| Ref | Risk Category – | levels 1 & 2 | Lead | RAG | Change / Comment |
|-----|------------------|--|------|-----|-------------------|
| 1 | COMPLY WITH T | HE LAW | | | |
| 4.0 | 0 | Information Governance Failure | CS | R | Narrative updated |
| 1A | Governance | Governance failings implementing service changes | CEO | Α | Narrative updated |
| 4.0 | De sudete su | Non-Compliance with Health & Safety | CEO | Α | Narrative updated |
| 1B | Regulatory | 2. Respond to legislative change | CS | Α | Narrative updated |
| | | 3. High levels of poor Air Quality – Renamed Impact of Climate Change | COM | Α | Narrative updated |
| 2 | SECURE SERVI | ES OUSERS | | | |
| | | Adequacy of Internal Control | CS | R | Narrative updated |
| | | 2. Failure in Child Safeguarding | CYP | R | Narrative updated |
| 2A | Process | Non-delivery of transformational change | CS | R | Narrative updated |
| | | 4. Elections not conducted efficiently or effectively | CEO | G | Narrative updated |
| | | 5. Serious Adult Safeguarding concerns | COM | R | Narrative updated |
| 2B | Technology | ICT not fit for purpose/does not meet business needs | CS | Α | Narrative updated |
| | | Cyber Security breaches corrupt or locks down systems or data | CS | R | Narrative updated |
| 3 | DEVELOP STAF | & PARTNERS | | | |
| 24 | Manlefones | Loss of constructive relations | CS | Α | Narrative updated |
| 3A | Workforce | 2. Maintain sufficient management capacity & capability | CEO | Α | Narrative updated |
| ap. | Danta analisis s | Multi-agency governance leads to ineffective partnership working | CEO | Α | Narrative updated |
| 3B | Partnerships | 2. Agree integrated delivery models for local health and care services | COM | Α | Narrative updated |
| 4 | SERVICES REP | ESENT VFM | | | |
| 4A | Procurement | Failure to manage suppliers and procurement programmes. | CS | Α | Narrative updated |

| Ref | Risk Category – | levels 1 & 2 | Lead | RAG | Change / Comment |
|-----|-----------------|--|------|-----|--------------------------------|
| 4B | Performance | Failure to manage performance leads to service failure | CEO | Α | Narrative updated |
| 5 | MANAGE WITHI | I BU)GET | | | |
| | | Financial failure unable to maintain delivery within balanced budget | CS | Α | Score change from amber to red |
| 5A | Financial | 2. Unforeseen expenditure/loss of income from funding streams | CS | Α | Narrative updated |
| | | 3. Loss of income - debt collection | CS | Α | Narrative updated |
| 5B | Bus. Continuity | Failure to contain impacts of emergency | CS | Α | Narrative updated |
| 6 | BREXIT | | | | |
| 6 | | 1. Risk of disruption to Council services and impact on residents/businesses | CS | Α | Narrative updated |

Key

Scoring

5x5 Likelihood and Impact with 1 Low and 5 High. See Risk Management Strategy for guidance on assessing impact and likelihood

