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| **Appendix A: Corporate Risk & Opportunity Register Q1 2018/19** |
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| **Risk Identification Number (RIN)** | **Description** | **Risk Type** | **Possible Risk Consequences** | **Current Controls** | **Risk Score** | **Mitigating Actions** | **Residual Score** | **Risk Owner** | **Direction of Travel** |
|  |  |  |  |  |  |  |  |  |  |
| CR1 | **Delivering the Operational Plan to ensure a strong and sustainable County Council**1. Establishing a strong and visible leadership team
2. Embed a focus on service delivery to secure a better service at a lower cost
3. Develop a sustainable financial strategy
 | Economic | * Inability to deliver a balanced budget from 2021/22
* Inability to attract high calibre candidates for the positions of chief Executive and Executive Director of Children's Services leading to less effective governance arrangements
* Lack of buy-in/engagement from staff
* Managers do not possess the leadership skills required, leading to demotivated staff and poor service delivery
* The organisation does not have the right people in the right jobs leading to service failure
* Staff do not know what is expected of them and they do not possess the skills to adequately do their job
* Unable to meet Terms and Conditions savings targets
* Services become unsustainable and we cannot fulfil our statutory duties
* Compounds ability to set balanced budget
* Unable to deliver a balanced budget from 2021/22
* Insufficient reserves
* Services become unsustainable and we cannot fulfil our statutory duties
 | * Priorities Board established comprising work stream leads and chaired by the Chief Executive
* Time table for each work stream has been developed and agreed
* Programme Office is managing the overall programme of activity
* Employment Committee have considered the process for the recruitment to the Corporate Management Team posts
* Revised recruitment process rolled out
* Draft Corporate dashboard presented to Corporate Management Team
* Corporate Management Team (CMT) development
	+ Structured weekly meetings arranged
	+ Individual 121s in place with Chief Executive
	+ CMT members seeking external coach/mentor
* Draft People Strategy
* Draft values and behaviours
* Implementing a visibility campaign
	+ Weekly core brief
	+ Monthly 'back to the floor'
	+ Regular web casts
* Service challenge information consulted upon and distributed
* Progress made with Local Government Association regarding external challenge
* CMT have agreed financial targets for Executive Directors based on financial analysis
* Targets based on median county council spend
* Early outcome from service challenges to be reported back to CMT
 | 20 | * A further report to Employment Committee setting out next steps for recruitment
* Work stream timeline to be reconsidered with reference to the draft People Strategy and actions re-prioritised
* Roll out revised Personal Development Reviews
* Agree approach to talent planning
* Agree approach to succession planning
* Develop management development programme
* Undertake baseline staff survey
* Draft People Strategy to be shared with wider leadership group
* A refreshed intranet that establishes clear messages and a real sense of purpose
* Service challenge process has commenced in 10 service areas
* Mid-point review meetings being scheduled

Commercialisation* Commercialisation strategy being drafted
* New income streams being identified and current streams maximised
* Identification of new traded services
* Review of charging policy
* Spend analysis of current contracts to ascertain value for money

Taxation & Grants* Seek to increase tax base
* Working in partnership with district councils to maximise collection rates
* Work with partners to secure grants for growth
* Consider opportunities for involvement in future business rate retention pilots
* Seek to influence new local government funding formula methodology
* Horizon and current scanning to identify additional sources of funding

Staff Productivity* Undertake external benchmarking
* Maintain health & wellbeing of workforce
* Focus resources on delivering priorities

