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| **Corporate Risk & Opportunity Register Q4 2018/19** | | | | | | | | | |
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| **Risk Identification Number (RIN)** | **Description** | **Risk Type** | **Possible Risk Consequences** | **Current Controls** | **Risk Score** | **Mitigating Actions** | **Residual Score** | **Risk Owner** | **Direction of Travel** |
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| CR1 | **Delivering the Operational Plan to ensure a strong and sustainable County Council**   1. Establishing a strong and visible leadership team 2. Embed a focus on service delivery to secure a better service at a lower cost 3. Develop a sustainable financial strategy | Organisational  Organisational  Finance | * Inability to deliver a balanced budget in future years * Inability to attract high calibre candidates leading to less effective governance arrangements * Lack of buy-in/engagement from staff * Managers do not possess the leadership skills required, leading to demotivated staff and poor service delivery * The organisation does not have the right people in the right jobs leading to service failure * Staff do not know what is expected of them and they do not possess the skills to adequately do their job * Unable to meet Terms and Conditions savings targets * Services become unsustainable and we cannot fulfil our statutory duties * Compounds ability to set balanced budget * Unable to deliver a balanced budget in future years * Insufficient reserves * Services become unsustainable and we cannot fulfil our statutory duties | * Priorities Board established comprising work stream leads and chaired by the Chief Executive * Programme Office is managing the overall programme of activity * Inspirational speakers – ongoing collection for future events have been identified * Corporate Management Team intranet pages updated * Cabinet agreed service challenge savings options on 3nd December 2018 * Introduction of new suite of Leadership and management modules to support development of LCC managers, linked to national occupational standards and apprenticeships. * MSc, MBA senior Leaders Apprenticeship procurement finalised. MBA –UCLAN; MSc - Lancaster. * Management Style Questionnaire – BTLS have altered this at our request and it is currently under test. The aim is to include this with the new Performance Engagement (PE) Tools. * A new Performance Management workshop has been rolled out for managers to complement the introduction of the PE process. * Staff survey completed. Briefed to CMT * Vision and Values communicated and plan to further embed * Research work on Induction Programme has commenced and scope is under development * Staff Survey Briefings to Dirs. and Heads of Service completed * Final proposed saving options agreed by Cabinet 3rd December 2018 and Full Council on 14th February 2019 as part of the 2019/20 budget setting process. * LOBO (Lender Option Borrower Option) redeemed with associated c£1.8m initial annual reduction in financing costs. * December Cabinet money matters report including c£77m of savings proposals from service challenge process and reduction in gap in 2019/20 from £60m to £14.6m and by 2022/23 down from £135m to £46M * January money matters cabinet report production covered outcome of provisional settlement and updated monitoring and Medium Term Financial Strategy position. - 2019/20 gap of £10.245m and a gap by 2022/23 of c£47m * Budget Scrutiny Working Group meetings have taken place over recent months with an emphasis on savings | 20 | * Development work on 'Our Vision for Lancashire' is nearing completion * Commence development for new Lancashire Induction * CMT Intranet pages – continue with content in new template style * Continue new suite of Leadership and management modules to support development of LCC managers, linked to national occupational standards and apprenticeships * Staff survey findings rolled out to Head of Service for action planning * Cross organisational themes to be assessed and links to People Strategy * MSQ and CFQ- new format being tested. Aim to roll out January. New Values are embedded into this new format * Development of 'Inspiration matters' short briefings will link to the newly communicated Values to support the embedding in the organisation. * Progress Information sessions with Staff, Managers and Universities in respect of MSc and MBA via Apprenticeship Levy. * Information to Communications Team to support organisational message surrounding Performance Engagement via CEO email * Corporate Management Team have agreed to a second phase of the service challenge process * New governance structure to be established * Develop process for further challenge. This will include:   + Further challenge for some phase 1 services based on updated benchmarking data   + Cross cutting themes (Organisational/Finance & Commercial/health & Care) * Commercialisation update to Internal Scrutiny. * Treasury Management / Investment and Capital Strategy production for January Audit Committee * Business Rate pilot application successful, progress with district council partners - governance arrangements and implementation. * Progress further work / analysis of a small number of proposals identified within service challenges but not sufficiently developed to make December Cabinet. * Support and development of service challenge 2 process / work streams | 16 (Major/Likely) | Overall Risk Owner is CMT however there is a lead officer for each work stream | This risk is being monitored by both the Priorities Board and CMT  Draft People Strategy to be informed by outcome of staff survey  Savings options agreed by Cabinet in December will be presented to budget Full Council in February 2019  Proposed corporate strategy 'Our Vision for Lancashire' document to be presented to Cabinet on 7th February and then Full Council on 14th February 2019  Service Challenge Phase 2 programme to be completed by Autumn 2019 |