RAG rating

- △ Red
- Amber
- ★ Green

Direction of Travel

- Better
- → Same
- **¥** Worse

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|---|-------------------|------------------|-----------------|---------------------|--------------------|--|---|---|--|
| 1. Co | mply with the La | aw: A. Go | vernance | | | | | | | • |
| 1.A.1 | Good governance and effective operational performance | | 16 | 8 | | → | Executive Director for Corporate Services | Established policy framework Information Governance Board in place Information asset and security environment audits undertaken Staff training modules developed Regular EMT briefings Review of FOI, SARS and Complaints team set up PSN and PCI compliant | Roll out mandatory online information governance and security training for all staff Decommission old server environment Implement audit recommendations Review assessment of Cyber Security risk and actions required | Commenced Jan 20. Currently paused Mar 20 slipped to Oct 20 Ongoing – next milestone exercise Dec 20 |
| | Impact | | 4 | 4 | | | | Compilaria | | |
| | Likelihood | | 4 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|--|-------------------|------------------|-----------------|---------------------|--------------------|--------------------|---|--|--|
| 1. (| Comply with the La | aw: A. Go | overnance | | | | | | | |
| 1.A.2 | Governance (opportunities s and threats) in the implementation on of service changes | • | 12 | 8 | • | → | Chief Executive | Corporate Strategy to 2022 adopted Member and Director finance training delivered and additional budget sessions and officer training on equalities. This will continue Transition planning has commenced | Design and communicate approach to service redesign and change work for 2021 – LA MTFS – to prepare 2021/22 Budget. Implementation of 20/21 service changes in line with Budget to live within financial limits. Corporate priorities being reviewed in light of COVID-19. Transition planning and | May 20 Done |
| | Good governance and effective operational performance | | | | | | | | stabilistation post Covid | completed June 20. Phase 2 July to Dec 20. Phase 3 Autumn onwards |
| | Impact | | 4 | 4 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|------|---|-------------------|------------------|-----------------|---------------------|--------------------|--------------------|--|--|---|
| 1. C | Moncompliance with Health & Safety Legislation Good governance and effective operational | egulatory | 12 | 6 | | → | Chief Executive | Corporate H&S manual. Regular prog. of full and self-audits reported to H&S Committee Directorate H&S Working Group meets quarterly with representation from across all divisions and reports to Unions Full H&S programme of training available. Corporate H&S Team working to raise awareness and commitment among senior managers and staff. Ensure H&S guidance is updated and staff briefed when moving as part of ongoing restack works in LH | All DMTs to review annual self-assessments, incidents and audits Undertake a review of how H&S is currently managed and recruit and adjust accordingly, This will cover: Operational Assets (inc PO Handbook) Staff welfare Review approach to tree risk assessments and related work programme H&S Board monitoring progress with fire risk works and statutory & planned building maintenance works Reviewing revisions to service H&S risks for assessments impact of Covid risks | Done – next cycle launched in Oct 19 Apr 20 Slipped to Sept 20 due to Covid 19 Mar 20 Done Quarterly For the duration of the Covid response |
| | performance | | | | | | | Monitor through OH referrals | | |

