

Strategic Risk Register – September 2021

Ref	Risk Category – levels 1 & 2	Lead	RAG	Change / Comment	
<b>1</b>	<b>COMPLY WITH THE LAW</b>				
1A	<b>Governance</b>	1. Information Governance Failure	CR	<b>A</b>	Reviewed & <b>score reduced</b> R to A
		2. Governance failings implementing service changes	CEO	<b>A</b>	Reviewed – no change
1B	<b>Regulatory</b>	1. Non-Compliance with Health & Safety	CEO	<b>A</b>	Reviewed and updated
		2. Respond to legislative change	CEO	<b>A</b>	Reviewed and updated
		3. Impact of Climate Change	HRPR	<b>A</b>	Reviewed & updated
<b>2</b>	<b>SECURE SERVICES TO USERS</b>				
2A	<b>Process</b>	1. Adequacy of Internal Control	CR	<b>R</b>	Reviewed and updated
		2. Failure in Child Safeguarding	CYP	<b>R</b>	Reviewed and updated
		3. Non-delivery of transformational change	CEO	<b>R</b>	Reviewed & updated
		4. Elections not conducted efficiently or effectively	CEO	<b>G</b>	Reviewed and updated
		5. Serious Adult Safeguarding concerns	COM	<b>R</b>	Reviewed & updated
2B	<b>Technology</b>	1. ICT not fit for purpose/does not meet business needs	CR	<b>A</b>	Reviewed <b>score reduced</b>
		2. Cyber Security breaches corrupt or locks down systems or data	CR	<b>R</b>	Reviewed and updated
<b>3</b>	<b>DEVELOP STAFF &amp; PARTNERS</b>				
3A	<b>Workforce</b>	1. Loss of constructive relations	CEO	<b>A</b>	Reviewed & updated
		2. Maintain sufficient management capacity & capability	CEO	<b>A</b>	Reviewed & updated
		3. Pace of change negatively impacts service delivery & morale	CEO	<b>A</b>	Reviewed & <b>score reduced</b> R to A
3B	<b>Partnerships</b>	1. Multi-agency governance leads to ineffective partnership working	CEO	<b>A</b>	Reviewed & updated
		2. Agree integrated delivery models for local health and care services	COM	<b>A</b>	Updated narrative June 21

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<b>4</b>	<b>SERVICES REPRESENT VFM</b>				
4A	<b>Procurement</b>	1. Failure to manage suppliers and procurement programmes.	CR	<b>A</b>	Reviewed & updated
		2. Global commodity price increases/supply chain shortages	CR	<b>A</b>	<b>NEW RISK</b>
4B	<b>Performance</b>	1. Failure to manage performance leads to service failure	CEO	<b>A</b>	Reviewed – no change
		2. Delivery of Building for Lewisham fails	HRPR	<b>A</b>	Reviewed & updated
		3. Comply with RSH Consumer Standards	HRPR	<b>A</b>	<b>NEW RISK</b>
<b>5</b>	<b>MANAGE WITHIN BUDGET</b>				
5A	<b>Financial</b>	1. Financial failure unable to maintain delivery within balanced budget	CR	<b>R</b>	Reviewed & updated
		2. Unforeseen expenditure/loss of income from funding streams	CR	<b>A</b>	Reviewed & updated
		3. Loss of income - debt collection	CR	<b>A</b>	Reviewed & updated
5B	<b>Bus. Continuity</b>	1. Failure to contain impacts of emergency	CR	<b>A</b>	Reviewed & updated
		2. Contain the impacts of Covid-19 and deliver services	CR	<b>A</b>	Reviewed - <b>score change R to A</b>
<b>6</b>	<b>OTHER</b>				
		1.			

### 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

**Strategic Risk Register – September 2021**

Direction of Travel

- ↗ Better
- Same
- ↘ Worse

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<b>1. Comply with the Law: A. Governance</b>										
1.A.1	Information Governance failure	●	9	3	△	↗	Executive Director for Corporate Resources	<p>Staff training modules developed</p> <p>Established policy framework</p> <p>Information Governance Board in place</p> <p>Information asset and security environment audits undertaken</p> <p>Regular EMT briefings - Director has been invited to and will attend EMT with an update on IG work and activities</p> <p>New SIRO and MD of shared service briefed and aware of past vulnerabilities</p> <p>Audit issues largely implemented There were 17 IG recommendations of which 4 are outstanding, none of which represent a serious breach risk</p>	<p>Roll out mandatory online information governance and security training for all staff</p> <p>Complete transfer of the IG function to ITDS and review staff structures, processes and technology capabilities</p> <p>Implement audit recommendations</p> <p>Our biggest risk of breach is people sending email to the wrong address. Ig will conduct a review to establish if any practical remediations are available</p>	<p>Ongoing</p> <p>Dec 21 (slipped Dec 20)</p> <p>Jan 22</p> <p>Mar 22</p>
	Impact		3	3						
	Likelihood		3	2						