| CR2 | Protect and safeguard children | People/Service delivery | Children are put at risk of harm. | * Clear line of sight to front-line practice at all levels: Chief Executive, Executive Director, Cabinet Member, Director of Children's Social Care, Deputy Director and all managers to ensure leaders have a good understanding of the quality of practice and the safeguarding arrangements in place across children's services. * Clear governance and accountability arrangements in place via the Improvement & Accountability Board and the six boards which report to it. * Effective partnership arrangements at a strategic and operational level which support multi-agency working to safeguard and promote the welfare of children. Clear escalation processes in place where there is a professional disagreement. * Quarterly safeguarding meetings including the Chief Executive, Director of Children's Social Care, Leader, Cabinet Member for Children, Young People & Schools, Lancashire Safeguarding & Children's Board Chair and the Police. * Director of Children's Social Care weekly meetings with Cabinet Member and Lead Member to discuss current issues/developments. * Serious Case Review learning shared to improve safeguarding practice. * MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child with more timely decision making at the point of referral. * Serious incident reporting in place to ensure an appropriate response to serious safeguarding concerns and when necessary notification to Ofsted/Department for Education (DfE). * External reviews of front-line practice by Ofsted, DfE, Local Government Association and North West Association of Directors of Children's Services to provide external, independent evaluation of the quality of practice. Robust audit arrangements and reporting in place to ensure an accurate understanding of the quality of practice. This has improved compliance and is starting to improve quality. * Performance monitoring undertaken with action taken to address areas of underperformance and ensure service user records are accurate and up to date. * Social Work Academy established providing robust induction and continuous professional development for social workers. * Leadership Academy commenced September 2018. | 16 | * The Children's Partnership will report to the 'Getting to Good' Board * In line with revised "Working Together", (July 2018), new multi-agency safeguarding arrangements to be established, to ensure there is a shared responsibility between agencies for safeguarding and promoting the welfare of children. * Safeguarding arrangements have been strengthened. Ofsted inspection (June 2018) - Inspectors broadly agreed with our self-assessment. * Annual Improvement Plan developed following the Ofsted inspection (June 2018) to ensure continued improvement at pace. The plan was presented to Cabinet for approval in December 2018. * The average caseload for all social workers remains stable at 20.0. However, the average caseloads for less experienced social workers are above target levels: ASYE: 17.2 - target: 15; 1 - 2 years: 22.3 - target: 20.0; 2 - 3 years: 22.7 - target: 20.0. | 12 (Major/possible) | Director of Children's Services | The proportion of newly qualified social workers (ASYEs) has continued to reduce which indicates that retention of newly qualified staff is improving with staff remaining in Lancashire as they gain experience.  This reflects the support provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy.  The proportion of social workers with over three years' experience has also improved indicating that experienced staff are also being retained. However staff retention in some teams remains a challenge.  Whilst experience levels are improving, some teams still have a high proportion of ASYEs which impacts on caseloads and workload management within the team.  Across all experience levels some social workers have caseloads significantly higher than the county average. This impacts on the quality of practice and is an inspection risk in terms of our ambition to achieve consistently good outcomes for children. Caseloads are being reviewed by the Acting Director of CSC alongside staff vacancies and the use of agency staff. |
| CR3 | Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care. | People/service delivery | Local authority is legally and financially liable, and may be subject to judicial review if found in breach of its statutory responsibilities.    Further DfE intervention if Ofsted judge Children's Services to be inadequate. | * Robust audit arrangements including monthly audit cycle to check compliance and the quality of practice. Corporate legal oversight. * Serious incident reporting to ensure appropriate management oversight. * Serious Case Review learning shared. * External inspection and peer reviews. Ofsted inspection of Children's Services in June 2018 noted significant improvements, with an overall effectiveness judgement of requires improvement to be good. Practice is compliant with statutory requirements and audit is reliable and effective. The way in which help and support is delivered to children in need is no longer a cause for concern. The Council is described as a committed and responsible corporate parent and the response to care leavers is now much more focused and supportive. * Clear line of sight to front-line practice from the Cabinet Member and Director of Children's