquid Logic's systems (LCS/LAS)  Operational failure in the main IT Computer Suite (T101)  Management Team and Cabinet need to consider service level required for business intelligence because there are insufficient resources to meet current need | Organisational | Ineffective collection, collation and input of data Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding and management demand e.g. around demographics and ageing population profile Ineffective reporting arrangements.  Statutory returns will be compromised, so incorrect performance will be reported nationally.  OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.  Service planning and management will be severely compromised.  Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery | * Information management strategy. Data Quality processes. Oracle. Local Information Systems. Corporate performance information. JSNA and other needs assessments * Weekly provision of information to operational managers. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. Use of exception reports to flag up data quality issues. * Over £200k has been invested to improve the back-up services for T101 to improve reliability. However, there are still potential risks regarding A/C cooling, maintenance of UPS units and insurance requirements regarding fire alarm links * External support to focus on Children's Services data issues. Introduction of new governance arrangements for children's services. Introduce a new performance management framework that is aligned to draft corporate strategy. * Accuracy Working Group and performance management framework ensuring continued use of management reports within children's social care were established * Multimillion pound refurbishment programme including upgrading the electrical infrastructure of county hall complex - to improve the reliability of the IT Suite. | 15 | * 'Passport to Independence' reporting work stream incorporating exception reporting. * 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. * Continued monitoring of data within Lancashire Children's Services. Programme of work rolled out to Lancashire Adult Services. New system roadmaps developed to provide more control over system changes. Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System. No major issues identified in recent Ofsted inspection. * Performance sub-group reporting the Improvement Board Chair * Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. * Electrical works on T101 data centre have been completed with upgrades to the supply and uninterrupted power supply complete. Back-up data centre in Telecity, Manchester now up and running and providing further resilience to services. | 12 | MT /Head of Corporate Services/Head of Business Intelligence | Level |
| CR16 | Management of the County Council's Assets | Organisational | Failure to maintain council owned assets and buildings.  Inability to deliver in the timescale required and impact on organisational ability to achieve savings  Failure to timely deliver a smaller more affordable property portfolio and associated savings. Inability to deliver service plans and savings effectively within required timescales, risks to service delivery across a number of services. Due to the high profile of Property Strategy (Neighbourhood Centres) delayed delivery could have reputational effect. Legal or public challenges. | * Effective planning and programming method of delivery. Management of organisational transition and effective engagement with operational services * Manage health and safety risks of customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. * Consider and manage risks associated with redundant properties. Planned maintenance approach. Risk assessments and regular H&S inspections. Presently undertaken by various operational service areas. * Communications strategy for property strategy | 16 | * Cabinet at its meeting in November 2017 agreed to the re-opening of several closed libraries and the delivery of a full library service. * Re-opening of closed libraries: The majority of the book stock from the closed libraries is in central storage and will be made available again when libraries re-open. Self-service equipment has been stored and some furniture has been retained. The service has a central management and resources infrastructure which will support the reopening of libraries across Lancashire. * Cabinet agreed new Facilities Management Structure to ensure a consistent approach across all properties is in place and that the County Council is legally compliant. * Cabinet in October approved the delivery of a programme of works to Older People's Residential Homes | 12 | Head of Asset Management/Head of facilities Management | Level –  In relation to assets the trend is downwards as the Premises Compliance Team improve strategic premises management activity  Property strategy – risks are significant but currently managed |