Commissioning & Third Sector* Undertake analysis of current spend with the sector
* Develop and implement clear commissioning strategies
* Identify services that could be delivered by the sector at either a reduced or no cost
 | 16 | Overall Risk Owner is CMT however there is a lead officer for each work stream | This is a new risk that is being monitored by both the Priorities Board and CMT |
| CR2 | Protect and safeguard children | Social | Children are put at risk of harm.  | * MASH (Multi-Agency Safeguarding Hub) arrangements strengthened to ensure an appropriate multi-agency response where there are safeguarding concerns about a child.
* Serious incident reporting in place with senior management line of sight to front-line practice.
* Quarterly safeguarding meetings including the Chief Executive, Director of Children's Services (DCS), Leader, Cabinet Member for Children, Young People & Schools, LSCB Chair and the Police. DCS meets with Cabinet Member and lead member on a fortnightly basis re current issues/developments.
* Serious Case Review learning shared to improve safeguarding practice.
* Effective audit framework in use. This has strengthened management grip and the quality assurance of practice.
* External reviews of front-line practice completed including quarterly monitoring visits by Ofsted, the LGA peer review and six monthly DfE reviews.
* Performance monitoring - action taken to address areas of underperformance via Data Quality and Performance Group.
* Locality performance clinics chaired by CSC Heads of Service to address poor performance and reinforce good practice.
* Monthly reports by the DCS to the Improvement Board on the quality of practice.
* Increased Independent Reviewing Officer capacity and IRO completion of mid-point checks on case files to ensure timely progression of care plans for children looked after and subject to a child protection plan.
* 12 Advanced Practitioner posts within the Audit Team provide advice and support to social workers & particularly ASYE's (Assessed & Supported Year in Employment) in respect of practice improvement.
* Monthly compliance reporting of Strategy Discussions.
* Social Work Academy established providing robust induction and continuous professional development for social workers.
* Heat maps used to monitor performance and report on Annex A requirements in preparation for inspection by Ofsted.
 | 25 | * Caseloads are mostly in line with Improvement Board targets for "good and outstanding", but slight increase in Assessed and Supported Year in Employment (ASYE) caseloads (now rated Requires Improvement).
* Multi Agency Sharing Hub redesign completed - 3 virtual locality teams now in place and consistent working practices established. Report going to Cabinet on the 14/04/2018 with proposal to make temporary posts permanent.
* DCS "line of sight" to frontline practice to ensure adequate protection and safeguarding of children in place.
* Number of inexperienced workers in post continues to decrease: ASYE - 26.8% -March 2018. (April 2017: over 50%).
* The proportion of social workers with 1-3 years' experience remains rated outstanding, as staff retention improves, with 73.2% of qualified workers being non ASYEs.
* Ofsted Monitoring Visit in Feb 2018 noted improvements in the MASH - all contacts reviewed by a qualified Social Worker, appropriate application of thresholds and good management oversight.
* Work in line with the residential and sufficiency strategies has been delayed as property works to the Bungalow (which will be the complex needs unit), Slyne Road (the Adolescent Support Unit), and South Avenue (the crisis unit) is not yet complete.
* DfE six month review in November 2017 similarly noted that the quality of practice was improving and plans were in place to embed and sustain improvement, although there remained inconsistency in the quality of practice. This is also reflected in audit findings.
 | 16 | Director of Children's Services | The risk is being managed   |
| CR3 | Complying with statutory requirements and duties relating to children looked after, children in need and children leaving care. | Legal/Political | Local Authority is legally and possibly financially liable, judicial review. Further OFSTED intervention.  | * Corporate legal oversight.
* Quarterly Safeguarding Report.
* Serious incident reporting to ensure appropriate management oversight.
* Serious Case Review learning shared.
* Peer Review and Challenge.
* Stronger management oversight in Districts.
* Advanced Practitioners in post.
* Case file audits check compliance and quality of practice.
* Multi-agency inspections. Sector led Peer Review.
* Performance monitoring - action taken to address areas of underperformance.
 | 25 | * Ofsted Monitoring Visit October 2017 - improvements noted in quality of practice - "good to requires improvement"; practice is compliant with statutory requirements; audit effective and leads to actions (Focus on CIN).
* Work in line with the residential and sufficiency strategies has been delayed as property works to the Bungalow (which will be the complex needs unit), Slyne Road (the ASU), and South Avenue (the crisis unit) is not yet complete.
* DfE six month review in November 2017 similarly noted that the quality of practice was improving and plans were in place to embed and sustain improvement, although there remained inconsistency in the quality of practice.
* Leaving care performance indicators show improvement.
 | 16 | Director of Children's Services | The risk is being managed   |
| CR4 | Recruit and retain experienced staff within Children's Services | Organisational | Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend. | * Additional funding envelope.
* Enhanced recruitment including children's services recruitment evenings and use of social media.
* Agency social work team is currently providing additional capacity in the North Locality.
* Weekly monitoring of SW workforce position and social work caseloads.
* Increased focus on retention and conditions.
* Additional temporary capacity provided for MASH.
* Workforce Strategy Board established to ensure strong focus on recruitment and retention and workforce development. Leadership Academy in development with a particular focus on skilling up first line managers to strengthen leadership of practice.
 | 25 | * Number of experienced workers in post continues to increase - there has been a reduction in the proportion of newly qualified (ASYE) Social Workers:
	+ April 18 – 26.8%
* The proportion of social workers with 1-3 years' experience has increased, as staff retention improves, and experienced workers now account for 73.2% of all qualified social workers.

