Corporate Risk & Opportunity Register Q2 2019/20

Risk Identification Number (RIN)	Description	Risk Type	Possible Risk Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel

CR1	**Reshaping the County Council**
	
	1. Through our People Strategy, ensuring adequate workforce plans, capacity and skills are in place across the organisation
		Organisational	• Inability to deliver a balanced budget post 2022/23
			
			• That the council will not be sufficiently radical or innovative to transform services at the required pace to achieve the scale of change needed over the next 12 months and beyond
			• Change opportunities will be missed that may result in us not meeting the needs of service users or delivering a balanced budget.
			• 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
				• Service Challenge Board has been established chaired by the Director of Strategy & Performance
				• Financial Monitoring Boards have been established that are each chaired by the relevant Executive Director
				• Programme Office is managing the overall programme of activity
				
				• Vision and Values communicated and plan to further embed
				• Implemented a new recruitment system and building a Lancashire brand. This has:
				   ○ Improved speed of recruitment
				   ○ Streamlined processes
				   ○ Improved flexibility
				   ○ Established a new career site
				   ○ Introduced a new on-boarding function
				• Improved the health & wellbeing of our staff & improved attendance at work
				• Reviewed and updated performance Engagement
				• Increased employee engagement opportunities
				• New online DBS system
					20	• Develop a new behavioural framework as the basis from which to drive organisational change
						• Commence development for new Lancashire Induction
						• Continue new suite of leadership and management modules to support development of LCC managers, linked to national occupational standards and apprenticeships
						• Heads of Service developing and implementing action plans in response to results of staff survey
						• Staff Survey 'pulse surveys' to evaluate progress against baseline
						• Cross organisational themes to be assessed and links to People Strategy
						• Development of 'Inspiration matters' short briefings will link to the newly communicated Values to support the embedding in the organisation.
						• Staff identified and enrolling on MSc and MBA via Apprenticeship Levy
						• Continue to embed a healthy workplace
						• Develop a workforce planning framework
						• Implement an enhanced induction offer linked with on-boarding
						• Payroll integration
						• Further develop social media presence
							16 Major/ Likely	Overall Risk Owner is Corporate Management Team (CMT) however there is a lead officer for each work stream	This risk is being monitored by the Service Challenge Board, Financial Monitoring Boards and CMT
									
									Draft People Strategy to be informed by outcome of staff survey

	2. Further embed a focus on service delivery	Organisational	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 and unable to deliver a balanced budget post 2022/23 • Insufficient reserves	• New governance structure established. Phase 1 savings being monitoring by Service Challenge Board and Financial Monitoring Boards • Continue to work with staff to develop new options and revisit options • Continue to seek out, learn from and adapt services to follow best practice • Corporate Management Team have agreed to a second phase of the service challenge process • Treasury Management / Investment and Capital Strategy agreed at January Audit, Risk & Governance Committee		• Develop process for further challenge. This will include: ○ Further challenge for some phase 1 services based on updated benchmarking data Cross cutting themes. There will be a number of work streams under each crosscutting theme with a named lead ▪ Organisational ▪ Operational design ▪ Terms & conditions ▪ Commissioning ▪ Property ▪ Transport ▪ Finance & Commercial ▪ Schools ▪ Broader commercial activity ▪ Health & Care ▪ Front door • Business Rate pilot - 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.			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. • High profile safeguarding incidents can attract national media attention and trigger an early inspection by Ofsted and ultimately Department for Education (DfE) intervention	• The protection and safeguarding of children, and oversight, is at all levels from Chief Executive to front-line managers to ensure there is an accurate understanding of the quality of practice. • Clear governance and accountability arrangements are in place via the Getting to Good Board and the six boards which report to it: ○ Workforce Development Board ○ Purposeful Practice Board ○ Multi-Agency Safeguarding Hub (MASH) and Demand Management Board ○ Permanence and Children In Our Care Board ○ Data Quality and Performance Board ○ Children's Partnership Board • There are effective partnership arrangements at a strategic and operational level. • External reviews of front-line practice is provided by Ofsted, DfE, Local Government Association (LGA) and North West Association of Directors of Children's Services (ADCS) to provide	12	• In line with revised "Working Together" new multi-agency safeguarding arrangements are being established, to ensure there is a shared responsibility for safeguarding and promoting the welfare of children. • Getting to Good Plan is now completed following the Ofsted inspection to ensure continued improvement. • In June 2019 a Peer Challenge was undertaken with a focus on Multi Agency Safeguarding Hub (MASH) and demand management.	12 Major/ possible	Director of Children's Services	Safeguarding arrangements have been strengthened. Ofsted inspection (June 2018) - Inspectors broadly agreed with our self-assessment. There has been a further 2.9 % increase in the number of children on a Child Protection Plan since the last quarter (Q3 - 1329, Q4 – 1368, Q1 19/20 1407). The risk remains static, and work continues via the Getting to Good Board, and the six Boards which feed into it.

