

Corporate Risk & Opportunity Register Q3 2018/19

Risk Identification Number (RIN)	Description	Risk Type	Possible Risk Consequences	Current Controls	Risk Score	Mitigating Actions	Residual Score	Risk Owner	Direction of Travel
CR1	<p>Delivering the Operational Plan to ensure a strong and sustainable County Council</p> <p>1. Establishing a strong and visible leadership team</p>	Organisational	<ul style="list-style-type: none"> Inability to deliver a balanced budget in future years 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 	<ul style="list-style-type: none"> Priorities Board established comprising work stream leads and chaired by the Chief Executive Time table for each work stream has been developed and agreed Programme Office is managing the overall programme of activity Managers toolkit – HR front door launched 24th September 2018 Leadership and employee conferences being held throughout November 2018 Inspirational speakers – first speaker November – ongoing collection for future events Corporate Management Team intranet pages updated Recruitment for Chief Executive and Resources Director completed Introduction of new suite of leadership & management modules Specification for MSC, MBA senior Leaders apprenticeship – procurement started PRIDE event October 2018 Staff survey – field work undertaken and completed Performance Engagement – new briefing sessions for managers and staff completed 100% of reviews have been reported to the Service Challenge panel 	20	<ul style="list-style-type: none"> Research new Induction Programme and commence development for new Lancashire Induction Further develop and launch new 'Inspiration Matters' e-briefing November 2018 New suite of Leadership and Management modules to support development of managers, linked to national occupational standards and apprenticeships – January 2019 Continue procurement process for training provider for senior leadership apprenticeships. Contract expected to be in place for December 2018 PRIDE event 1st November 2018 Staff Survey – analysis data Chief Executive and Director of Resources post recruited to on a permanent basis. Executive Director Education and Children's Services interviews recruited to on a permanent basis. The timescale for the programme is on track 	16	Overall Risk Owner is CMT however there is a lead officer for each work stream	<p>This risk is being monitored by both the Priorities Board and CMT</p> <p>Draft People Strategy to be informed by outcome of staff survey</p> <p>Cabinet considered service challenge savings options on 3rd December 2018</p> <p>Savings options agreed by Cabinet in December will be presented to budget Full Council in February 2019</p>

	<p>2. Embed a focus on service delivery to secure a better service at a lower cost</p> <p>3. Develop a sustainable financial strategy</p>	<p>Organisational</p> <p>Finance</p>	<ul style="list-style-type: none"> • Unable to deliver a balanced budget in future years • Insufficient reserves • Services become unsustainable and we cannot fulfil our statutory duties 	<ul style="list-style-type: none"> • 88% have been reported to Corporate Management Team • Reviewed progress regarding terms and conditions savings targets • Support service challenge work in the run up to proposals being presented to Cabinet in December 2018 • CMT away day to discuss future budget strategy. 		<ul style="list-style-type: none"> • Final proposed saving options reported to Cabinet 3rd December 2018 as part of updated money matters report • December Cabinet report captured proposed savings and update of Medium Term Financial Strategy. 			
CR2	Protect and safeguard children	People/Service delivery	Children are put at risk of harm.	<ul style="list-style-type: none"> • Clear line of sight to front-line practice at all levels: Chief Executive, Executive Director, Cabinet Member, DCS, 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, DCS, Leader, Cabinet Member for Children, Young People & Schools, LSCB Chair and the Police. • DCS 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 	16	<ul style="list-style-type: none"> • New Children and Families Board to be established following the conclusion of the Improvement 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 will be presented to Cabinet for approval in December 2018. 	12	Director of Children's Services	<p>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.</p> <p>This reflects the support provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy.</p> <p>The proportion of social workers with over three years' experience has also improved indicating that experienced staff are also being retained. The average caseload for all social workers remains comparatively good.</p>

