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| **Appendix A: Corporate Risk & Opportunity Register Q4 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 councils medium term financial strategy including the delivery of planned budget reductions | Economic | * In year overspends if estimates within the MTFS for the current financial year do not reflect the actual position (eg demand and inflationary levels) and/or agreed savings are not delivered. This could lead to further budget pressures and result in reserves depleting more quickly than planned. * Reductions in service and/or a drop in quality of delivery could lead to a legal challenge and damage the Council's reputation. * New legislative requirements may not be met. * The County Council may not be able to implement future large projects. * Potential for infrastructure to deteriorate. * Further national funding reductions could cause the minimum reserve position not to be maintained with the risk of not being able to set a balanced legal budget in future years. | * 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. * Service challenges to be undertaken with the use of benchmarking information to support discussions and decisions in relation to future savings identification and service delivery models. | 25 | * 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. * Benchmarking work being undertaken to identify lowest unit cost comparators as part of future budget savings. * Forecast underspend of £15.758m on the 2017/18 revenue budget. The forecast position however includes £54m from reserves. The revised forecast funding gap is £144.084m by 2021/22. * 2018/19 budget agreed by Full Council in February 2018 that included £81m of new savings to be achieved over the next 4 years. * A new Operational Plan has been agreed that has Financial Sustainability as one of its four key priorities. Service challenge will take place to review both costs and outcomes with a view to identifying further future savings to achieve a financially sustainable position. * The final financial settlement for 20 18/19 included and additional (one-off) £3.449m for Adult Social Care * Links to joint working 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 specific proposals and service developments in the context of the financial scenario. | 20 | Section 151 Officer | Work is continuously underway to review the budget position and identify potential decisions that could support reaching a financially sustainable position. Feedback into consultations from the government in respect of changes to the future funding of Local Government are a high priority as this could have a significant influence on financial sustainability. |
|  |  |  |  |  |  |  |  |  |  |
| CR5 | Failure to adequately protect and safeguard children | Social | Children are put at risk of harm. | * MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child. * Serious incident reporting in place with senior management line of sight to front-line practice. * Quarterly safeguarding meetings including the Chief Executive, DCS, Leader, Cabinet Member for Children, Young People & Schools, LSCB Chair and the Police. DCS meets with Cabinet Member and lead member on a fortnightly basis re current issues/developments. * SCR learning shared to improve safeguarding practice. * Effective audit framework in use. This has strengthened management grip and the quality assurance of practice. * External reviews of front-line practice completed including quarterly monitoring visits by Ofsted, the LGA peer review and six monthly DfE reviews. * Performance monitoring - action taken to address areas of underperformance via Data Quality and Performance Group. * Locality performance clinics chaired by CSC Heads of Service to address poor performance and reinforce good practice. * Monthly reports by the DCS to the Improvement Board on the quality of practice. * Increased Independent Reviewing Officer capacity and IRO completion of mid-point checks on case files to ensure timely progression of care plans for children looked after and subject to a child protection plan. * 12 Advanced Practitioner posts within the Audit Team provide advice and support to social workers & particularly ASYE's (Assessed & Supported Year in Employment) in respect of practice improvement. * Monthly compliance reporting of Strategy Discussions. * Social Work Academy established providing robust induction and continuous professional development for social workers. * Heat maps used to monitor performance and report on Annex A requirements in preparation for inspection by Ofsted. | 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 CIN). * Improvement Plan in place and further 12 week Improvement Plan in development to ensure a focus on agreed priorities. * Improvement and Accountability Board established, chaired by the Chief Executive to oversee implementation of the Improvement Plan and ensure services for children & families are effectice and improve outcomes for children. * Locality practice improvement meetings held. * Ongoing work to improve processes and practice in the MASH providing greater social work oversight and more timely decision making at the point of referral, with professionals able to speak directly to a qualified social worker with additional temporary capacity agreed to support this. * Agency social work team in place in the North providing additional capacity. * Work is ongoing to embed the risk sensible model across the multi-agency partnership, incorporating a more strengths based approach. * Sufficiency and commissioning strategy action plan has been developed to promote early permanence for children. * Leadership Academy is in development. | 16 | Director of Children's Services | The risk is being managed |
| 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 the residential and sufficiency strategies has been delayed as property works to the Bungalow (which will be the complex needs unit), Slyne Road (the ASU), and South Avenue (the crisis unit) is not yet complete. * DfE six month review in November 2017 similarly noted that the quality of practice was improving and plans were in place to embed and sustain improvement, although there remained inconsistency in the quality of practice. * Leaving care performance indicators show improvement. | 16 | Director of Children's Services | The risk is being managed |
| 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. | * Additional funding envelope. * Enhanced recruitment including children's services recruitment evenings and use of social media. * Agency social work team is currently providing additional capacity in the North Locality. * Weekly monitoring of SW workforce position and social work caseloads. * Increased focus on retention and conditions. * Additional temporary capacity provided for MASH. * Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development. Leadership Academy in development with a particular focus on skilling up first line managers to strengthen leadership of practice. | 25 | * Number of experienced workers in post continues to increase - there has been a reduction in the proportion of newly qualified (ASYE) Social Workers:   + April 17 - over 50%   + Aug 17 - 42%   + Dec 17 - 29.2% * The proportion of social workers with 1-3 years' experience has increased, as staff retention improves, and experienced workers now account for 70.8% of all qualified social workers. | 16 | Director of Children's Services | The risk is being managed |