				external, independent evaluation of the quality of practice.					

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.
				• The protection and safeguarding of children, and oversight, is at all levels from Chief Executive to front-line managers to ensure there is an accurate understanding of the quality of practice.
				• Clear governance and accountability arrangements are in place via the Getting to Good Board and the six boards which report to it:
				   o Workforce Development Board
				   o Purposeful Practice Board
				   o MASH and Demand Management Board
				   o Permanence and Children In Our Care Board
				   o Data Quality and Performance Board
				   o Children's Partnership Board
				• There are effective partnership arrangements at a strategic and operational level.
				• External reviews of front-line practice is provided by Ofsted, DfE, LGA and North West ADCS to provide external, independent evaluation of the quality of practice.
					16	• The Getting to Good Plan has been produced to address the recommendations from the inspection and progress will be monitored via the Getting to Good Board.
						• 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.
						• Children's services will be re-inspected in 2019 under the Inspection of Local Authority Children's Services (ILACS) inspection framework. The focus will be on permanence. Preparation for this inspection has commenced and will include an external peer review by the Local Government Association in May/June 2019.
							12 Major/ possible	Director of Children's Services	There has been some positive improvement in performance which have included Children Looked After (CLA) visits within timescale improved (Q4 87%, Q1 88%, CLA Reviews in timescales have improved - (Q3 90%, Q4 91%, Q1 94%).
									
									Some areas for further improvement Care Leavers in employment, education or training (EET) declined slightly - (Q4 92%, Q1 90%) and Care Leavers in suitable accommodation has also deteriorated - (Q4 49%, Q1 46%)
									
									The focus continues to be on a 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. The Getting to Good Plan sets out agreed priorities and timescales.
CR4	Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After (CLA) numbers	People	• Potential drift and delay - impact on timeliness of assessment, plans and interventions with children & families. • Financial implications.	• Clear governance and accountability arrangements are in place via the Getting to Good Board and the six boards which report to it. The MASH and Demand Management Board and Children in Our Care Board has the main function of monitoring Demand Management and CLA numbers.	16	• Permanence Action Plan has been developed to help reduce the Children Looked After (CLA) numbers. • Sufficiency Strategy includes targets to reduce CLA numbers through prevention of S20 accommodation and children exiting from care. • 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 help to prevent the need for accommodation. • Amendment to pre proceedings protocol, and introduction of permanence protocol guidance and toolkit. • Bid for DfE funding for Family Safeguarding. • In June 2019 a Peer Challenge was undertaken with a focus on MASH and demand management.	16 Major/ Likely	Director of Children's Services	The number of referrals to Children's Social Care has reduced after a large increase the previous quarter. Q4 18/19 - 3198, Q1 19/20 2856, a 10.6% reduction The number of Children Looked After has reduced by 7 since the last quarter (Mar - 2128, June 2121). Average social worker caseloads have decreased in the last quarter, from 22.6 as at the end of Q4 18/19 to 19.8 as at the end of Q1 19/20. The risk is being managed via the Getting to Good Board, and the six Boards which feed into it.
CR5	Recruit and retain experienced staff across the organisation	People/service delivery	• Inability to deliver effective services • Shortage of skilled staff in specific service areas • High caseloads • Increased staff turnover Increased agency spend	• Workforce Group established in Children's Social Care to ensure strong focus on recruitment and retention and workforce development. • Social Work Academy established providing robust induction and continuous professional development for social workers, including newly qualified staff.	16	• A strategic approach is planned to further develop council-wide succession planning requirements, to include the recruitment to 'Hard to fill' posts and reduce the reliance on costly agency staff. This will include career pathways. • Proposals will be presented to Corporate Management Team on reshaping the apprenticeship programme to maximise the apprenticeship levy and support the delivery of the People's Strategy	12 Major/ possible	Director of Corporate Services	Level