				<p>response where there are safeguarding concerns about a child with more timely decision making at the point of referral.</p> <ul style="list-style-type: none"> • Serious incident reporting in place to ensure an appropriate response to serious safeguarding concerns and when necessary notification to Ofsted/DfE. • External reviews of front-line practice by Ofsted, DfE, LGA and North West ADCS 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. 				<p>Monthly audits of quality of practice.</p> <p>Advanced practitioner workshops planned, linked to child's journey in line with priorities in the Improvement Plan.</p> <p>Whilst compliance has significantly improved further work is required to ensure that the quality of practice is consistently good across all areas. The Improvement Plan sets out agreed priorities and timescales.</p>
CR3	Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care.	People/service delivery	<p>Local authority is legally and financially liable, and may be subject to judicial review if found in breach of its statutory responsibilities.</p> <p>Further DfE intervention if Ofsted judge Children's Services to be inadequate.</p>	<ul style="list-style-type: none"> • 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. 	16	<ul style="list-style-type: none"> • An Improvement Plan is in development (consultation with Partners November 2018) to address the recommendations from the inspection and progress will be monitored via the Improvement & Accountability 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. • An audit schedule for the next 6 months is in development with agreed audit priorities to ensure a continued focus on the quality of practice. 	12	<p>Director of Children's Services</p> <p>Significant progress made. Leaders can now demonstrate that they know their services well. The focus is now on making the cultural shift from compliance with statutory requirements to improving the quality of practice.</p> <p>Further work is required to address variability in the quality of practice, to ensure that all children in need receive a consistently good service.</p> <p>The pace of change needs to be</p>

				<ul style="list-style-type: none"> • Clear line of sight to front-line practice from the Cabinet Member and DCS 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. 					<p>maintained as part of our continuing improvement journey from requires improvement to be good.</p> <p>The Improvement Plan will set out agreed priorities and timescales and will inform the Ofsted annual conversation in January 2019 and be presented to Cabinet.</p>
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.	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Development programme for more experienced Grade 9 social workers. • Improve compliance with supervision requirements to ensure staff receive appropriate support. • Retention of staff in children's social care is improving, with both newly qualified staff and experienced staff choosing to remain with Lancashire. (Sept 2018: ASYEs 27.9% (April 2017: 50.1%). Experienced social workers: • The number of inexperienced workers in post has increased slightly (April 2017: 50.1%, June 2018: 23.8%, August 2018: 27.9%). • The proportion of experienced social workers in post has reduced slightly this quarter (April 2017: 15.2%, June 2018: 31.9%, Aug 2018 30.3%). 	12	Director of Children's Services	<p>The experience imbalance has improved considerably since April 2017.</p> <p>This reflects the support that is provided to ASYEs by managers, advanced practitioners and the impact of the Social Work Academy.</p> <p>The proportion of social workers with over three years' experience has improved indicating that experienced staff are also being retained. The average caseload for all social workers remains comparatively good.</p> <p>There is still a reliance on the use of agency staff, although this is expected to reduce by December 2018, following recent recruitment campaigns.</p>

									The Improvement Plan sets out agreed priorities and timescales.
CR5	Managing our data well and producing effective management information	Organisational	<p>Ineffective collection, collation and input of data</p> <p>Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented.</p> <p>Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions.</p> <p>Impact on strategic planning, understanding demand management e.g. around demographics and ageing population profile</p> <p>Ineffective reporting arrangements.</p> <p>Statutory returns will be compromised, so incorrect performance will be reported nationally, with potential for negative financial consequences</p> <p>OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.</p> <p>Service planning and management will be severely compromised.</p> <p>Potential for incorrect payment of providers, staff etc</p>	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> '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. Additional temporary resource employed within Business Intelligence to provide reports for Project Accuracy 2. Clear governance structure in place to ensure a continued focus on data quality/accuracy: <ul style="list-style-type: none"> 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. <p>Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System.</p> <ul style="list-style-type: none"> Draft Digital Strategy – the developing strategy has a work stream relating to data and developing an information architecture across the core systems. Landscape review of business intelligence is currently being undertaken which will highlight opportunities for development and improvement of reporting systems. The Passport to Independence Trackers are being documented (functional and technical specifications are being written) so that they are fully understood. This will inform the support and the development of a migration plan. Weekly provision of Annex A heat map to operational managers. Analysis of heat map clearly indicating actions needed Review of performance using Chat tool provided to operational managers. Agree actions to provide LCC data required and request associated data from partners (police, health etc) Key members of BI are on the Inspection readiness group (to also include partners as appropriate) Workshops have taken place with the Business Intelligence Service to identify Corporate Reporting. 	12	CMT	Children's - Regular meetings with Deputy Director Children's Services and Executive Director Escalation via Improvement and Accountability Board.