| CR20 | Transforming Care (Winterbourne)- the accelerated discharge of the population of adults with a Learning Disability from secure hospital in-patient beds into community houses | Economic/Political/Social | Increased pressure on the adult social care budget. Resettlement from hospital to community health and social care packages shifts the funding responsibility from solely NHS to a shared responsibility between CCG's and LA's to fund these high cost intensive health and social care packages. LCC may not be able to afford these new packages of care in the current financial climate. There is a National Plan to facilitate discharge therefore there is a reputational and political risk in not achieving as Lancashire is identified as a National Fast Track programme for this work due to the high number of Lancashire residents currently in in-patients LD hospitals. The closure of Calderstones hospital is part of this national plan. Failure to agree locally a reasonable figure for a dowry that is planned to follow a person from hospital (NHS) to LA's is a further financial risk. | * There is a governance structure for the Fast Track programme through the Fast Track Steering Group with representation from LCC Director Adult Social Care and HoS Commissioning working alongside SRO's from NHS and CCG's in order to achieve agreement on financial issues including the dowry and any future agreement for a pooled budget. There are identified work streams each with a defined action plan with leads identified from commissioners across Lancs. Work streams are monitored by the Steering group in addition to oversight by NHS England. The trajectory for possible discharge Sept 15- Mar 19 is to be carefully monitored so appropriate development and procurement of suitable housing and care can be planned for. * Development of a pooled budget between health and social care currently being developed. Still an interim agreement in place that funding for discharges comes 100% from health until the development of the pooled budget. Management Team have taken a position that all discharges will be funded by CCGs not by the Local Authority for the immediate future. Management Team have also committed to the development of a Pooled Budget with the NHS. | 16 | * Improved engagement with procurement colleagues to ensure due process is followed operationally in meeting the needs of this population. * Lancashire's Fast track plan identifies the implementation of a revised model of care for people with LD improving crisis support through multi-disciplinary teams. * This approach is aimed at reducing admissions and supporting providers to maintain a person's tenure in their chosen house rather than re-enter hospital. * The plan commits to securing improved and alternate care and housing solutions for this population with the aim of creating shared tenancies with back ground support, rather than the current single tenancy model currently used, which will be more cost effective. There are plans to stimulate the provider market to inform innovative solutions to providing for these peoples care * STP budget considerations * The financial risk had been negotiated with the CCG and immediate pressures remain offset whilst negotiations around the pooled budget take place. | 12 | Director of Adult Services | ↑the direction of travel is increased as these are new service users entering the social care system from the NHS, the risk is constant from a financial perspective as the cost will be high and require providing for life. (although there are plans to mitigate costs through a dowry system and improved commissioning solutions |
| CR21 | Service user/Customer risk associated with the inability to influence demand whilst expectations continue to rise | Reputational/social/economic/political | Demand and expectations continue to rise against a backdrop of reduced resources, thus leading to service failure and an increase in complaints. Failure to integrate health and social care to reduce pressures on demand and expectations as a result of ageing population.  Unacceptable waiting times for assessment and reviews including occupational therapy, safeguarding and social care reviews. | * Consultation and engagement with service users and customers. Co-ordination of communications. Changes and impacts communicated to stakeholders. Impact assessments. Alternative delivery options being explored as part of base budget review option development. Learning from complaints and oversight at CCPI. | 16 | * Alternative delivery options being explored as part of base budget review option development * In relation to adult and children's social care Newton Europe have been partly been engaged in this area of work * See opportunities entry on Healthy Lancashire * Early help and prevention investment in integrated wellbeing services * Children's demand management strategy * Additional capacity is being secured in key areas such as social work and occupational therapy * Realignment of management capacity in adult social care to provide improved focus on operational priorities * Clear triaging/prioritisation schemes at Customer Access Centre * Work with Newton Europe is underway to improve productivity * Working with health partners to improve arrangements around discharges from hospital * Communicating with stakeholders to ensure an understanding of the councils financial position and need for change * Communicating specific proposals and service developments in the context of the financial scenario * Financial management board monitoring budget pressures * 0-25 Board work ongoing * Adults demand assumptions – independent scrutiny and challenge by LGA * Partnership event focussing on risk and demand within children's services * Continued prioritisation of activity focussed on demand management and providing appropriate and effective placements for young people. Business case for Access to Resources Team progressed through MT and now being implemented. | 12 | MT | ↓ Downwards. |