| | | | | Lack of succession planning; Low morale; Negative impact on productivity levels | In Children's Social Care Advanced Practitioner posts established to support social workers to aid staff retention.; Leadership Academy in Children's Social Care now in place with particular focus on up-skilling first line managers to strengthen leadership of practice.; Implemented a new recruitment system and building a Lancashire brand. This has: o Improved speed of recruitment o Streamlined processes o Improved flexibility o Established a new career site o Introduced a new on-boarding function | | Continue to improve staff engagement through regular pulse surveys; Introduce leadership and management module courses; Corporate induction programme to be reviewed; Develop a more focused graduate offer; Improve the health and wellbeing of staff through initiatives such as the 'time to change' programme | | | |
| CR6 | 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 | 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.; 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: o Data Quality and Performance Group. o Practice Improvement Meetings (PIMs) looking at performance and data quality. o Children's Portfolio Review Boards have oversight of development of systems | 16 | 'Project Accuracy' for Adults Services focussing on procedures and data quality is progressing. A 'Proof of Concept' project is underway which will quantify the cost and resource needed in order to develop the trackers from core systems. This solution will form part of the toolkit for use across the council.; 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 has been presented to Corporate Management Team. Proof of concept is now being developed.; Scrutiny Committee work shop has taken place that considered a range of performance measures that will inform the development of a Performance Management Framework; All requests to the Business Intelligence team for new reports are made using Redmine and are closely monitored. Requests will be challenged/prioritised and potentially refused in order to provide capacity in the Business Intelligence team to test the core systems at peak periods.; A work start has been appointed until 31st December 2019 to support the administration of the consultations and recruitment to the Business Intelligence Analyst post for research and consultation will reduce the impact of the experienced member of staff leaving.; CMT and Executive Directors have been alerted that additional resource will be needed to analyse consultation responses with a clear time table for the work.; Workshops have taken place with the Business Intelligence Service, BTLS and Core Business Systems to identify and understand how accurate data will assist. The outcome of these workshops will form the basis of requirements for how the council manages reporting in | 12 Major/ possible | CMT | Children's - Regular meetings with Deputy Director Children's Services and Executive Director Escalation via Improvement and Accountability Board. |