						<ul style="list-style-type: none"> 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. 			
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	<p>Front line service delivery impeded because new/old systems are not fit for purpose</p> <p>Back office unable to function</p> <p>Failure to maximise use of new technology, including mobile devices to deliver savings and to operate in a more effective way, including integration with partners.</p> <p>New systems are implemented without full transformational and operational processes being defined and tested that impact on service delivery.</p> <p>Lack of management buy-in from service areas to drive forward change and ensure services work to new practices in a consistent way so that system implementation is as smooth as possible and the council maximises the benefit from its investment in new technology.</p> <p>Service planning and management will be severely compromised.</p> <p>Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery</p>	<ul style="list-style-type: none"> 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. Implementation of On-Line School Admissions and Education Management system which is now live. Implementation of On-Line School Admissions and Education Management system. 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 	16	<ul style="list-style-type: none"> 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 - 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. Close working with Business intelligence and BTLS to undertake Landscape Review of reporting across the authority – completion due Oct 2018 	12	Director of Programmes & Project Management	<p>On-going review and control of development work plans and roadmaps through relevant Portfolio Review Boards</p> <p>Establishment of overarching review and control of Work Plans and Roadmaps by Digital Board. 1st Report 5th October 2018</p> <p>Access for managers to simplified Oracle reports re staff sickness etc by Dec 2018</p> <p>As part of the new emerging Digital Strategy there is a work stream looking at the technologies that will underpin the delivery of digital. The development of an architectural vision for the digital strategy is underway, working closely with BTLS. This includes a landscape review of existing technologies. Date for delivery to be established through Digital Board 5.10.18</p> <p>Programme delivery model for Early Help</p>

				<p>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</p> <ul style="list-style-type: none"> • 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. 					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	<p>Scheme viability in doubt due to speculative estimating and project management</p> <p>Pressure on capital programme</p>	<ul style="list-style-type: none"> • Capital Board • Capital Programme reports to Cabinet • Active project and programme management 	16	<ul style="list-style-type: none"> • Initial review work undertaken of a sample of major capital schemes to improve the estimating and testing of current and future scheme costs. These include: <ul style="list-style-type: none"> ○ 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: <ul style="list-style-type: none"> ○ 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. 	12	Exec Director Growth, Transport and community services	<p>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:</p> <ul style="list-style-type: none"> • 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	<p>Not providing adequate service which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO.</p> <p>Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood.</p> <p>The failure to recruit and retain staff.</p> <p>Lack of confidence in council services.</p> <p>The lack of accessibility and quality of information on the local offer</p>	<ul style="list-style-type: none"> • Following the SEND Local Area Inspection a 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: <ul style="list-style-type: none"> ○ 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	<ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> ○ <i>SEND Partnership Board established with five thematic working groups to implement the written statement of action.</i> ○ <i>SEND Partnership team delivering a series of parent/carer engagement events across the county. Further programme of events are being planned for the autumn.</i> ○ <i>Open feedback survey in place.</i> ○ <i>Supporting the formation of a Lancashire Parent/Carer forum.</i> ○ <i>Implementation of the early help (IT) module.</i> • 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	Director of Children's Services	<p>The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms.</p> <p>The monitoring visits by DfE and NHS England have confirmed continued progress has been made. Further monitoring visits are planned for December 2018.</p>