  | 16 | Director of Children's Services | The risk is being managed  |
| CR5 | Managing our data well and producing effective management information | Organisational | Ineffective collection, collation and input of data Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented. Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding demand management e.g. around demographics and ageing population profile Ineffective reporting arrangements.Statutory returns will be compromised, so incorrect performance will be reported nationally, with potential for negative financial consequencesOFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.Service planning and management will be severely compromised.Potential for incorrect payment of providers, staff etc | * Information Management Strategy.
* Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services
* Data Quality and Performance Group oversees quality of information in systems for children's services
* Regular provision of management information to staff at all levels across adults and children's services helps to embed ownership of data and improve recording.
* Use of 'exception reports' which proactively highlights data anomalies and inconsistencies.
* Development of a Corporate Performance Dashboard is facilitating a council-wide view of all services, which will improve the quality of reported data as anomalies will be highlighted.
 | 16 | * 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway.
* Significant inroads made in improving data accuracy in children's services; this work is ongoing.
* Clear governance structure in place to ensure a continued focus on data quality/accuracy:

• Data Quality and Performance Group.• LCS Systems Steering Group - provides governance to the DQP Group.• Practice Improvement Meetings (PIMs) looking at performance and data quality.• Children's Portfolio Review Board - development of systems within Children's Services.Governance Boards established for Early help Module, Education, Health and care Plans module and the Education Management System. * Draft Digital Strategy – information architecture for the organisation. Clarify roles and responsibilities around data management and storage. Develop a corporate data warehouse.
* Landscape review of business intelligence is currently being undertaken which will highlight opportunities for development and improvement of reporting systems.
 | 12 | CMT  | Level |
| 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 | Front line service delivery impeded because new/old systems are not fit for purposeBack office unable to functionFailure to maximise use of new technology, including mobile devices to deliver savings and to operate in a more effective way, including integration with partners. New systems are implemented without full transformational and operational processes being defined and tested that impact on service delivery. 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. Service planning and management will be severely compromised. Reliance on uninterrupted operation of T101 cannot be over emphasised. Power up following an uncontrolled failure takes 5 times longer than after a controlled shutdown. Impact on service delivery | * Significant number of core systems in place and associated integration technology.
* Greater investment in mobile devices to support the property strategy and new ways of working - Social Care/Highways etc.
* Monitoring and performance information available.
* Digital board established with engagement from key senior managers - targets in place and roadmaps developed for the rollout of key initiatives and priority areas. Savings tracker in place.
* Digital Health Board representation and at operational group level.
* Integration tools with health developed and others under development.
* Integration tools with police in development. Significant potential needs to be maximised - focus on channel shift with required changes to internet site and approach to mobile applications to maximise the potential.
* New web tools available through the new customer access system being rolled out and once proof of concept tested will be rolled out in a targeted way.
 | 16 | * In relation to core systems, boards and working groups established to oversee progress and to set targets. Ongoing engagement with services to identify major benefits and to support implementation.
* Post system implementation groups in place to identify areas for development/opportunity and then be linked to system roadmaps and transformation change.
* Highway Asset Management System - Business Analyst to be assigned to support solution design
* Draft Digital strategy
* 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.
* Implementations are: Early Help Module, Education, Health and Care Plans Module, On-Line School Admissions, Education Management system. Information management strategy and approached 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.
* Data Quality processes in place and exception reporting produced but local systems are dependent upon processes within individual services. Local Information Systems still exist but are being replaced over time with new core systems and other corporate solutions, i.e new Highways solution has replaced 23 existing systems.
* Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. JSNA and other needs assessments.
* New ICT technology rolled out to staff to support mobile working and integrated working. Mandatory training provided before devices issued and monitoring reports issued on devices used/not used and extent of functionality that is being utilised. Discussed with various management teams on a ongoing basis.
* Weekly provision of information to operational managers for LCS. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team.
* T101 data centre has been upgraded t address key risks and improve reliability. Ongoing assessment of remaining and emerging risks carried out - may require further investment subject to the outcome of the review.
 | 12 | Director of Programmes & Project Management | The risk is being managed |
| CR7 | Delivering major projects/schemes on time and within budget | Economic/Political/Social/reputational | Scheme viability in doubt due to speculative estimating and project managementPressure on capital programme | * Capital Board
* Capital Programme reports to Cabinet
* Active project and programme management
 | 16 | * Initial review work undertaken of a sample of major capital schemes to improve the estimating and testing of current and future scheme costs. These include:
	+ Reporting of cost ranges for new schemes
	+ Routine updating of cost estimates
	+ Inclusion of contingency at industry standards and benchmarks