				negative financial consequences	o Governance Boards established for Early help Module, Education Health Care (EHC) Plans module and the Education Management System.		the future. This will be an integral part of the Digital Strategy.			
				• OFSTED/Care Quality Commission (CQC)/LGA and other external organisations will be using inaccurate information to judge performance.	• A Corporate Reporting Strategy has been developed by Business Intelligence in conjunction with Core Systems and BTLS. This is also featuring as part of the developing Digital Strategy & links to the developing data strategy which is part of the Digital First strategy.					
				• Service planning and management will be severely compromised.						
				• Potential for incorrect payment of providers, staff etc						
CR7		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.	• 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, Learning and Development, Business Intelligence etc. on wider impacts and how system changes are managed into the business. ▪ Service challenge prioritisation has now taken place alongside existing work plans. Services have given their priorities. ▪ Sign off arrangements for roadmaps, including prioritisation of work, are in place. Boards have been established for major system implementations. ▪ Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. Joint strategic needs assessment (JSNA) and other needs assessments. Discussed with various management teams on an ongoing basis. Weekly provision of information to operational managers for LCS. ▪ 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. • 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. • Working closely with services, Programme Office and BTLS to firm up the detailed requirements of the service challenges and the resourcing of this additional work. Issues and implications logged at Finance Monitoring Boards (FMBs) and overarching approach has been escalated to CMT for consideration • Monthly meetings with Highways Service continue, with focus on discussing and managing operational issues, with a continuous tracking of issues and timescales for rectifying these. • After comprehensive work with the service and a review by audit, a programme of work has been identified and underway. A Highways Improvement Board has been established which includes a comprehensive training and support plan for the service which has now begun.	12 Major/ possible	Director of Programmes & Project Management	Risk being managed downwards

			• 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. • The activity and changes required to enable delivery of the service challenges presents a risk to delivery of both the necessary changes but importantly the savings.						

CR8	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 Programme reports to Cabinet
				• Improved approach adopted regarding the deliverability of current and future schemes. These include:
				   o Reporting of cost ranges for new schemes
				   o Routine updating of cost estimates
				   o 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.
				• Restructuring to ensure the service has the resources with the right skill sets
				• Update reports to Audit, Risk & Governance Committee
					16	• Active project and programme management including:
						
						   o Detailed monitoring of the delivery programme through 2019/20 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.
						   o Performance reports developed to enable the Capital Board to undertake this monitoring and challenge.
							12 Major/ possible	Exec Director Growth, Transport and community services	Level

CR9	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 local authority at risk of appeals to Special Educational Needs and Disability Tribunals (SENDIST), increased reputational risk via	• Following the SEND Local Area Inspection a Written Statement of Action (WSA) has been submitted identify improvements to the service offered by LCC and the Clinical Commissioning Groups. The following areas were identified as requiring action: o The lack of strategic leadership and vision across the partnership	25	Delivery of the SEND Improvement Plan with activity focussed around the following themes: Meeting Need • Workforce development • Multi-agency workforce development • Quality of planning, procedures and process Equal Partners	12 Major/ possible	Director of Education & Skills	Continued positive progress in delivery of the Improvement Plan but with some slippage, clearly highlighted in the Plan, which is monitored through

				complaints corporately and to Local Government Ombudsman (LGO). • Lack of confidence in council services. • The lack of accessibility and quality of information on the local offer • Unmet need will result in children and young people failing to meet their potential and therefore not be supported as positively as possible into adulthood. • The failure to recruit and retain staff.	o Leaders' inaccurate understanding of the local area o Weak joint commissioning arrangements that are not well developed or evaluated o The failure to engage effectively with parents and carers o The confusing, complicated and arbitrary systems and processes of identification o The endemic weaknesses in the quality of EHC plans o The absence of effective diagnostic pathways for Autistic Spectrum Disorder (ASD) across the local area, and no diagnostic pathway in the north of the area o No effective strategy to improve the outcomes of children and young people who have SEN and/or disabilities o Poor transition arrangements in 0–25 healthcare services o The disconcerting proportion of children and young people who have an EHC plan or statement of SEN who are permanently excluded from school o The inequalities in provision based on location o The lack of accessibility and quality of information on the local offer Progress on implementation has been monitored by Department for education and NHS England through formal review visits. Significant achievements to date include: • Partnership Governance established • Partnership Vision and Priorities agreed • Improvements to joint commissioning arrangements • Pan Lancashire Neurodevelopmental Assessment and Diagnostic Pathway agreed • Improved engagement with parents and carers • Designated Clinical Officers in place across the local area to support parent carers and professionals to access the health care system • EHC plan process reviewed and Quality Framework agreed • Programme of action agreed with schools	• Data and information • Communications and engagement Accessible services • Service improvement and commissioning • Service transition Achieving Success • Improving outcomes and support • Preparing for adulthood Continued Strategic reporting and monitoring of improvement plan at Cabinet and CMT level Active leadership of Health and Wellbeing Partnerships Challenge through Children's Services Scrutiny Committee			the Partnership Board. Providing clear evidence of improved outcomes is challenging but the Improvement Plan agreed in April 2019 sets out key performance indicators for each theme. An informal Department for Education monitoring visit was conducted in June 2019 and a formal Department for Education monitoring visit is planned for August 19 2019 Need to retain focus in readiness for revisit expected from September 2019 onwards