| Impact | 4 | 3 | | | |
|------------|---|---|--|--|--|
| Likelihood | 3 | 2 | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|--|-------------------|---------------|-----------------|---------------------|--------------------|---|---|--|---|
| 1. Co | Failure to anticipate and respond appropriately to legislative change Good governance and effective operational | aw: B. K | 12 | 5 | | • | Director of Financial Services / Assistant Chief Executive | Engaged with relevant professional bodies and government departments Established a Brexit working group with regular reporting to EMT in weeks preceeding exit deadline dates Training & communications | Reports to Council on changes necessary to reflect Legislation. Responding to Govt consultations and lobbying in various areas of political change (e.g. CSR, FFR, NNDR, DSG, Social Care etc Brexit Risk Assessments to be informed by preparations for and experience of post 31st January 2020 transition Monitor developments in respect of social care, welfare reform, housing, etc in particular as they arise from government announcements | As Dictated Gov't agenda Next milestone Sept 20 On-going. RAs to be updated by Sept 20. Ongoing |
| | performance Impact | | 4 | 5 | | | | | | |
| | Likelihood | | 3 | 1 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|---|-------------------|------------------|-----------------|---------------------|--------------------|--|---|--|--|
| 1. | Comply with the Law: B. | Regulatory | | | | | | | | |
| 1.B.3 | Impact of climate change (e.g. air quality, extreme weather, flooding, compliance with new requirements/standards for service delivery). Making Lewisham Greener | Regulatory | 12 | 6 | | * | Executive Director for Community Services/Executive Director HRE | Climate Emergency Strategic Action Plan agreed by Mayor and Cabinet in March 2020 Continuing to work with Air Quality Management Area Plan and London, National and European strategies to improve Air Quality. Traffic reduction pilot in place in Lee and Hither Green Lewisham Climate Emergency Public Forum Strategic Air Quality Board quarterly. | Acton Plan to be reviewed annually by Sustainable Development and M&C Lobbying Government and other for resources to deliver on the Climate Emergency Action Plan Develop strategy and supporting plans to work towards climate emergency targets LEZ fleet procurement strategy – refuse and transport – delivery by summer 2020 Annual Air Quality report completed for submission | Nov 20 / Feb 21 Ongoing next milestone partial delivery Sept 20 |
| | Oreener | | | | | | | | | |
| | Impact | | 4 | 3 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|--------|---|-------------------|------------------|-----------------|---------------------|--------------------|--|--|---|--|
| 2. Sec | ure Services to | Users: A | . Process | | | | | | | |
| 2.A.1 | Adequacy of Internal Control Framework Good governance and effective operational performance | | 16 | 8 | | → | Executive Director for Corporate Services Assistant Chief Executive | Internal audit, risk & anti-fraud work — Satisfactory opinion for 2018/19 Anti-fraud, Antimoney laundering, whistle blowing policies and hot lines in place Annual National Fraud Initiative (NFI) & data matching Coordination/ joint working with central Govt. agencies (DWP, HMRC, BA), Lewisham Homes and other local housing providers. Quarterly reports to Exec Directors, ICB, Audit Panel monitoring trends & progress | Implement next phase of Oracle system. Various milestones. Finance and PBCS live. Preparations for Payroll and self-service continue although delayed. Next phase to get wider business improvements to realise benefits of investment Improvement plan for Liquid Logic (LAS/LCS and Controc) system and processes for CSC and ASC, aligned with service operating models and procedures. Approach agreed and work in progress Internal audit to work with finance on 'to be' control environment for Oracle Cloud Two 16/17 objections — LOBO and PFI — still open with external audit | Phase 1 – Mar 20 Done Phase 2 – Jun 20 (slipped for payroll) Done Next milestone HR PID Sept 20 Mar 20 slipped to Aug 20 (slipped as Oracle delayed and COVID-19 impact) Final response to be published Aug 20 |
| | Impact | | 4 | 4 | | | | | | |
| | Likelihood | | 4 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|--|-------------------|------------------|-----------------|---------------------|-----------------------|---|--|--|--|
| 2.A.2 | Failure in Child Safeguarding Giving children and young people the best start in life | | 25 | 20 | * | → | Executive Director Children & Young People | All cases risk assessed at lockdown Thresholds for access to services restricted to minimum statutory requirements LCS system redesigned to improve recording and management oversight Virtual visiting introduced Operational procedures revised Weekly critical safety panel created to review performance Quality assurance and performance framework in place to monitor practice. | Improvement Programme 2018/19 - 2021/22 to drive up quality of practice to be consistently good. Strengthen quality assurance and performance framework Workforce Development strategy under development to strengthen recruitment, retention and training permanent workforce Re-launch of supervision policy to strengthen risk management Child Exploitation Strategy under development in the Safeguarding Partnership to manage risk to young people in the community Corporate Parenting strategy under development to develop services for children in care and care leavers | April 2022 Through 2020 Sept 2020 Sept 2020 Dec 2020 |
| | Impact | | 5 | 5 | | | | | | |
| | Likelihood | | 5 | 4 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|--|-------------------|------------------|-----------------|---------------------|--------------------|--|---|---|---------|
| 2. Se | cure Services to | Users: A. | Process | | | | | | | |
| 2.A.3 | Strategic programme to develop and implement transformation change does not deliver Good governance and effective | Δ | 15 | 10 | • | → | Exec Director for Corporate Services | Assistant Chief Executive appointed Change and improvement board arrangements in place | Review and improve change strategy in line with Corporate Priority objectives. | Sept 20 |
| | operational performance | | | | | | | | | |
| | Impact | | 5 | 5 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|---|-------------------|------------------|-----------------|---------------------|--------------------|------------------------------------|---|---|-------------|
| 2.A.4 | Elections not conducted efficiently or effectively Good governance and effective operational performance | * | 5 | 4 | * | → | Chief Executive/ Head of Law | • | Undertake delayed Canvas update Implement Boundary Commission changes once confirmed Prepare for London Mayoral Election in May 21 | TBC in 2020 |
| | Impact | | 5 | 4 | | | | | | |
| | Likelihood | | 1 | 1 | | | | | | |

| Performance DMT. Performance DMT. Performance DMT. Performance DMT. Cases that meet the threshold for a statutory safeguarding audit review are referred to the Safeguarding adult review board that meets monthly. Deprivation of Liberty Safeguards applications continue to rise. To mitigate the risk of legal challenge for unauthorised detentions community DOLS are being Performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review donathly. Monthly sessions place to monitor practice trends a quality the trends a detentions continue to rise. To mitigate the risk of legal challenge for unauthorised detentions community practice trends are the performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review board that meets monthly. Performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review board that meets monthly. Performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review board that meets monthly. Performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review board that meets monthly. Population of Liberty Safeguards applications continue to rise. To mitigate the risk of legal challenge for unauthorised detentions community provision. | Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|--|----------|--|--------------------|------------------|-----------------|---------------------|--------------------|----------------------------------|--|--|---|
| COP applications made. • New system Liberty Protection safeguards | 2. Secur | re Services to Us Serious Adult Safeguarding | status sers: A. | score Process | score | v target | of travel | Executive Director for Community | Regular reports to the LSAB. Case audits by management. Monitoring through Performance | Safeguarding processes are being reviewed throughout operational and provider services and partner organisations. Safeguarding performance is scrutinised by the LSAB and DMT. Cases that meet the threshold for a statutory safeguarding audit review are referred to the Safeguarding adult review board that meets monthly. Deprivation of Liberty Safeguards applications continue to rise. To mitigate the risk of legal challenge for unauthorised detentions community DOLS are being processed on time and COP applications made. New system Liberty Protection safeguards will be implemented in April 2022 now that | Cct 20 LSAB meets quarterly and SAR meets monthly. Monthly QA sessions in place to monitor practice trends and quality provision. Monthly reviews to monitor practice |