* Governance arrangements improved to provide structured challenge. Capital Board now has oversight of estimates as well as capital budgets so it can manage both through the life cycle of the project
 | 12 | Exec Director Growth, Transport and community services | Level |
| CR8 | Delivering a statutory service for children and young people with special educational needs and/or disabilities. | Organisational/social | Not providing adequate service which places the LA at risk of appeals to SENDIST Tribunal, increased reputational risk via complaints corporately and to LGO.Unmet need will result in CYP failing to meet their potential and therefore not be supported as positively as possible into adulthood.The failure to recruit and retain staff.Lack of confidence in council services. The lack of accessibility and quality of information on the local offer | * Following the SEND Local Area Inspection a 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:
	+ 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 | * Implementation of the early help (IT) module.
* Recruitment of qualified staff funded by the SEND reform grant.
* Commissioning arrangements with Health being reviewed.
* The actions to implement the Written Statement of Action.
* Strategic reporting and monitoring of improvement plan at Cabinet and CMT level.
* Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan.
 | 16 | Director of Children's Services | The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms. |
| CR9 | Discharge of patients from hospital into their own home or enablement/short term care in a safe and timely manner | Organisational | Service users staying longer in an acute hospital setting leads to deconditioning of service user (older people often lose skills and the physical ability to undertake activity), which increases reliance on social care post discharge and as a result an increased cost. Increased pressure on adult social care. Cost to the health economy, as prolonged hospital stay, will increase tariff. Effect on relationships with health economy.Risk that pressure to deliver targets results in expedient decisions which sees individuals discharged but not with the most suitable care package and thus recovery and independence not promoted and risk of readmission Inability to agree or deliver challenging Delayed Transfer of Care (DTOC) national targets. Inability to manage short term pressure for reablement services. | * Regular data set produced and analysed by business information.
* Cluster boards for P2I for reablement and acute joined to ensure good communications.
* Focus at Better Care Funds meetings. iBCF spending plan, which is intended to have positive impact on DTOC, agreed by HWBB in August 2017.
 | 20 | * Commissioned home care framework.
* Increased capacity of reablement service including development of options to manage short term pressures.
* Weekly "winter" ops and commissioning meeting. Implementing of eight High Impact changes using iBCF monies to facilitate.
* Roll out of passport to independence in an acute setting.
* Development of dashboard to provide better MI within LCC and staff appointed to tracka and grip cases in each of acute settings
* Discussions to ensure that activity related to DTOC Dashboards is joined up across the STP.
* DTOC Board established.
* Programme Office defined future governance and programme management arrangements for BCF/iBCF/DTOC in LCC.
* Continued scrutiny by elected members. Mitigating actions above will not enable DTOC targets to be met within agreed timescales.
 | 20 | Exec Director of Adult, Health and Wellbeing Services | Level |
| CR10 | Adult social care provision is adequate and responsive to meet current and future demand | Organisational/social/economic | 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.Delays to Hospital discharge, blocking moving on from enablement or Short Term Care, people remain at home without support.People with complex health and social care needs cannot be supported appropriately. | * 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.
 | 15 | * Weekly Homecare mobilisation operational meetings to review progress/raise challenges/agree actions. Board oversight.
* Weekly domiciliary care delays circulated for information across ops/Commissioning/Contracts
 | 12 | Director of Adult Services | Level |
| CR11 | Supporting disadvantaged families to fulfil their potential (Troubled Families Programme)  | Organisational/economic /social | Failure to achieve Payment by Results targets due to specific requirements of the programme.Failure to accrue maximum income from the programme for the authority. Failure to meet savings target attributed to the service for current financial year. Possible reputational risk as a result of missing a national target. Possible reputational risk if progress not made with the TFU Maturity Model and service transformation with partners.Risk of additional scrutiny of programme | * 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 | * 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 | Level |
| **Opportunity Identification Number** | Opportunity Description | Opportunity Type | Possible Benefits | Progress to date | Opportunity Score | Maximising Actions | Residual Opportunity Score | Opportunity Owner | Direction of Travel |
| C01 | **Delivering the Operational Plan to ensure a strong and sustainable County Council**Delivering growth and prosperity for the whole of Lancashire | Economic/Political/organisational | Self-sustaining organisationStronger and growing economic baseAbility to deliver affordable high quality services with outcomes relevant to the needs of our residents, communities and businessesImproved productivity and earning power of all residentsContinued successful delivery of the LEP's current strategic economic growth programmes. Successfully securing new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities. | * 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 project funding is being restricted to spend prior to end 2018.  Significant beneficiaries include the Council, other local authorities, Higher Education Institutes' and Colleges.
 | 12 | * Work with local authority partners to ensure national resources to support economic growth and regeneration are secured. .
* Maximise the support from key local and national public and private sector stakeholders outside of the County Council.
* The County Council to give greater consideration to using its investment and prudential borrowing capacity and investment funds to bring forward a portfolio of strategic development opportunities
* 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:
	+ a Local Industrial Strategy (aim to be an early adopter)
	+ a new Lancashire Prospectus
	+ an approach to future growth initiatives and priorities