Social Care and Stronger management oversight in districts. * The Social Work Academy and advanced practitioner workshops are promoting Lancashire as a learning organisation and are supporting staff retention. * Independent Reviewing Officer capacity has been increased and has strengthened compliance. | 16 | * Sufficiency strategy: Both the Bungalow (complex needs unit) and Slyne Road (Adolescent Support Unit) are now registered with Ofsted. Building work at South Avenue (the crisis unit) is not yet complete. * The Better for Children Development Plan has been produced to address the recommendations from the inspection and progress will be monitored via the Improvement & Accountability Board. * A schedule of audit team priorities was agreed at Senior Management Team (Oct 18 - Feb19) to ensure a continued focus on the quality of practice. The agreed work is progressing. | 12 (Major/possible) | Director of Children's Services | Since the inspection in June 2018 the pace of progress has slowed. The focus is now on making the cultural shift from compliance with statutory requirements to improving the quality of practice.  Further work is required to address variability in the quality of practice, to ensure that all children in need receive a consistently good service. The pace of change needs to accelerate as part of our continuing improvement journey from requires improvement to be good.  Children's services will be re-inspected in 2019 under the ILACS inspection framework (Inspection of Local Authority Children's Services). The focus will be on permanence.  Preparation for this inspection has commenced and will include an external peer review by the Local Government Association.  The Getting to Good Plan sets out agreed priorities and timescales. |
| CR4 | Recruit and retain experienced staff within Children's Services | People/service delivery | Inability to deliver effective services.  High caseloads.  Lack of management oversight.  Increased staff turnover. Increased agency spend. | * Vacancy monitoring via quarterly workforce report; monthly monitoring via Improvement Dashboard. Weekly monitoring of social work workforce position and caseloads. * Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development. * Revised supervision policy now in place to support staff retention. * Social Work Academy established providing robust induction and continuous professional development for social workers, including ASYEs. * 12 Advanced Practitioner posts support social workers to aid staff retention. * Leadership Academy now in place with particular focus on up-skilling first line managers to strengthen leadership of practice. | 20 | * Development programme for more experienced Grade 9 social workers. * Improve compliance with supervision requirements to ensure staff receive appropriate support. * The proportion of inexperienced workers (ASYEs) in post in April 17 was 50.1% and as at the end of December had reduced to 29.8%. This figure has increased slightly in the last quarter (Sep 18 - 27.8%) which is attributed to the drive to reduce the use of agency staff which has reduced from 46 FTE in September to 41.5 as at the end of Dec 18. * The proportion of experienced workers in post in April 17 was 15.2% and has increased to 35.9% as at the end of December 2018. However, agency staff still form a considerable part of the experienced worker cohort, accounting for 33.8% of the cohort of experienced social workers. * The average caseload for all Children's Social Care social workers remains stable at 20.0 as at the end of December, although some social workers have caseloads significantly higher than the county average. | 12 (Major/possible) | Director of Children's Services | Retention of staff in children's social care has improved since April 2017, with more newly qualified staff and experienced staff choosing to remain with Lancashire.  This reflects the support that is provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy. The proportion of social workers with over three years' experience has improved indicating that experienced staff are also being retained.  The Better for Children Development Plan sets out agreed priorities and timescales |
| CR5 | Managing our data well and producing effective management information | Organisational | Ineffective collection, collation and input of data  Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented.  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 demand management e.g. around demographics and ageing population profile  Ineffective reporting arrangements.  Statutory returns will be compromised, so incorrect performance will be reported nationally, with potential for negative financial consequences  OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.  Service planning and management will be severely compromised.  Potential for incorrect payment of providers, staff etc | * Information Management Strategy. * Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services * Data Quality and Performance Group oversees quality of information in systems for children's services * Regular provision of management information to staff at all levels across adults and children's services helps to embed ownership of data and improve recording. * Use of 'exception reports' which proactively highlights data anomalies and inconsistencies. * Development of a Corporate Performance Dashboard is facilitating a council-wide view of all services, which will improve the quality of reported data as anomalies will be highlighted. | 16 | * 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. * Performance and Data Quality Group (Children's Services) is a well-established group facilitated by the Practice Improvement Officer. Heat maps have been designed to monitor Annex A data quality. * Clear governance structure in place to ensure a continued focus on data quality/accuracy:   • Data Quality and Performance Group.  • Practice Improvement Meetings (PIMs) looking at performance and data quality.  • Children's Portfolio Review Boards have oversight of development of systems  Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.   * Draft Digital Strategy – the developing strategy has a work stream relating to data and developing an information architecture across the core systems. * A strategy for Business Intelligence and reporting is being developed and will be presented to Corporate Management Team * A Performance Management Framework is being developed to supplement the proposed new 'Our Vision for Lancashire' document * Workshops have taken place with the Business Intelligence Service to identify Corporate Reporting. * The outcome of these workshops will form the basis of requirements for how the council manages reporting in the future. This will be an integral part of the Digital Strategy. | 12 (Major/possible) | CMT | Children's - Regular meetings with Deputy Director Children's Services and Executive Director  Escalation via Improvement and Accountability Board. |
| CR6 | Implement/maintain core systems that support the organisation, deliver transformational change and deliver efficiencies, cost reductions and produce effective management information that supports management decision making. | Organisational/Reputational | Failure to deliver transformational change. Failure to deliver efficiencies and cost reductions.  Failure to produce the information needed to support management decision making.  Lack of management buy-in from service areas to drive forward change.  Failure to ensure that services work to new practices in a consistent way so as to maximise the benefit from investment in new technology.  Ineffective reporting arrangements. Statutory returns will be compromised, so incorrect performance will be reported nationally.  Ineffective working practices and targeting of resources to work priorities.  May impact on response times.  OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.  Service planning and management will be severely compromised. | * Roadmaps have been developed for all key major systems. Governance arrangements in place with full impact assessment carried out for all system changes. * Central co-ordination, control and monitoring in place which assists in performance management of BTLS. Corporate wide approach implemented for all system changes involving services, L&D, BI etc. on wider impacts and how system changes are managed into the business. * Sign off arrangements for roadmaps, including prioritisation of work, are in place. Boards have been established for major system implementations. * Current major implementations are: Early Help Module, Education, Health and Care Plans Module, MASH and CSE. Which are due to go live in early October 2018. * Information management strategy and approach being rolled out with all new systems. * Small transformation team available to support system changes and implementations supplemented by relevant service areas to encourage ownership, super users etc. Local Information Systems still exist but are being replaced over time with new core systems and other corporate solutions, i.e new Highways solution has replaced 23 existing systems. * Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. JSNA and other needs assessments. Discussed with various management teams on an ongoing basis. Weekly provision of information to operational managers for LCS * Performance Data on projects supplied to the Corporate Dashboard from PPMS. * New operating process and procedures developed and implemented to overcome recurring issues/problems - continuous improvement cycle implemented. | 16 | * Continued monitoring of data within Lancashire Children's Service. * Governance Boards established for Early Help Module, Education, Health and Care Plans module, MASH and Child Sexual Exploitation. * No major issues identified in recent Ofsted inspection. * Critical incidents escalated within Corporate Services and BTLS. * Internal Audit have given Substantial assurance over the effectiveness of controls operating over the Systems Support function within Core Systems. * New system roadmaps developed to provide more control over system changes. Core Systems are continually reviewing request against council priorities and strategies. * HAMS specific - Fortnightly meetings with Highways Service continue, with focus on discussing and managing operational issues, with a continuous tracking of issues and timescales for rectifying these. * HAMS Specific - Implementation of improvement plan almost complete, outcomes recorded and monitored against audit report. Highways Improvement Board continues to operate, and transition to Business as Usual being developed. Supported by Core Systems and Programme Office. Comprehensive training and support plan for the service being delivered. * HAMS specific – follow-up Audit review undertaken and report expected in January 2019. * Close working with Business intelligence and BTLS to undertake Landscape Review of reporting across the authority – completion due Oct 2018 * The development of an architectural vision for the digital strategy is underway, working closely with BTLS. This includes a landscape review of existing technologies. First draft under review. * Critical incidents escalated to Director and through BTLS. | 12 (Major/possible) | Director of Programmes & Project Management | On-going review and control of development work plans and roadmaps through relevant Portfolio Review Boards  Establishment of overarching review and control of Work Plans and Roadmaps by Digital Board.  Access for managers to simplified Oracle reports is being developed  Adoption of Digital 1st Strategy March 2019  Programme delivery model for Early Help Module/ Education, Health Care Plan to be replicated across new system delivery projects and programmes – demonstrates effective service participation and ownership of system integration |