| CR24 | Failure to achieve targets agreed with National Troubled Families Unit team due to the specific requirements of the programme.  Failure to provide robust data to evidence the impact on outcomes for those families engaged with the programme | Economic  Political | Failure to accrue maximum income from the programme for the authority  Possible reputational risk as a result of failing to meet the national target.  Risk of additional scrutiny of Lancashire's response to the programme | * Robust tracking processes in development with view to maximising payment by result claim opportunities. * Improvement plan implementation to ensure that 'attached' cases meet national TFU principles with operational staff. * Ongoing data matching to identify new eligible families * Business case to recruit to staffing vacancies approved. | 20 | * Development of reporting processes to ensure monthly progress checks against targets * Business case to request additional resources to support tracking and claiming processes * Redesigning of outcomes plan to set more achievable/realistic targets * Exploration of systems that can be used to undertake the necessary analysis for Lancashire's response to the programme. * Establishment of multi-agency "engine room" to drive multi-agency partnership working. * Workforce development ongoing for CAF and LP working. * Revised CAF documentation, Quality Assurance and processes to assist in meeting requirements. * Feed into consultation opportunities provided by DCLG. Monitor outcome of review. Maximise payment by results claims pending outcome of review. | 16 | Head of Children's and Families & wellbeing | Upwards |
| CR25 | Failure to implement and meet the statutory requirement to children and young people with special educational needs and/or disabilities. | Organisational | Not providing adequate service to SEND leading to inspection failure. Lack of appropriate IT platform. Failure to recruit and retain staff. Commissioning arrangements with health not consistent. | * Self-assessment completed against new framework * N/W regional peer support group established | 16 | * Implementation of the early help (IT) module. * Recruitment of qualified staff funded by the SEND reform grant. * Commissioning arrangements with Health being reviewed. * The service has just been subject to Ofsted and CQC inspection and awaiting outcome letter | 12 | Head of Special Education Needs and Disability | Level |
| CR26 | Proposed museum closures | Organisational/political/reputational/financial/legal | The proposal to close five museums has attracted negative publicity nationally, regionally and locally due to the national importance of the sites and collections  Impact on staff leading to sickness absence  Financial risk associated with not being able to close buildings because of the statutory responsibly to provide the service | * Regular contact is being maintained with colleagues in the commissioning team, asset management, equality and diversity, communications and business intelligence as and when required. * Decisions on process continue to be cleared through legal services and cabinet member where appropriate. * Expressions of interest have been invited for interested parties who can show that they have the resources and expertise to continue operating the museums and ensuring their collections continue to be made accessible to the public. * English Heritage have indicated that they will not submit an offer following discussions aimed at the transfer of ownership of Helmshore and Queen Street Mills. There are, however, ongoing discussions with Historic England regarding these two sites. * Fleetwood Museum will reopened on Good Friday, 14 April 2017 and the county council will manage the museum until the formal transfer to Fleetwood Museum Trust as the new operator is completed, expected to be no later than the start of June 2017. * Negotiations are continuing with regard to the future operation of The Judges Lodgings and Museum of Lancashire. | 16 | * The County Council has committed to re-open and manage Fleetwood Museum from the 1 April 2017 until the formal transfer to Fleetwood Museum Trust as the new operator is completed. * Options Appraisal for Queen Street Mill Textile Museum and Helmshore Mills Textile Museum * Public consultation has taken place to help inform the service design and future strategy of the museum service. * Equality Impact Assessments detailing mitigating actions have been undertaken. * A Cabinet Working Group (CWG) with a cross party membership together with senior officer representation has been set up to ensure that any handover of buildings and services which may take place is fair and robust. * The CWG will meet on a monthly basis and make recommendations to cabinet. * Information has been circulated to assist all staff with issues which may impact upon their health and wellbeing as a result of the proposals to close buildings. * Head of service and senior service managers communicates changes to all staff on a weekly basis. * The County Council has committed to re-open and manage Fleetwood Museum from the 1 April 2017 until the formal transfer to Fleetwood Museum Trust as the new operator is completed. | 12 | Head of Libraries, museums, culture & registrars | Level |