the London School of Economics have been secured as a critical friend* 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.
* Whilst the opportunity to secure EU funds (underwritten by HMG) looks more positive in the medium term, we are also preparing in the event that EU Structural funds are replaced with completive rounds of national or sectoral productivity funding.  The development of a UK Shared Prosperity Fund could also create new funding opportunities for place-based growth strategies – though further details not expected until later in 2018.
 | 16 | CMT | Level |
| CO2 | Apprenticeship Levy and Apprentice % in Public Sector | PoliticalEconomicSocialReputationalOrganisational | Increase in Apprentices in the workforce and use the Apprenticeship levy to its maximum benefit to support critical development needs in the County Council | The Apprenticeship Levy is live from April 2017 and the first payment from the digital account was in May 2017.  Work is being undertaken across LCC with Heads of service or their representatives to discuss their overall workforce development and what part the Levy could play in this. | 12 | * Maximise the benefits of the Apprenticeship Levy within LCC by working in conjunction with Management Team, Finance and HR to embed this into structures across the organisation.
* Working with services to identify the quick wins where these suit their business need and to thus eliminate training expenditure where we can, and link to Levy fund.
* L&D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible.
* Heads of Service have been asked to report to L&D any current areas of training expenditure commitment that they have entered into.  Heads of Services have been asked not to enter into any further financial commitments without speaking to L&D
 | 15 | Dir of Corporate Services | Upwards |
| CO3 | Develop and implement improved recruitment and retention practices to address increasing challenges | Organisational | Reduced staff turnover, especially 'hard to fill' roles; improve staff morale; reduce costs; reduce sickness absence; improve productivity. | Draft action plan produced. Focus initially on Children's and Adult Services. | 12 | * Align to wider draft 'People Strategy'
 | 16 | Dir of Corporate Services |  |

**Key to Scores**

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