| 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. | * 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. * 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 * Significant number of core systems in place and associated integration technology. Greater investment in mobile devices to support the property strategy and new ways of working - Social Care/Highways etc. Monitoring and performance information available. Digital board established with engagement from key senior managers - targets in place and roadmaps developed for the rollout of key initiatives and priority areas. Savings tracker in place. Digital Health Board representation and at operational group level. Integration tools with health developed and others under development. Integration tools with police in development. Significant potential needs to be maximised - focus on channel shift with required changes to internet site and approach to mobile applications to maximise the potential. New web tools available through the new customer access system being rolled out and once proof of concept tested will be rolled out in a targeted way. | 15 | * 'Passport to Independence' reporting work stream incorporating exception reporting. * 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. * Significant inroads made in improving data accuracy; this work is ongoing. * Development of improved performance and quality reports and heat maps is improving managerial oversight. * Clear governance structure in place to ensure a continued focus on data quality/accuracy:   • Data Quality and Performance Group.  • LCS Systems Steering Group - provides governance to the DQP Group.  • Practice Improvement Meetings (PIMs) looking at performance and data quality.  • Children's Portfolio Review Board - development of systems within Children's Services.  Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.   * Performance sub-group reporting the Improvement Board Chair * Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. * Highway asset Management System - Business Analyst to be assigned to support solution design * In relation to core systems, boards and working groups established to oversee progress and to set targets. Ongoing engagement with services to identify major benefits and to support implementation. Post system implementation groups in place to identify areas for development/opportunity and then be linked to system roadmaps and transformation change. | 12 | MT /Director of Programmes & Projects | Level |
| CR16 | Failure to adequately manage the county council's land, highway and property assets | Organisational | Service users or members of staff being harmed.  Potential increased cost of repair as a result of failure to appropriately maintain council owned assets and buildings | * Manage health and safety risks to customers and staff and ensure budgets are managed effectively to maintain assets to a satisfactory standard. * Monitor asset condition and ensure appropriate action taken to manage identified risks. * 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. | 16 | * Ongoing application of Transport Asset management Plan principles whilst managing defect repairs to keep roads safe and serviceable and meet public expectations. * 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. * Review approach to monitoring and managing property assets and risk mitigation ensuring appropriate action where necessary. * Cabinet in October approved the delivery of a programme of works to Older People's Residential Homes | 12 | Director of Property | Level –  In relation to assets the trend is downwards as the Premises Compliance Team improve strategic premises management activity |
| 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 workstreams each with a defined action plan with leads identified from commissioners across Lancs. Workstreams 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 | 12 | Head of Service, Policy, Information and Commissioning (Live Well) | Level |
| 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. | 12 | MT | ↓ Downwards. |
| 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 which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO. * Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood. * The failure to recruit and retain staff. * Lack of confidence in LA services. | * Following the SEND Local Area Inspection a WSA is being drafted to identify improvements to the service offered by LCC and the Clinical Commissioning Groups. The following areas were identified as requiring action:   + The lack of strategic leadership and vision across the partnership   + Leaders’ inaccurate understanding of the local area   + Weak joint commissioning arrangements that are not well developed or evaluated   + The failure to engage effectively with parents and carers   + The confusing, complicated and arbitrary systems and processes of identification   + The endemic weaknesses in the quality of EHC plans   + The absence of effective diagnostic pathways for ASD across the local area, and no diagnostic pathway in the north of the area   + No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities   + Poor transition arrangements in 0–25 healthcare services   + The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school   + The inequalities in provision based on location * The lack of accessibility and quality of information on the local offer. | 25 | * Implementation of the early help (IT) module. * Recruitment of qualified staff funded by the SEND reform grant. * Commissioning arrangements with Health being reviewed. * The actions to implement the Written Statement of Action. * Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. * Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. | 16 | Head of Special Education Needs and Disability | The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms. |