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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
<b>1. Comply with the Law: A. Governance</b>										
1.A.2	Governance (opportunities and threats) in the implementation of service changes	●	8	8	★	➔	Director of Law, Corporate Governance	<ul style="list-style-type: none"> <li>• Corporate Strategy to 2022 adopted</li> <li>• Member and Director finance training delivered and additional budget briefing sessions organised .This will continue for future years</li> <li>• 21/22 budget agreed by Council following a new, themed approach</li> <li>• New corporate programme management office established to ensure consistent approach to major programme and projects with grip and delivery central elements.</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of 21/22 service changes in line with Budget to live within financial limits.</li> <li>• Readyng the organisation for end of lockdown following Government's roadmap, Planning for "recovery" is taking shape, aligned with London Recovery Board and missions</li> </ul>	<p>End of March 2022</p> <p>Done April 12<sup>th</sup>;May 17<sup>th</sup> and June 21<sup>st</sup> 19<sup>th</sup> July 2021 all subject to review by Govt</p>
	<b>Impact</b>		<b>4</b>	<b>4</b>						
	<b>Likelihood</b>		<b>2</b>	<b>2</b>						

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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
<b>1. Comply with the Law: B. Regulatory</b>										
1.B.1	Non-compliance with Health & Safety legislation	●	12	6	△	➔	Chief Executive	<ul style="list-style-type: none"> <li>Directorate H&amp;S Working Group meets quarterly with representation from across all divisions and reports to Unions</li> <li>Programme of H&amp;S training available. Programme initiated in conjunction with HR.</li> <li>Recording, monitoring and comparison of incident reporting figures. Statistics shared and discussed with Directorates at quarterly meetings</li> <li>Corporate H&amp;S guidance updated and includes post-COVID practices.</li> <li>Corporate H&amp;S manual - draft issued for comment.</li> <li>Review of existing fire &amp; first aid arrangements, post COVID</li> <li>Self-assessments/questionnaires submitted for comment/approval</li> </ul>	<ul style="list-style-type: none"> <li>CH&amp;S Board monitoring progress with fire risk works and statutory &amp; planned building maintenance works</li> <li>Continued to work with HR to ensure adequate training (induction &amp; bespoke) is available</li> <li>Continual monitoring to ensure incident reporting process is followed</li> <li>Continue to implement changes to H&amp;S governance as part of LBL restructure.</li> <li>Reviewing revisions to service H&amp;S risks for assessments impact of Covid risks</li> <li>Second draft to be completed upon receipt of feedback</li> <li>Proposal to give mandatory fire training to all staff</li> <li>To be rolled out to Directorates</li> </ul>	<p>Next Qtly meetings Jan 22</p> <p>Ongoing</p> <p>Ongoing</p> <p>Nov 21</p>

Strategic Risk Register – September 2021

								<ul style="list-style-type: none"> <li>• Risk mapping assessments submitted to Directorates</li> <li>• Building Statutory Compliance – fire, water and asbestos risk assessment programme in place</li> <li>• Building Statutory Compliance – property inspections to audit completion of statutory compliance maintenance and reactive works</li> <li>• Action in progress to identify the individuals responsible for all Council Operational buildings</li> <li>• Water, Fire and Asbestos policies currently under review (further to COVID, council re-structure, etc)</li> </ul>	<ul style="list-style-type: none"> <li>• To be rolled out to Directorates</li> <li>• Review and tender of services</li> <li>• Ongoing</li> <li>• Directorates to be kept informed of status/issues</li> <li>• Required training to be provided to all these people ensure understanding of responsibilities, particularly asbestos, legionella and fire risk</li> <li>• Finalise drafts</li> </ul>	<p>Nov 21</p> <p>Mar 22</p> <p>Ongoing</p>
	Impact		4	3						
	Likelihood		3	2						