| | | | | | Task and Finish Group in place to monitor all actions from DHR's | Reviewed in March annually |
|--|---|---|--|--|--|----------------------------------|
| Delivering and defending health, social care, and support | | | | | These are reviewed at Safeguarding Boards and Safer Lewisham Partnership 1 x new DHR's has begun. | |
| Impact | 5 | 5 | | | | |
| | | _ | | | | |
| Likelihood | 4 | 4 | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-----------------|--|-------------------|------------------|-----------------|---------------------|--------------------|--|--|--|--|
| 2. Secure 2.B.1 | ICT infrastructure is not fit for purpose and/or does not meet business needs (2) Good governance and effective operational | rs: B. Te | 12 | 6 | | → | Executive Director for Corporate Services | New MD appointed and implementing improvement plan. Building up application level of clienting to ensure performance is as it should be. Significant update implemented to improve resilience. New security forum in place with work plan to complete and help stabilise infrastructure. | New MD for Shared Service appointed Complete work to improve network security – online work done (e.g. cloud solutions) but on premise work (e.g. SharePoint to conclude) Work with Shared Service to raise performance target from 99% to 99.9% reliability as part of new operational plan for 20/21 to be agreed by all partners. Prepare business case and agree phase 2 smarter tech rollout to remaining staff/sites Review 8 x 8 telephony one year ahead of next procurement | Dec 19 Done Ongoing Next milestone Mar 20 Done July 20 (slipped Dec 19) June 20 Done June 20 Slipped review as part of digital |
| | performance Impact | | 4 | 3 | | | | | | strategy Mar 21 |
| | Likelihood | | 3 | 2 | | | | | | |

| | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-----------|--|-------------------|------------------|-----------------|---------------------|--------------------|--|--|---|--|
| 2. Secure | Services to User | s: B. Te | chnology | | | | | | | |
| 2.B.2 | Cyber Security breaches corrupt or locks down Council systems or data. Building Safer Communities | Δ | 15 | 5 | Δ | → | Executive Director for Corporate Services | External independent reviews of security arrangements and practices Documented systems to support PSN compliance | Plan for implementation of recommendations from IT security audit concluded in June Monitor attack levels and develop response reporting Review assessment of Cyber Security risk and actions required Shared service to develop and test disaster recovery plan Gain approval for formal cyber response policy | July 20 (slipped Sept 19) Next milestone Mar 20 Done Jan 20 Done Sept 20 (slipped from March 20) Sept 20 |
| | Impact | | 5 | 5 | | | | | | |
| | Likelihood | | 3 | 1 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-----------|--|-------------------|------------------|-----------------|---------------------|--------------------|--------------------|--|--|---------|
| 3. Develo | op Staff and Part | ners: A. V | Norkforce | | | | | | | |
| 3.A.1 | Loss of constructive employee relations Building an inclusive local economy | • | 9 | 8 | * | → | Chief Executive | Refreshed people management framework Continued employee assistance programme Extended Union engagement Launched Pulse surveys | Continue to run regular Pulse surveys | Ongoing |
| | Impact | | 3 | 4 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|--------|---|-------------------|------------------|-----------------|---------------------|--------------------------|--------------------|--|---|---------|
| 3. Dev | elop Staff and Partn | ers: A. W | orkforce | | | | | | | |
| 3.A.2 | Failure to maintain sufficient management capacity & capability to deliver business as usual and implement transformation changes | • | 12 | 9 | * | → | Chief Executive | All EMT posts now recruited to Restructure of director level posts | Complete directorate service changes and recruit as appropriate | Dec 20 |
| | Good governance and effective operational performance Tackling the housing crisis | | | | | | | | | |
| | Impact | | 4 | 3 | | | | | | |
| | Likelihood | | 3 | 3 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-----------------|--|-------------------|------------------|-----------------|---------------------|--------------------------|--------------------|--|---|--|
| 3. Partnersl | Develop Sta | ff and Part | ners: B. | | | | | | | |
| 3.B.1 | Multi-agency governance leads to ineffective partnership working - Health -Housing -Police - VSec -Business -Schools Building safer communities | | 8 | 4 | | → | Chief Executive | Partnerships in place across health and social care. Monitoring of initiatives takes place via DMT, S75 Board and HWBB. Integration planning continues with new joint posts agreed and recruited to. Whole system recovery plan has been developed. | Implement new joint H&SC governance working arrangements Review holistic approach for grant funding Review need for a new Community Strategy for Lewisham Review of changes to Police/CRC+NFS/Fire Continue to develop the Lewisham Health & Care partnership alliance arrangements whole system change. Care at home leadership group has now been established. Continue to develop strategic commissioning function. Proposals for Commissioning Alliance and provider alliances are being developed. Work with providers to develop an operational model for Care at Home and Adult Mental Health. Review of changes to Police/CRC + NPS/Fire | June 20 June 20 Monthly by Lewisham Health & Care Partners Board |
| | Impact | | 4 | 4 | | | | | | |
| | Likelihood | | 2 | 1 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-------|--|-------------------|------------------|-----------------|---------------------|--------------------------|--|--|---|-----------------------------|
| 3.B.2 | Failure to agree with partners integrated delivery models for local health and care services | | 12 | 4 | | → | Executive Director Community Services | Partnerships in place across health and social care. | CEO leading work to agree place based joint working arrangement for LBL and CCG / NHS various milestones. New Strategic Plan with partners required. Continue to develop the strategic commissioning function. Proposals for Commissioning Alliance and provider alliances are being developed. | ongoing Completed Ongoing |
| | Delivering and defending health, social care, and support | | | | | | | | Work with providers to develop an operational model for care at home and Adult Mental Health. | Sept 20 |
| | Impact | | 4 | 2 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Risk | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|----------------|---|-------------------|------------------|-----------------|---------------------|--------------------------|--|---|---|---|
| 4. Procuren | Develop Sta | ff and Part | ners: A. | | | | | | | |
| 4.A.1 | Failure to manage strategic suppliers and related procurement programmes. (13) Building an inclusive local economy | • | 12 | 6 | Δ | → | Executive Director for Corporate Services | Published work on community wealth building as part of inclusive growth strategy development Growth in service for additional x2 posts Rolled out quarterly procurement training courses for all appropriate officers | Update approach and review of contract management for types of contract. Conclude Fees & Charges work for 20/21 budget and accelerate work on memorandum trading accounts for priority services re commercial work Roll out contract management training module for all procurement and contract managers | Oct 20 (slipped from Mar 20) Fees and charges report published in 20/21 Budget in Feb 20. Trading accounts slipped to Dec 20 due to Covid |
| | Impact | | 4 | 3 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Curren t v target | Direct' n of travel | Responsibl e | What have we done & source of assurance | What are we planning to do | By when |
|---------|--|-------------------|------------------|-----------------|-------------------------|---------------------------|--------------------|---|---|----------------------------------|
| 4. | Services R | epresent \ | /FM: A. | | | | | | | |
| Perform | | 1 | | | | 1 | T | | T | T |
| 4.B.1 | Failure to manage performanc e leads to service failure (10) | • | 12 | 4 | Δ | → | Chief Executive | • | Transfer reporting of risk to Audit Panel Director sessions, as part of Budget/MTFS planning, to improve alignment and monitoring of key service activity, forecasts etc to assess cost rivers Review of corporate performance monitoring arrangements by EMT | Mar 20 Done May 20 Done |
| | governanc e and effective operation al performan ce | | | | | | | | | |
| | Impact | | 3 | 2 | | | | | | |
| | Likelihood | | 4 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|--------|---|-------------------|---------------|-----------------|---------------------|-----------------------|--|---|---|----------------|
| 5. Mar | nage within Budge | et: A. Fina | ancial | | | | | | | |
| 5.A.1 | Financial Failure and inability to maintain service delivery within a | • | 25 | 4 | Δ | 1 | Executive Director for Corporate Services | • | Prepare 20/21 Budget based on Spending Review 19 and £16.6m of cuts agreed and update MTFS | Feb 20 Done |
| | balanced budget | | | | | | | | Reset and rightsize service budgets with Directors to sign for their cash limits to facilitate future service reviews through 2020. | Mar 20 Done |
| | | | | | | | | | Continue with detailed quarterly cuts and service spend financial monitoring, including MHCLG returns | Ongoing |
| | Good governance and effective operational performance | | | | | | | | | |
| | Impact | | 5 | 4 | | | | | | |
| | Likelihood | | 5 | 1 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|--------|--|-------------------|---------------|-----------------|---------------------|-----------------------|--|---|--|---|
| 5. Man | age within Budget: | A. Finan | cial | | | | | | | |
| 5.A.2 | Lack of provision for unforeseen expenditure or loss of income | • | 12 | 6 | Δ | → | Executive Director for Corporate Services | • | Prepare for 75% Business Rates devolution Pension Fund triennial | As per Gov't timetable that has been delayed |
| | in respect of Council's liabilities or funding streams | | | | | | | | actuarial valuation underway | Done – next milestone Mar 20 |
| | | | | | | | | | Assess impact of delayed CSR & FFR with Autumn Chancellor's budget. | On hold |
| | | | | | | | | | Actuarial review of insurance provisions and reserves | Sept 20 |
| | Good governance and effective operational performance | | | | | | | | | |
| | Impact | | 4 | 3 | | | | | | |
| | Likelihood | | 3 | 2 | | | | | | |