| CR7 | Delivering major projects/schemes on time and within budget | Development & regeneration | Scheme viability in doubt due to speculative estimating and project management  Pressure on capital programme | * Capital Board * Capital Programme reports to Cabinet * Active project and programme management | 16 | * Initial review work undertaken of a sample of major capital schemes including Lancashire Central to improve the estimating and testing of current and future scheme costs. These include:   + Reporting of cost ranges for new schemes   + Routine updating of cost estimates   + Inclusion of contingency at industry standards and benchmarks * Governance of the capital programme has been strengthened under the auspices of the Capital Board where responsibility for oversight and challenge of cost estimates and capital budgets sits.  A comprehensive review of the projects for 2018/19 including prior year slippage has been undertaken by project and programme managers, supported by finance and commissioning.  The primary purpose of the review was to propose a delivery programme for 2018/19 which was approved by Cabinet in September and which now forms the agreed baseline for monitoring purposes.  The review was focused on:   + Updating the delivery programme for 2018/19 informed by the delivery performance in 2017/18 and previous years.   + Reviewing the level of funding available for unallocated budgets and the requirement for these to be continued to be carried forward.   + Removal of budgets previously included in 2018/19 which have been carried forward from previous years where there is no expectation or plan of delivery in 2018/19.   + Of the new approved projects a realistic assessment of 2018/19 deliverability was made with delivery timeframes and budgets being moved to future years where appropriate. * Restructuring to ensure the service has the resources with the right skill sets * Update reports to Audit, Risk & Governance Committee | 12 (Major/possible) | Exec Director Growth, Transport and community services | The proposed delivery programme for 2018/19 has been risk-assessed as being deliverable and to which project and programme managers will be held accountable using the following actions:   * Detailed monitoring of the delivery programme through 2018/19 to ensure slippage is reported in a timely manner and a robust level of challenge is provided to programme and project managers to ensure delivery remains on track. * Performance reports developed to enable the Capital Board to undertake this monitoring and challenge. |
| CR8 | Delivering a statutory service for children and young people with special educational needs and/or disabilities. | People/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 council services.  The lack of accessibility and quality of information on the local offer | * Following the SEND Local Area Inspection a 'Written Statement of Action' (WSA) has been submitted 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 | 25 | * 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. These include:   + *SEND Partnership Board established with five thematic working groups to implement the written statement of action.*   + *SEND Partnership team delivering a series of parent/carer engagement events across the county. Further programme of events are being planned for the autumn.*   + *Open feedback survey in place.*   + *Supporting the formation of a Lancashire Parent/Carer forum.*   + *Implementation of the early help (IT) module.*   + *SEND Partnership Board has agreed SEND Vision, Values and Strategy*   + *New Partnership Chair appointed*   + *New Branding for the SEND local offer* * Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. * Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. | 12 (Major/possible) | Director of Children's Services | The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms.  The monitoring visits by DfE and NHS England have confirmed continued progress has been made. |
| CR11 | Supporting disadvantaged families to fulfil their potential (Troubled Families Programme) | People/Organisational | Failure to achieve Payment by Results targets due to specific requirements of the programme.  Failure to accrue maximum income from the programme for the authority.  Failure to meet savings target attributed to the service for current financial year.  Possible reputational risk as a result of missing a national target.  Possible reputational risk if progress not made with the Troubled Families Unit (TFU) Maturity Model and service transformation with partners.  