				• Training for Governors					

| CR10 | 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.
• Possible reputational risk as a result of missing a national target.
• 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 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 (TFU) oversight. Robust tracking processes in place with view to maximising payment by result claim opportunities.
• Ongoing data matching to identify new eligible families
• Ongoing data matching to identify new eligible families
• Robust tracking processes in place with view to maximising payment by result claim opportunities. However, no governance procedures in place with responsibility for oversight.
• Ongoing data matching to identify new eligible families
• The target in the med term fin strategy for TFU Payment by Results (PBR) claims for 2017/18 was for 1,500 PBR claims to be made and this target has been exceeded. As at 29 March 2019 payment by results claims had been made for 4,035 families (47% 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 Children and Family Wellbeing Service (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. | 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 Common Assessment Framework (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. | 16 Major/ Likely | Director of Public Health | Level |
| CR11 | Future provision of ICT services | Organisational | • The BTLS contract has an expiry date of 31 March 2021 and covers ICT and transactional payroll services. Failure to | • The Society of IT Management have undertaken an independent review of our options that considered current BTLS service performance, how it benchmarks with other local authority services, particularly with regard to cost, and to | 16 | • The Society of IT Management are providing expert consultancy services to the county council for the contract renegotiation process with the outcome to be reported back for approval at the Cabinet meeting in August. | 12 | Director of financial services | Risk is reducing |

			put in place suitable arrangements will impact on organisational effectiveness and service delivery • May impact on the service challenge savings options that need ICT solutions • If any potential renegotiations are unsuccessful need to consider how the services will be transferred successfully back to the authority.	consider the best options available to the council with regard to future service requirements			

CR12	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'	- A review of the Lancashire intermediate care system was commissioned using money from the Better Care Fund, and included 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 Quality Improvement Planning (QIP) 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.	16 (Major /Likely)	- The Carnall Farrer Review of Intermediate Care concluded with the final report at the end of May 2019. When the report was reviewed at the Better Care Fund Steering Group, it was identified that there was additional benefits to including information from neighbouring authorities - The Better Care Fund steering group agreed to ask Carnall Farrar to extend the scope of the review to include this additional information into the report documentations. - Reports or presentations to partnership meetings with the NHS including the Health and Wellbeing Board (HWB) are being scheduled accordingly, and it will come to LCC CMT for consideration. - Earlier drafts of this work suggest opportunities for significant improvement and cost savings across the NHS – local government system. - The findings of this report will not by themselves provide definitive answers as to whether LCC should continue to be a provider of some these services, but it will provide important context for more in-depth local discussions with NHS partners to determine answers to those questions.	12 Major/ Possible	Executive Director for Adult Services and Health & Wellbeing	The revised timeline we are working to is: - w/c 8 July – update modelling for all areas - w/c 15 July – update Integrated Care Partnership - level reports 22nd and 23 July – update the Lancashire-wide report
Opportunity Identification Number	Opportunity Description	Opportunity Type	Possible Benefits	Progress to date	Oppor tunity Score	Maximising Actions	Residual Opportu nity Score	Opportun ity Owner	Direction of Travel
C01	Delivering growth and prosperity for the whole of Lancashire	Development & regeneration	- Continued successful delivery of the LEP's current strategic economic growth programmes. - Successfully securing new resources for Lancashire to support job and	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	12	- Work with the LEP and local authority partners to ensure national resources to support growth and regeneration are secured. - Maximise the support from key local and national public and private sector stakeholders outside 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.	16 Major/ likely	CMT	The LEP Review will present some significant challenges for local partners as the LEP is required to establish it's own legal entity and further distance itself from any local authority support.