CR10	Adult social care provision is adequate and responsive to meet current and future demand	People/Organisational	<p>People's' needs are not met due to non-availability of care provision. The market is not responsive enough to respond to demand. People living in rural areas or with very complex needs are difficult to find appropriate support for.</p> <p>Delays to Hospital discharge, blocking moving on from enablement or Short Term Care, people remain at home without support.</p> <p>People with complex health and social care needs cannot be supported appropriately.</p>	<ul style="list-style-type: none"> The Homecare Framework has commenced and care provision is tendered in 'lots' covering all areas of the County. Care is sourced and awarded on a rotational basis across all providers for that area to guarantee adequate volumes of work and create sustainability. Work needs to be undertaken around the residential care market. Through the work of P2I, people are able to optimise their independence, access the right service at the right time, and reduce dependency on formal support as appropriate. This in turn will support the demand on the market. 	16	<ul style="list-style-type: none"> Weekly Homecare mobilisation operational meetings to review progress/raise challenges/agree actions. Board oversight. Weekly Homecare domiciliary care delays circulated for information across ops/Commissioning/Contracts 	12	Director of Adult Services	Homecare mobilisation almost complete and the strategic risk is improving. Residual risk score to be reviewed next quarter as risk may have been sufficiently mitigated.
CR11	Supporting disadvantaged families to fulfil their potential (Troubled Families Programme)	People/Organisational	<p>Failure to achieve Payment by Results targets due to specific requirements of the programme.</p> <p>Failure to accrue maximum income from the programme for the authority.</p> <p>Failure to meet savings target attributed to the service for current financial year.</p> <p>Possible reputational risk as a result of missing a national target.</p> <p>Possible reputational risk if progress not made with the TFU Maturity Model and service transformation with partners.</p> <p>Risk of additional scrutiny of programme</p>	<ul style="list-style-type: none"> Robust tracking processes in place with view to maximising payment by result claim opportunities. Ongoing data matching to identify new eligible families The target in the MTFS 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. The position as at 22/03/2018 is that 22% of the PBR claims available have been claimed with just over 2 years of the programme remaining. 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 	20	<ul style="list-style-type: none"> 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. 	16	Director of Public Health	<p>2740 payment by results Payment By Results (PBR) claims have been submitted to the Troubled Families team for the period up to the September 2018 claims window.</p> <p>Whilst this is a shortfall of the budgeted target (2950) for this period, the Children and Family Wellbeing service has identified a number of priority areas of focus which will hopefully generate additional PBR claims.</p> <p>On completion of the above it is anticipated that there will be an</p>

									increase in the trajectory to a target figure of 4120 PBR's by the close of the March 2019 claims window.
CR12	Unlawful disclosure of personal or commercial data caused by a deliberate or accidental or technical breach resulting in a risk to the rights and freedoms of the data subject or the intellectual property of the county council.	People/Organisational	<p>Potential impact on the data subject – Physical/financial/mental harm including potential distress and in some circumstances a threat to their safety.</p> <p>Potential impact on the county council if the organisation's confidential commercial data has been exposed resulting in a material loss</p> <p>Financial penalty given to the council by the Information Commissioner (up to £17.7 million).</p> <p>Compensation claim to the council by the data subject.</p> <p>Reputational damage to the council</p>	<ul style="list-style-type: none"> Information Security Incident Management Policy. Information security incident reporting form seen by SIRO, DPO, and IG Managers. Senior Information Security Officer dedicated to investigating and risk assessing all incidents (not every incident is a breach). Close relationship with the ICO Very proactive SIRO reporting to CMT and Heads of Service. Dedicated DPO and IG Manager promoting risk management actions. Regular staff notices and key messages to all staff. Mandatory eLearning course for all staff which has to be repeated if user is responsible for an incident. Controls in place with BTLS to consult IG regarding issues or access. 	16 (Major/Likely)	<p>Extra controls created to comply with GDPR:</p> <ul style="list-style-type: none"> Procedure set up to report certain types of personal data breach to the ICO within 72 hours of becoming aware of the breach. Robust breach detection, investigation and internal reporting procedures in place, facilitating decision-making about whether or not to notify the ICO and the affected individuals. A comprehensive record of all personal data breaches. Advice given to managers on whether disciplinary action is recommended. HR Policy has been revised to include serious data breaches as an example of gross misconduct Executive Directors and Directors and Heads of Service informed of all serious breaches in their service area. The importance of keeping information secure continues to be promoted at every opportunity and prompt action is taken to address and learn from any potential breaches. Internal Audit have confirmed that appropriate controls are in place within Children's Service. Formal management letters are now issued within Safeguarding Inspection & Audit and Fostering, Adoption, Residential & YOT when incidents are down to human error. 	12 (Major/Possible)	Director of Corporate Services	<p>The number of reported incidents has now levelled following the sharp increase earlier in the year. The increase can therefore be attributed to the introduction of mandatory e-learning and awareness raising campaigns.</p> <p>The Information Governance Team plan to introduce specific training for staff who have been involved in an information security breach focused on learning lessons. The training will be introduced next quarter.</p> <p>Awareness raising through staff notices etc is ongoing</p>
CR 13	Increase in demand, including rise in number of contacts and referrals and an increase in Children Looked After numbers.	People/Organisational	<ul style="list-style-type: none"> High, unmanageable caseloads. Potential drift and delay - impact on timeliness of assessment, plans and interventions with children & families. <p>Financial implications.</p>	<ul style="list-style-type: none"> 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 Start-Well Senior Leadership Team. 	20	<ul style="list-style-type: none"> 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 	16	Director of Children's Services	<p>There has been a notable increase in referrals to children's social care.</p> <p>The number of children looked after has continued to</p>