Risk of additional scrutiny of programme | * No governance procedures in place with responsibility for Troubled Families Unit oversight. Robust tracking processes in place with view to maximising payment by result claim opportunities. * Ongoing data matching to identify new eligible families | 20 | * Development of reporting processes to ensure monthly progress checks against targets * Redesigning of outcomes plan to set more achievable/realistic targets * Review of Governance Arrangements commissioned. * Districts supported to identify families where potential claims can be made * Workforce development complete for shared assessment. Lead Professional and Risk Sensible approach. * Revised assessment CAF documentation, Quality Assurance and processes to assist in meeting requirements. * TFU Maturity Model self-assessment completed and developed action plan to support delivery and improvement. * If the funding for this programme ceases then this will result in a pressure on the budget of £2.1M | 16  (Major/Likely) | Director of Public Health | As at 14th December 2018 payment by results claims had been made for 3,155 families (37% of the target for the life of the programme) where significant and sustained progress was evidenced. The current positive trajectory is anticipated to continue to improve with the team ensuring that all available data and information systems are fully utilised to maximise PBR claim opportunities.  The service has a reduced capacity to meet the TFU targets since the implementation of a £1.25m budget reduction to the CFW service. This has reduced caseload capacity from 10k families a year to 7k families a year. The TFU target is to 'turn around' 8620 families. |
| CR 13 | Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After numbers. | People/Organisational | * High, unmanageable caseloads. * Potential drift and delay - impact on timeliness of assessment, plans and interventions with children & families.   Financial implications. | * Data Quality & Performance Group oversees data accuracy, ensuring reliable performance data to aid managers understanding of demand. * Weekly and monthly performance reports provide trend data. * Monitoring of performance and caseloads via Children's Social Care Senior Leadership Team. * Monthly Practice Improvement Meetings in each locality chaired by the Head of Service to scrutinise performance. * Sufficiency Strategy includes targets to reduce CLA numbers through prevention of S20 accommodation and children exiting from care. More effective placement finding will also reduce costs. * MASH and Demand Management Board oversees front door arrangements and quality and appropriateness of contacts/referrals. The Board reports to the Getting to Good Board. * Becoming Looked After Panels in each locality to consider all placement requests. * Challenge via monthly Children's Services Finance & Monitoring Board re savings targets. | 20 | * Demand analysis, including dip sampling of cases, being completed as part of service challenge to inform our understanding of the source, type and reasons underpinning the increase in demand seen in recent months. This will identify learning, commissioning gaps and whether demand can be managed differently. * Track and challenge meetings chaired by Improvement Partner established in each locality to ensure appropriateness of care plans for CLA and to reduce costs. * Tracking of home placements awaiting revocation, to ensure, where appropriate, more timely discharge of Care Orders for children placed with parents | 16 (Major/likely) | Director of Children's Services | The number of referrals to Children's social care continues to be high  The number of children looked after has continued to increase, although similar and larger increases have been reported both nationally and regionally.  The increase in demand continues to impact on social work caseloads, with the average caseload at 20.0 at the end of December, however this is a slight decrease in comparison to recent months. (20.9 - September, 22.9 June), although some caseloads are significantly higher than this.  Further action is being taken to address this:  Scheme of delegation reviewed and Head of Service approval now required for children becoming looked after.  Successful life chances bid will support children on the edge of care.  Increased use of Family Group Conferencing as a demand management strategy.  Adolescent Support Unit and Outreach Service are preventing the need for accommodation.  Re-launch of revised pre-proceedings protocol, with tighter management of pre-proceedings cases.  Challenging targets set in the Getting to Good Plan to reduce the number and rate of children looked after. |
| CR14 | Intermediate care for older people in a residential setting | People/Organisational | * Operational issues leading to service failures * Unavailability of community beds for older people on a short term basis * Prolonged period of rehabilitation and recuperation before the person goes home * Delayed transfer from hospital * Reputational challenge for the Council if care homes operated by the council are judged by CQC as ‘Requires Improvement’ | * New Head of Service has been appointed and a programme to drive forward changes in management culture and performance has been developed * Management responsibilities have been realigned | 16 (Major/Likely) | * A review of the Lancashire intermediate care system is being commissioned using money from the Better Care Fund, and will include consideration of the best practice model for each service area including the community beds. Consultants have now been appointed and are undertaking initial investigatory work. * Working with NHS colleagues to agree joint action plans * Discussion with CQC on lessons learnt and action plans * County Council care homes will formally be part of RADAR and QUIP safeguarding systems * A quarterly Quality Assurance Panel will be set up with Director of Adult Services and Head of Service presenting a progress report against the action plans the Executive Director, Head of Safeguarding and an external NHS representative | 12(Major/Possible) | Executive Director for Adult Services and Health & Wellbeing | Following the implementation of the mitigating actions CQC ratings have improved. |
