Corporate Risk & Opportunity Register Q2 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	**Delivering the Operational Plan to ensure a strong and sustainable County Council** 1. Establishing a strong and visible leadership team	Economic	• Inability to deliver a balanced budget in future years • 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	• 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 on 28th June considered and agreed senior management recruitment arrangements. • Consultation with CMT members re team building concluded. Learning & Development working up proposal to go to CMT with September earmarked as a possible date for event. • Follow –up event with Heads of Service on Visions and Values and People Strategy held on 14 June. Key themes and messages circulated. These will be taken into account in developing the People Strategy. • HR Front Door projects addressing recruitment and learning and management systems progressing with project teams in place. • Visions and Values and People Strategy shared with executive. • Northamptonshire report considered at Leadership and Management Panel. Key issues to be incorporated as part of team building/ management development programme.	20	• The next meeting of Employment Committee will compile a shortlist of candidates for the permanent position of Chief Executive and a long list for the position of Executive Director Education and Children's Services. It is anticipated that interviews will take place in October 2018. • Work stream timeline to be reconsidered with reference to the draft People Strategy and actions re-prioritised • Roll out revised Personal Development Reviews – work ongoing • Agree approach to talent planning • Agree approach to succession planning • Develop management development programme • Undertake baseline staff survey – work ongoing • Draft People Strategy to be shared with wider leadership group • A refreshed intranet that establishes clear messages and a real sense of purpose	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

2. Embed a focus on service delivery to secure a better service at a lower cost		• Services become unsustainable and we cannot fulfil our statutory duties • Compounds ability to set balanced budget	• Service Challenge submissions still on track. • Review Panel Meetings scheduled – to the end of the stage 1 process. • Review Panel have considered a range of services. • Executive briefed on process • Discussion with LGA productivity experts regarding external challenge • Meetings held with a number of key stakeholders on the commercialisation strategy (and link to the Internal Scrutiny report on Income Generation) identifying owners of key strands of activity and approach e.g. assets.	• Service challenge reviews are progressing in line with agreed timetable • Mid-point review meetings being scheduled
3. Develop a sustainable financial strategy		• Unable to deliver a balanced budget in future years • Insufficient reserves • Services become unsustainable and we cannot fulfil our statutory duties	• Minimum Revenue Provision policy change – agreed approach. • Discussion held on any overlap between productivity work stream within the financial sustainability operational priority and the leadership / management operational priority • Analysis of Council and business rate tax base and collection benchmarking information with other councils and modelling of scope for additional income – discussion held at the revenue and benefits working group about options for seeking improvement. • Goods and services transactional expenditure analysed and largely matched to contracts register and identifying focus for detailed reviews. • Meetings held with LGA to review progress on both our offer to HMG and service challenges.	• Update Business Rate Retention Pilot Model • Discussions ongoing at Lancashire Chief Finance Officer meetings on Council Tax / Business Rates • Minimum Revenue Provision revision of policy report went to Cabinet and Full Council for approval in July. • LGA currently reviewing the draft commercialisation strategy • Looking at scope for utilisation of the LGA productivity improvement programme • Financial modelling of the offer to HMG options

| CR2 | Protect and safeguard children | Social | Children are put at risk of harm. | • 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 response where there are safeguarding concerns about a child with more timely decision making at the point of referral.
• Serious incident reporting in place to ensure an appropriate response to serious safeguarding concerns and when necessary notification to Ofsted/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. | 25 | • 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.
• Annual Improvement Plan to be developed following the recent Ofsted inspection to ensure continued improvement at pace.
• Safeguarding arrangements have been strengthened. Ofsted inspection (June 2018) - Inspectors broadly agreed with our self-assessment.
• As at June 2018, social worker and family support worker caseload averages are mostly in line with targets ("good" and "outstanding", respectively). Average: 22.9. However, some caseloads are significantly higher than this.
• Number of inexperienced workers in post continues to decrease (April 2017: 50.1%, June 2018: 23.8%).
• The proportion of experienced social workers has improved (April 2017: 15.2%, June 2018: 31.9%). | 16 | Director of Children's Services | The risk is being managed |