| Ref 5. Man | Risk age within Bud | Current status get: A. F | Current score inancial | Target score | Current v target | Direct' n of travel | Responsibl e | What have we done & source of assurance | What are we planning to do | By when |
|------------|--|--------------------------------|------------------------------|-----------------|---------------------|---------------------------|--|--|---|--------------------------------------|
| 5.A.3 | Loss of Income to the Council – Failure to collect debt Good governa nce and effectiv e operatio nal perform ance | | 12 | 9 | * | • | Executive Director for Corporate Services | ASC charging now all on latest policy. All financial assessments re-done. Ash review for sundry debt concluded to move with a manual solution to: | ASC review of process and systems for charging and improvement programme business case agreed and presently being scoped. Implement autocharging through Controcc - | April 20 - slipped to Dec 20 Dec 20 |
| | Impact | | 3 | 3 | | | | | | |
| | Likelihood | | 4 | 1 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct' n of travel | Responsib le | What have we done & source of assurance | What are we planning to do | By when |
|----------|--|-------------------|---------------|-----------------|---------------------|---------------------------|--|---|---|--|
| 5. Manag | je within Budg | jet: B. Bı | usiness C | ontinuity | | | | | | |
| 5.B.1 | Failure to effectively contain the impacts of an emergency affecting the public, business, environmen t and/or organisation (1) Building safer communit ies | | 10 | 8 | * | • | Executive Director Corporate Services | Ongoing – LALO, LACO & Gold training delivered London wide standardised training packages are now available and training has commenced and will run throughout 2020. | Run exercise safer city in line with new resilience standards Brexit Corporate Group set up overseeing the implications of Brexit including developing an action plan. Updates provided to EMT, the Mayor and Cabinet Run a cyber-exercise in 20/21 | Following Gov't steer Next review Sept 20 |
| | Impact | | 5 | 4 | | | | | | |
| | Likelihood | | 2 | 2 | | | | | | |

| Ref | Risk | Current status | Current score | Target score | Current v target | Direct'n of travel | Responsible | What have we done & source of assurance | What are we planning to do | By when |
|-----------|--|-------------------|------------------|-----------------|---------------------|--------------------------|--|--|--|------------|
| 6. BREXIT | Brexit: Risk of disruption to council services and impact on residents and businesses operating in the borough | • | 8 | 8 | * | → | Responsible - Head of Corporate Policy and Governance | Corporate Group set up to manage and plan mitigation. Meets fortnightly. Emergency planning liaising with London Resilience as information and guidance is released. Regular briefing to EMT and Mayor and Cabinet | Review all Brexit risk assessments for end January or next possible exit date Maintain a watching brief as negotiations for next phase begin | Sept 20 |
| | Good governance and effective operational performance | | | | | | | | | |
| | Impact | | 4 | 4 | | | | | | |
| | Likelihood | | 2 | 2 | | | | | | |