| **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 | **Delivering the Operational Plan to ensure a strong and sustainable County Council**  Delivering growth and prosperity for the whole of Lancashire | Development & regeneration | Self-sustaining organisation  Stronger and growing economic base  Ability to deliver affordable high quality services with outcomes relevant to the needs of our residents, communities and businesses  Improved productivity and earning power of all residents  Continued successful delivery of the LEP's current strategic economic growth programmes.  Successfully securing 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.  Prospects of a strong collaboration across the local authorities, bringing stronger institutional leadership, including the LEP but across all sectors and partners. | * Lancashire Enterprise Partnership (LEP) has secured and is delivering through partners 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. * European Structural & Investment Funds (ESIF) monies, both Regional Development Funds and Social Funds, totalling circa £200m are currently ring-fenced 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 the Council, other local authorities, Higher Education Institutes' and Colleges. * Secured national Digital Skills Pilot status * Lancashire Leaders collaborating around a Lancashire Plan and a series of Theme Groups, to secure a new conversation with HMG. * The purpose of the approach is to get Lancashire over the line and into the 'fast track' of Combined Authorities to access differentiated policy and funding streams. * Seeking a single strategic framework and evidence base. * NW Made Smarter Lancashire pilot launched. Lancashire is one of five NW LEPs co-designing this programme with industry partners. * Lancashire Transforming Cities Fund success to be taken to the next stage. * Lancashire HIF Bids to be taken to the next stage. | 12 | * Strong leadership and collaboration led by local authorities and partners to maximise national resources to support economic growth and regeneration are secured, including strategy and tactics to get into the 'fast track' of places securing priority policy frameworks and funding streams. * Optimise the support from key local and national public and private sector stakeholders outside of the County Council. * The County Council to continue to increasingly use its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities * Growth Deal programmes 1, 2 and 3 to be delivered by 2021. * LEP, universities,, private sector and local authorities and others to collaborate to formulate a differentiated Local Industrial Strategy for Lancashire, aligned with other key strategies, such as LTP, Local Plans, and city, town and rural regeneration. * Economic Development's main ERDF project Boost has secured funding in to the medium term.  This will provide rapid response support in light of Brexit as well bring support and investor confidence more generally. * Development of a strong LEP is crucial to the development of a strong economy. Preparations in hand to provide a strong lean strategic collaborative LEP capable of mobilising partners, to deliver priority outcomes.   The LEP is primarily already compliant with the Review but LCC is keen to secure a bold and ambitious approach.   * On-going input to work of Transport for the North on strategic development corridors | 16 (Major/likely) | CMT | EU continuity funding is secured for the Brexit transition. However, there is a lack of clarity around the next Spending Review, the Shared Prosperity Fund and other government initiatives.  A big risk sits around the continuing prioritisation of Combined Authority areas.  We are now looking to move forward with a strong collaboration across local authorities and the production of a Local Industrial Strategy to maximise new funding opportunities. New national housing and transport infrastructure funds will be targeted in support of local strategic priorities.  A push to get Lancashire into the 'fast track' of areas with future deals, single pots and strong evidence led and mature relationships and approaches, with a strong supportive LEP, is an important strategic direction and priority. |
| CO2 | Apprenticeship Levy and Apprentice % in Public Sector | People/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 * Close working relationship with the LGA and we are focussing currently on Higher degree apprenticeships. LGA will be supporting LCC in developing a strategy and future spending plan. | 15 (Outstanding/possible) | Dir of Corporate Services | We now have more Standards available to us, which we have been waiting for and we have developed a draft strategy with the LGA support which we intend to share with Director, HR, Finance , CMT |
| CO3 | Develop and implement improved recruitment and retention practices to address increasing challenges | People/Organisational | Reduced staff turnover, especially 'hard to fill' roles; improve staff morale; reduce costs; reduce sickness absence; improve productivity. | Action plan approved by CMT. Some of the focus will be on Children's and Adult Services initially | 12 | * Align to wider draft 'People Strategy' * We have started to develop the foundations of smarter recruitment practices which are being piloted in Adults and Children's Services. * We are also building and developing the Lancashire brand to help us attract high quality candidates. * LCC Recruitment Portal launched successfully on 17.12.18. Career site to be launched 07.01.19. Project Board and Project Plan remains in place, along with identified resources | 16 (Major/likely) | 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** |  |  |  |