| CR27 | The mobilisation of the home care framework and subsequent service transfer process | Organisational/political/reputational/financial/legal | Risk of legal challenge to the tender process  Risk of significant increased costs to the Council  Risk of challenges in the mobilisation and transition  Capacity issues within teams to support the mobilisation and transition to the home care framework and ensuring that the Council's systems are able to support the requirements of the home care framework structure.  Challenges relating to providers  Potential disruption caused to service users. | * Staff and County Councillor briefing notes have been shared. * Steering group established. * Mobilisation workshop with services who will be required to support the project. * Evaluation of the implications for services have been identified through a self-evaluation form completed by each service who will be impacted. * Work has already been undertaken around systems. * Council services who have been engaged have a good understanding of the implications and what needs to be done. | 16 | * Transforming Social Care in Lancashire Board to oversee the mobilisation of the home care framework and subsequent service transfer process and that the Home Care Mobilisation Steering Group should report to this Board for decision making. * Project directly linked to the Passport to Independence Programme and involve Newton Europe in the development of the mobilisation plan. * Management Team have agreed additional resources to support the implementation of the home care framework | 12 | Director of Commissioning | level |
| CR29 | Delayed Transfer of Care (DTOC) | organisational | Service users staying longer in an acute hospital setting leads to deconditioning of service user (older people often loose skills and the physical ability to undertake activity), which increases reliance on social care post discharge and as a result an increased cost. Increased pressure on adult social care. Cost to the health economy, as prolonged hospital stay, will increase tariff. Effect on relationships with health economy and wider political impact. Inability to agree or deliver DTOC targets. Inability to manage short term pressure for reablement services. | * Regular data set produced and analysed by business information. * Cluster boards for P2I for reablement and acute joined to ensure good coms. * Focus at Better Care Fund (BCF)meetings * iBCF spending plan, which is intended to have positive impact on DTOC, agreed by HWBB in August 2017. | 20 | * Commissioning of a home care framework. * Increasing capacity of reablement service. * Implementation of eight high impact changes using BCF monies to facilitate. * Roll out of passport to independence in an acute setting * iBCF spending plan, which is intended to have positive impact on DTOC, agreed by HWBB in August 2017. * Development of dashboard to provide better Management Information within LCC.  Proposed discussions to ensure that activity related to DTOC Dashboards is joined up across the STP. * Health & Well Being Board Review - November 2017. * Proposed Health Scrutiny review - January 2018. * Mitigating actions above will not enable DTOC targets to be met within agreed timescales. | 20 | Dir of Commissioning | Upwards |
| CR30 | Failure to Prevent people being drawn into terrorist activity | Social | People suffer harm as a result of a terrorist incident. | * Burnley district has been identified as a level 2 priority area. * Multi -agency Contest Board in place and key risks identified to Lancashire Chief Executives Group. * Multi-agency Prevent delivery plan in place. * Local Risk Assessment Process in place. Channel process in place for referrals and intervention. * Robust reporting structures in place to respond to concerns/problems. Training Programme in place. * Safeguarding policy and procedures reflects Prevent Duty. * Other relevant policies and procedures including ICT reflect Prevent Duty. * Engaged with a range of civil society groups. * Established reporting structures in place. | 20 | * LCC Prevent Duty Strategy and Development Plan 2016/18. * Prevent Duty E-learning mandatory for key frontline and safeguarding staff (available on intranet for all staff, however, those staff without access to ICT the Prevent training is delivered through other mediums e.g. team briefing, newsletters, leaflets). * LCC attend Contest Board. * LCC Vice Chair of Lancashire Prevent Delivery Partnership (LPDP), other key services reps attend. LCC reps also attend Lancashire Hate Crime and Cohesion Group, Lancashire Adults and Children's Safeguarding Boards and Lancashire Schools Equality Group. LCC Vice Chair of Lancashire Channel Panel. * LCC Single Point of Contact (SPOC) links in with Emergency Planning and Lancashire Resilience Forum through HoS Health, Safety and Resilience. How to report concerns guide on LCC intranet. * LCC SPOC appointed as Home Office Prevent Peer which enables learning good practice from across England & Wales. * Prevent Duty built in to policies and procedures. LPDP currently developing Lancashire Prevent Communications plan with the pan Lancashire Communications group – LCC Communications rep part of process, expected November 2017. * LPDP Communications plan will include:- Lancashire wide messages responding to incidents, safety messages, busting myths, promoting good news stories, sharing information through social media etc. * Following the recent elections the arrangements for Political Governance and Information Sharing hare changed. Issues will be reported to cabinet as appropriate. | 20 | Dir of Commissiong | Although mitigation actions are in place and the County Council has demonstrated that we are meeting requirements of the Prevent Duty the residual risk score remains high to reflect national threat level |