				• 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.				
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.	• 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. • Clear line of sight to front-line practice from the Cabinet Member and DCS and Stronger management oversight in districts. • Advanced Practitioners in post. Independent Reviewing Officer capacity increased and escalation of cases where there is none compliance. Change from generic to specialist teams has strengthened social work practice.	15	• Ofsted inspection June 2018: • noted significant improvements and, as a result, children's services are no longer inadequate. 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. • An Improvement Plan is in development 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. • 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. • 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 be maintained as part of our continuing improvement journey from requires improvement to be good.	12	Director of Children's Services	The risk is being managed
CR4	Recruit and retain experienced staff within Children's Services	Organisatio nal	Inability to deliver effective services. High caseloads. Lack of management oversight. Increased staff turnover. Increased agency spend.	• Vacancy monitoring via quarterly workforce report; monthly monitoring via Improvement Dashboard. Weekly monitoring of social work workforce position and caseloads.	25	• Performance Development & Research Officer to undertake a more detailed analysis to inform our understanding of demand, including the source, type and reasons underpinning the increase seen in recent months.	16	Director of Children's Services	The risk is being managed

				• 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.		• Development programme for more experienced Grade 9 social workers. • Improve compliance with supervision requirements to ensure staff receive appropriate support. • Staff retention has improved and as a result experience levels have improved. The number of inexperienced workers in post continues to decrease (April 2017: 50.1%, June 2018: 23.8%). • The proportion of experienced social workers has improved (April 2017: 15.2%, June 2018: 31.9%). • The proportion of agency social workers has increased (April 2017: 15.8%; June 2018 18.1%).			
CR5	Managing our data well and producing effective management information	Organisational	Ineffective collection, collation and input of data Failure to improve quality of data in council systems including those that have already been implemented and those that are being implemented. Ineffective use of business intelligence, resulting in the inability to identify and respond to changing trends and inform strategic decisions. Impact on strategic planning, understanding demand management e.g. around demographics and ageing population profile Ineffective reporting arrangements. Statutory returns will be compromised, so incorrect performance will be reported nationally, with potential for negative financial consequences OFSTED/CQC/LGA and other external organisations will be using inaccurate information to judge performance.	• Information Management Strategy. • Accuracy Steering Group chaired by Director of Adult Services oversees a programme of work to improve data quality within systems used by Adult Services • Data Quality and Performance Group oversees quality of information in systems for children's services • Regular provision of management information to staff at all levels across adults and children's services helps to embed ownership of data and improve recording. • Use of 'exception reports' which proactively highlights data anomalies and inconsistencies. • Development of a Corporate Performance Dashboard is facilitating a council-wide view of all services, which will improve the quality of reported data as anomalies will be highlighted.	16	• 'Project Accuracy' for Adults Services focussing on procedures and data quality is now underway. • Performance and Data Quality Group (Children's Services) is a well-established group facilitated by the Practice Improvement Officer. Heat maps have been designed to monitor Annex A data quality. • 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: • 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 – 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.	12	CMT	Level

				Service planning and management will be severely compromised. Potential for incorrect payment of providers, staff etc				• Passport to Independence metrics – reliability issues within weekly data trackers in adult social services. Solution to issue currently being explored.			
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 purpose Back office unable to function 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. 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	• 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. • 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.	16	• Continued monitoring of data within Lancashire Children's Service. • Programme of work rolled out to Lancashire Adults Service. New system roadmaps developed to provide more control over system changes. • 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. • Intensive early life support to services for newly implemented Highways system. Fortnightly meetings with service to discuss issues. Continuous tracking of issues and timescales for rectifying. After comprehensive work with the service and a review by audit a programme of work has been identified over a six month period to support the service in ensuring that the functionality of the system is used to best effect. • Critical incidents escalated within Corporate Services and BTLS.	12	Director of Programmes & Project Management	The risk is being managed

			controlled shutdown. Impact on service delivery	• Corporate performance information being developed as part of systems implementations though long term reporting tool needs developing and implementing. JSNA and other needs assessments. Discussed with various management teams on an ongoing basis. Weekly provision of information to operational managers for LCS. Monthly Performance Books or dashboards provided to Start Well Management Team and Adults Leadership Team. Uncontrolled and managed in a targeted way involving other key service areas to maximise benefit and support new framework contracts to ensure successful implementation. • New operating process and procedures developed and implemented to overcome recurring issues/problems - continuous improvement cycle implemented.				