- Monthly Practice Improvement Meetings in each locality chaired by the Head of Service to scrutinise performance.
- Prevention & Demand Management Board oversees front door arrangements and quality and appropriateness of contacts/referrals. The Board reports to the Improvement & Accountability 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.
- 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.

- 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

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 20.9 - September 2018, (June 2018: 22.9), 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.

The findings of the demand analysis work will also inform next steps

CR14	Intermediate care for older people in a residential setting	People/Organisational	<ul style="list-style-type: none"> 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' 	<ul style="list-style-type: none"> 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)	<ul style="list-style-type: none"> A review of the Lancashire intermediate care system is being commissioned using money from the BCF, and will include consideration of the best practice model for each service area including the community beds 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	<p>Delivering the Operational Plan to ensure a strong and sustainable County Council</p> <p>Delivering growth and prosperity for the whole of Lancashire</p>	Development & regeneration	<p>Self-sustaining organisation</p> <p>Stronger and growing economic base</p> <p>Ability to deliver affordable high quality services with outcomes relevant to the needs of our residents, communities and businesses</p> <p>Improved productivity and earning power of all residents</p> <p>Continued successful delivery of the LEP's current strategic economic growth programmes.</p> <p>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</p>	<ul style="list-style-type: none"> Lancashire Enterprise Partnership (LEP) 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 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 	12	<ul style="list-style-type: none"> 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 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. Work with local authority partners and the LEP to agree: <ul style="list-style-type: none"> a Local Industrial Strategy (aim to be an early adopter) a new Lancashire Prospectus an approach to future growth initiatives and priorities 	16	CMT	<p>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 complete 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.</p> <p>We are now looking to move forward</p>

			residents and businesses with economic opportunities.	<p>project funding is being restricted to spend prior to end 2018. Significant beneficiaries include the Council, other local authorities, Higher Education Institutes' and Colleges.</p> <ul style="list-style-type: none"> Secured national Digital Skills Pilot status Lancashire Leaders attended a "growth" workshop on 24 July to develop shared priorities with the support of the LEP. Following this an Economic Development themed workshop took place on the 25th September 2018. NW Made Smarter pilot approved by Government. Lancashire is one of five NW LEPs co-designing this programme with industry partners 		<p>the London School of Economics have been secured as a critical friend</p> <ul style="list-style-type: none"> 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. Lancashire's Transforming Cities submission with Government. Developing response of Lancashire Enterprise Partnership to Governments LEP review. A special board meeting took place on 12 September 2018. On-going input to work of Transport for the North on strategic development corridors 		<p>with the production of 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.</p> <p>The LEP Review, published in July 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.</p>	
CO2	Apprenticeship Levy and Apprentice % in Public Sector	People/org anisational	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	<ul style="list-style-type: none"> 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	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	<ul style="list-style-type: none"> Align to wider draft 'People Strategy' Following requests from recruiting managers to improve the recruitment process, a small task group was established to identify and implement 'quick win' recruitment improvements. Working with high recruiting services, these improvements which include improved guidance and support, and quicker and easier processes and systems, have increased the number of applications to our roles and reduced recruitment times for roles in Adults Services from around 7 months to 2 months. 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. 	16	Dir of Corporate Services	
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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			