			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.	and Lancashire City Deal, Growth Deal, three Enterprise Zones, Growing Places Funding, Boost Business Lancashire and Superfast Broadband. The national policy framework is being shaped by a new Industrial Strategy with priorities and funding streams in development.		• Economic Development's main European Regional Development Fund (EDRF) 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.			We are now looking to move forward with the production of a Local Industrial Strategy to maximise new funding opportunity.
	To fully and effectively utilise the remaining European Structural Funds available to Lancashire and to position the County to benefit from future regional funding regimes.		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.	• 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 Ministry of Housing, Communities and Local Government (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.					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 central government) 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.
	Establishment of robust pan-Lancashire collaboration arrangements.		Uncertainty over potential securing of a Devolution Deal or allocation of national resources and freedoms/flexibilities to the Lancashire level.	• Local authorities across Lancashire are reviewing their collective approach to establishing effective joint working. Agreement on the way forward will enable swifter progress to be made on identified priorities.		• Local authorities across Lancashire are reviewing their collective approach to establishing effective joint working. Agreement on the way forward will enable swifter progress to be made on identified priorities.			The County Councils' political and officer leadership will play a full and active role in shaping & accelerating arrangements in Lancashire.
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	The Apprenticeship Levy was 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.	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

| | | | needs in the County Council | The consultations are moving into committed expenditure for apprenticeships. A clearer picture is needed of how this links to the overall skills gaps and the R&R needs of services for their future workforce planning. The first year published report on the % in LCC against headcount, shows 0.66% | | • Learning and Development (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 Local Government Association (LGA) and we are focussing currently on Higher degree apprenticeships. LGA will be supporting LCC in developing a strategy and future spending plan.
• Recent work with Finance looking at transactional spend in Services on training has not identified anything which could have been Levy based. | | | which we intend to share with Director, HR, Finance , CMT |
| CO3 | Fair Funding and Business rate Retention | Organisational /Financial | Potential increase in funding to help balance the budget post 22/23

However, several grants could end in 2020.

Business rate baseline applied from 2020 and councils encouraged to try to increase their rate revenues instead of being dependent on Government grants. However the impact may depend on technical decisions within rate retention e.g. how to divide revenue between counties and districts (tier splits) | • Implemented business rate pilot with Lancashire district and unitary councils
• Proportion of business rate retention is 75%
• Responded to consultations on Fair Funding Review | 12 | • Fair Funding Review continue to lobby through the LGA and respond to further consultations up until summer 2019
• Work with Lancashire councils to embed the business rate retention pilot
• Given the uncertainties regarding Brexit the Government may roll forward the local government settlement so this would possibly delay the pilot | 12 Major/ possible | Dir of Finance | March 2020 |

| CO4 | Working collaboratively with key health partners | Organisational /financial | Opportunity to work more closely with Health partners to align plans, strategies and budgets as part of the Integrated Care System for Lancashire and South Cumbria and Integrated Care Partnerships.

The opportunity needs to be balanced against the risk of lessened control over County Council budgets and the delivery models which may be put in place, with our health partners, to achieve our intended outcomes for people in Lancashire | • Engagement through Lancashire-wide forums eg Integrated Care System Board, Joint Committee of Clinical Commissioning Groups, Collaborative Commissioning Board, Children & Maternity Commissioners Network. | 12 | • Outline proposals in respect of public health grant developed and discussed with both CMT and Clinical Commissioning Group (CCG) lead officers | 15

Outstanding/ possible ? | Executive Director of Adult Services & Health & Wellbeing | Level |

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			