CR7	Delivering major projects/schemes on time and within budget	Economic/ Political/So cial/reputat ional	Scheme viability in doubt due to speculative estimating and project management
			
			Pressure on capital programme
				• Capital Board
				• Capital Programme reports to Cabinet
				• Active project and programme management
					16	• Initial review work undertaken of a sample of major capital schemes to improve the estimating and testing of current and future scheme costs. 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 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 communi ty services	Level

CR8	Delivering a statutory service for children and young people with special educational needs and/or disabilities.	Organisatio nal/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.
				• 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:
				  o The lack of strategic leadership and vision across the partnership
				  o Leaders' inaccurate understanding of the local area
					25	• Recruitment of qualified staff funded by the SEND reform grant.
						• Commissioning arrangements with Health being reviewed.
						• The actions to implement the Written Statement of Action. These include:
						  o *SEND Partnership Board established with five thematic working groups to implement the written statement of action.*
						  o *SEND Partnership team delivering a series of parent/carer engagement events across the county. Further programme of events are being planned for the autumn.*
							16	Director of Children's Services	The Local Area SEND Inspection identified serious weakness in delivery of the SEND Reforms.

| | | | 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 | 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 | | *Open feedback survey in place.* *Supporting the formation of a Lancashire Parent/Carer forum.* *Implementation of the early help (IT) module.*
Strategic reporting and monitoring of improvement plan at Cabinet and CMT level. Active leadership of Health and Wellbeing Partnership is leading SEND improvement plan. | | | |
| 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 | 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. 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. DTOC Board established. Programme Office defined future governance and programme management. NHSE and LGA issued an Enhanced Care Support Offer which Newton Europe will deliver and is targeted at areas which will include Lancashire (1 of10 areas) where there are challenges in meeting DTOC Nov 2017 target ostensibly due to performance at LTHT. H&WBB held a Check and Challenge panel 8/1/18 to establish what is working and to be systemised and standardised across entire system and where there are barriers and how as a system we will tackle with BCF steering group holding the accountability for progressing/monitoring. | 16 | Exec Director of Adult, Health and Wellbeing Services | Level |

			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.			• IBCF LCC slippage made available to all health economies to accelerate high Impact programmes changes. • LCC instituted a DTOC tracker to take a grip of performance in each of acute settings and DTOC analysts recruited to grip individual cases and progress chase in each of acute settings.			
CR10	Adult social care provision is adequate and responsive to meet current and future demand	Organisatio nal/social/e conomic	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)	Organisatio nal/econo mic /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.	• 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	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.	16	Director of Public Health	Level

			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	with the team ensuring that all available data and information systems are fully utilised to maximise PBR claim opportunities		• TFU Maturity Model self-assessment completed and developed action plan to support delivery and improvement.			
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.	Organisational/reputational/financial	Potential impact on the data subject – Physical/financial/mental harm including potential distress and in some circumstances a threat to their safety. Potential impact on the county council if the organisation's confidential commercial data has been exposed resulting in a material loss Financial penalty given to the council by the Information Commissioner (up to £17.7 million). Compensation claim to the council by the data subject. Reputational damage to the council	• 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)	Extra controls created to comply with GDPR… • 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.	12 (Major/Possible)	Director of Corporate Services	Downwards
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	Economic/ Political/organisational	Self-sustaining organisation Stronger and growing economic base Ability to deliver affordable high quality services with outcomes relevant to the needs of our residents,	• 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	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	16	CMT	Level

	the whole of Lancashire		communities and businesses
			
			Improved productivity and earning power of all residents
			
			Continued successful delivery of the LEP's current strategic economic growth programmes.
			
			Successfully securing new resources for Lancashire to support job and business creation, housing growth and the delivery of strategic transport infrastructure linking to drive economic growth and regeneration, linking residents and businesses with economic opportunities.
					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.
							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:
							
							    o a Local Industrial Strategy (aim to be an early adopter)
							    o a new Lancashire Prospectus
							    o 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.
							
							• Lancashire Leaders have agreed to a "growth" workshop on 24 July to develop shared priorities with the support of the LEP.
							
							• Lancashire's Transforming Cities submission with Government.
							
							• Secured national Digital Skills Pilot status			

CO2	Apprenticeship Levy and Apprentice % in Public Sector	Political Economic Social Reputational Organisational	Increase in Apprentices in the workforce and use the Apprenticeship levy to its maximum benefit to support critical development needs in the County Council	The Apprenticeship Levy is live from April 2017 and the first payment from the digital account was in May 2017. Work is being undertaken across LCC with Heads of service or their representatives to discuss their overall workforce development and what part the Levy could play in this.	12	• Maximise the benefits of the Apprenticeship Levy within LCC by working in conjunction with Management Team, Finance and HR to embed this into structures across the organisation. • Working with services to identify the quick wins where these suit their business need and to thus eliminate training expenditure where we can, and link to Levy fund. • L&D are speaking to Heads of Service to see how their training needs can be creatively addressed to link with the Levy, where possible. • Heads of Service have been asked to report to L&D any current areas of training expenditure commitment that they have entered into. Heads of Services have been asked not to enter into any further financial commitments without speaking to L&D	15	Dir of Corporate Services	Upwards
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' • 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	

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			