| 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. * The proposed transfer to the Fleetwood Maritime Trust will need approval at March Cabinet meeting. * 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. | 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. | 12 | Director of adult services | 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 BCF meetings. iBCF spending plan, which is intended to have positive impact on DTOC, agreed by HWBB in August 2017. | 20 | Commissioned home care framework. Increased capacity of reablement service including development of options to manage short term pressures. Weekly "winter" ops and commissioning meeting. Implementing of eight high impact changes using iBCF monies to facilitate. Roll out of passport to independence in an acute setting. Development of dashboard to provide better MI within LCC. Discussions to ensure that activity related to DTOC Dashboards is joined up across the STP. DTOC Board established. Programme Office defined future governance and programme management arrangements for BCF/iBCF/DTOC in LCC. Continued scrutiny by elected members. Mitigating actions above will not enable DTOC targets to be met within agreed timescales. | 20 | Exec Director of Adult, Health and Wellbeing Services | Level |
| 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. * 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. | 20 | Dir of Property | 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 nation 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 |
| C01 | Develop new pan-Lancashire approaches to public service delivery | Political | Local public services working together to gain the best opportunities for Lancashire. | * Discussions about how best to take this issue forward are ongoing | 12 | * Lancashire Leaders meeting 20th February 2018 | 16 | MT | Level |
| 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.  There is unlikely to be further Growth Deal funding opportunities, though the development of Local Industrial Strategies may provide further opportunities in the future, though scale and timescales are not known.  It is looking increasingly likely that the current European Structural and Investment Fund (ESIF) programme will run through to its planned conclusion at the end of 2020.   Some early policy announcements have been made around a replacement UK Shared Prosperity Fund but it is unclear how this will compare to EU funding in terms of scale, focus and priorities. | * 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. * ESIF monies, both Regional Development Funds and Social Funds, totalling circa £200m are currently ringfenced for use in Lancashire (LEP area) over the next 5 years.  This supports business support initiatives, innovation investment, environmental and flood mitigation measures as well as skills development and employability work.  Post Brexit vote, projects which have been through the full approval process are not able to sign a final contract with MHCLG and project funding is being restricted to spend prior to end 2018.  Significant beneficiaries include LCC, other local authorities, HEI's and Colleges. | 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. * The County Council to give greater consideration to using its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities. * A new Operational Plan has been agreed that includes economic growth as one of its key priorities * Economic Development's main ERDF project Boost, has secured a Grant Funding Agreement and is applying for funding to the end 2021.  Business Growth Service staff will, as far as possible, seek to frontload activity and spend within this project in-case funding or activity is prematurely curtailed.   For the programme as a whole, we have issued calls in all measures in an effort to defray as much of the programme as early as possible. We are now looking to a further bid which could take the project to 2021. | 16 | Director of Economic Development and Planning | Recent Growth Deal settlement of circa £70m will provide resource for six key projects to advance over the next three years. The LEP has secured a £320M Growth Deal programme to be delivered by 2021.  We are now looking to develop a Local Industrial Strategy to maximise new funding opportunity.  New national housing and transport infrastructure funds will be targeted in support of local strategic priorities.  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 completive rounds of national or sectoral  productivity funding.  The development of a UK Shared Prosperity Fund could also create new funding opportunities for place-based growth strategies – though further details not expected until later in 2018. |
| 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 | Dir of Corporate Services | Upwards |
| CO6 | Income Optimisation | Economic | An additional £2 - £4m of hitherto undetected income can be secured | Following a successful business case, and the use of the additional staff resource available since the restructure, income has significantly increased. Further research to identify additional cases to be billed is ongoing. | 16 | * Improve liaison with NHS bodies/LCC Social Care to identify billable cases promptly, particularly in relation to Mental Health. | 16 | Dir of Financial Resources | Radiates |
| CO7 | The completion of the County Hall Old Building refurbishment including the development of the Exchange conferencing facility is almost done.  This provides an opportunity to maximise the occupancy of the building and reduce staff travel time and costs through the provision of service focussed accommodation and facilities. | Organisational | Staff time and costs can be reduced through the provision of corporate accommodation.  The ability to manage and maximise the use of the building and provide facilities to support training and other partner events. | The Exchange opened on 1 August 2017.  All training from the Leyland Learning Centre has been transferred to the new training suite within the facility.  In addition to this, the conferencing provision from Woodlands has been transferred as have all bookings.  The wider refurbishment of County hall old building introduces much needed additional meeting rooms and greater use of existing space through open plan working.  A new staircase to support the increased occupancy has also opened. | 12 | * At this stage, a light touch approach is being adopted until the new facilities re fully embedded within the organisation.  Once any initial problems/issues have been identified and resolved, detailed performance management information will be produced and a campaign to maximise usage, and if needed, generate more income will commence. The FM restructure will provide resource to robustly take this forward and commence marketing and external customer opportunity. Work ongoing with Comms to develop information for LCC website. | 12 | Director of Property | New |
| CO8 | Develop and implement improved recruitment and retention practices to address increasing challenges | Organisational | Reduced staff turnover, especially 'hard to fill' roles; improve staff morale; reduce costs; reduce sickness absence; improve productivity. | Draft action plan produced. Focus initially on Children's and Adult Services. | 12 | * Align to wider draft 'People Strategy' | 16 | Dir of Corporate Services |  |

**Key to Scores**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 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** |  |  |  |