| **Opportunity Identification Number** | Opportunity Description | Opportunity Type | Possible Benefits | Progress to date | Opportunity Score | Maximising Actions | Residual Opportunity Score | Opportunity Owner | Direction of Travel |
| CO2 | Delivering economic growth | Economic | Continued successful delivery of the LEP's current strategic economic growth programmes.  Successfully secured new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities. | * Lancashire Enterprise Partnership has secured almost £1 billion of national resources to deliver a transformational programme of economic growth which see the delivery of new jobs, business and housing growth and strategic transport infrastructure. Key programmes/projects secured include the Preston, South Ribble and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband. | 12 | * Work with local authority partners to ensure national resources to support economic growth and regeneration are secured.      * Maximise the support from key local and national public and private sector stakeholders outside of the County Council. * EDRF project 'Boost' has secured grant funding agreement until end of 2018 * Recent Growth Deal settlement of circa £70m will provide resource for six key projects to advance over the next three years. We are now looking to the consultation on the Industrial Strategy Green Paper, including the NPIF, to identify how the resource which lies behind this programme might effectively be targeted within Lancashire. We are now looking to a further bid which could take the project to 2020. * Whilst the opportunity to secure EU funds (underwritten by HMG) looks more positive in the medium term, we are also preparing in the event that EU Structural funds are replaced with competitive rounds of regional productivity funding. More may be signalled on this as the government's Industrial Strategy is confirmed. | 16 | Director of Economic Development | ↑ Upwards |
| CO4 | Health and Social Care Integration | Organisational | The principle of the separate organisations working together to align plans, strategies and budgets will involve the development of new delivery models and ways of working, to avoid duplication and focus activity where it is needed, recognising that current models of service delivery are unsustainable. Integration would provide the best opportunity to minimise the impact of funding reductions as well as providing a better offer for service users | Participation in the Healthier Lancashire programme building upon the "Alignment of the Plans" work undertaken  Sustainability and Transformation Partnership (STP).   * Influencing and shaping the process to take account of Combined Authority objectives if and where appropriate. * Aligning, where appropriate with existing work at a pan Lancashire level, and within individual health economies. * Consideration of new models of delivery and potential new funding arrangements, such as pooled budgets where appropriate. | 12 | * Recognise the need for: an ambitious vision, robust partnerships, clear and credible delivery plans, and strong leadership and governance arrangements at a pan-Lancashire level. * Lead the integration agenda, recognising the need for an ambitious vision, robust partnerships, clear and credible delivery plans. Strong leadership and governance arrangements at a pan-Lancashire level. * Consultation on new governance framework. | 16 | MT | Level |
| CO5 | Apprenticeship Levy and Apprentice % in Public Sector | Political  Economic  Social  Reputational  Organisational | Increase in Apprentices in the workforce and use the Apprenticeship levy to its maximum benefit to support critical development needs in the County Council | The Apprenticeship Levy is live from April 2017 and the first payment from the digital account was in May 2017. Work is being undertaken across LCC with Heads of service or their representatives to discuss their overall workforce development and what part the Levy could play in this. | 12 | * Maximise the benefits of the Apprenticeship Levy within LCC by working in conjunction with Management Team, Finance and HR to embed this into structures across the organisation. * Working with services to identify the quick wins where these suit their business need and to thus eliminate training expenditure where we can, and link to Levy fund. * L&D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible. * Heads of Service have been asked to report to L&D any current areas of training expenditure commitment that they have entered into. Heads of Services have been asked not to enter into any further financial commitments without speaking to L&D | 15 | HoS Learning & Development | Upwards |

**Key to Scores**

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| --- | --- | --- | --- | --- | --- | --- |
|  | CATASTROPHIC (for risk)  OUTSTANDING (for opportunity) | 5 | 10 | 15 | 20 | 25 |
|  | MAJOR | 4 | 8 | 12 | 16 | 20 |
|  | MODERATE | 3 | 6 | 9 | 12 | 15 |
| **IMPACT** | MINOR | 2 | 4 | 6 | 8 | 10 |
|  | INSIGNIFICANT | 1 | 2 | 3 | 4 | 5 |
|  |  | RARE | UNLIKELY | POSSIBLE | LIKELY | CERTAIN |
|  |  |  | **LIKELIHOOD** |  |  |  |