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<b>1. Comply with the Law: B. Regulatory</b>										
1.B.2	Failure to anticipate and respond appropriately to legislative change	●	8	8	★	➔	Director of Law, Governance and HR	<ul style="list-style-type: none"> <li>Keeping up to date and engaged with relevant professional bodies and government departments</li> <li>Data observatory established</li> <li>Regular policy briefings prepared for review and to aid insight</li> </ul>	<ul style="list-style-type: none"> <li>If appropriate to provide reports to Council on changes necessary to reflect legislation.</li> <li>Responding to Govt consultations and lobbying in various areas of political change</li> <li>Update relevant documents to reflect legislative changes; provide training on any new legislative arrangements</li> </ul>	Regularly reviewed in legal and policy teams  Done June 2021 Next Sept 2021 Dec 2021 March 2222
	<b>Impact</b>		4	4	★					
	<b>Likelihood</b>		2	2	★					



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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).	●	12	6	△	➔	Executive Director for HRPR	<p>Climate Emergency Strategic Action Plan published 2020, update approved by Mayor and Cabinet in March 2021</p> <p>Borough Resilience Forum has produced a Multi-Agency Flood Plan and held a flooding exercise in April 2021.</p> <p>Air Quality Management Area Plan 22-27 consulted on. Strategic Air Quality Board meets quarterly.</p>	<p>Action Plan to be reviewed annually by Sustainable Development and M&amp;C</p> <p>Internal Audit of Climate Emergency work in progress. To complete in Q3 21/22</p> <p>Lobbying Government and other for resources to deliver on the Climate Emergency Action Plan</p> <p>Consulting on an updated Flood Risk Management Strategy in Q3 21/22. New Strategy to be presented to M&amp;C in Q4 21/22.</p> <p>Final Air Quality Management Strategy approved and published.</p>	<p>Q3 21/22 Q4 21/22</p> <p>Q3 21/22</p> <p>Ongoing</p> <p>Q4 21/22</p> <p>Q4 21/22</p>
	Impact		4	3						
	Likelihood		3	2						

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<b>2. Secure Services to Users: A. Process</b>										
2.A.1	Adequacy of Internal Control Framework	△	16	8	△	➔	Executive Director for Corporate Resources	<ul style="list-style-type: none"> <li>Internal audit, risk &amp; anti-fraud work –</li> <li>Anti-fraud, Anti-money laundering, whistle blowing policies and hot lines in place</li> <li>Annual National Fraud Initiative (NFI) &amp; data matching</li> <li>Coordination/ joint working with central Govt. agencies (DWP, HMRC, BA), LH and other local housing providers.</li> <li>Quarterly reports to Exec Directors, ICB, Audit Panel monitoring trends &amp; progress</li> <li>Implemented various phases of Oracle project - Finance, PBCS, payroll and self-service live.</li> <li>Implemented Liquid Logic (LAS/LCS and Controc) system and processes for</li> </ul>	<ul style="list-style-type: none"> <li>Next phase to get wider business improvements from Oracle to realise benefits of investment – HR PID and related finance dashboards to be built being finalised. Then project to be put into action</li> <li>Internal Audit focus on ensuring recommendations implemented and on core financial audits for 21/22 and 21/22 plan agreed</li> <li>Counter fraud work focused on Covid grant assurance and data matching - ongoing</li> </ul>	<p>Slipped - to Dec 21</p> <p>Reported to Audit Panel Sept 21. Next milestone Dec 21</p> <p>Next milestone Dec 21</p>

**Strategic Risk Register – September 2021**

								CSC and ASC, aligned with service operating models and procedures		
	Impact		4	4						
	Likelihood		4	2						

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Risk Name & Category		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
<b>FAILURE IN CHILD SAFEGUARDING</b>	▲	25	20	★	→	ED CYP (PG) Dir. CSC (LH)	<ul style="list-style-type: none"> <li>All cases risk assessed</li> <li>Thresholds for access to services linked to statutory requirements</li> <li>LCS system redesigned to improve recording and management oversight</li> <li>Virtual visiting introduced during lockdown but service has moved back to face to face visits</li> <li>Operational procedures revised</li> <li>Weekly critical safety panel created to review performance</li> <li>Quality assurance and performance framework in place to monitor practice.</li> </ul>	<ul style="list-style-type: none"> <li>Improvement Programme to drive up quality of practice to be consistently good, including embedding of Signs of Safety practice framework.</li> <li>Various management oversight mechanisms have been introduced to better track and monitor case progress.</li> <li>Continued development of performance data and quality assurance systems to monitor and measure practice.</li> <li>Workforce Development strategy and Practice Standards in place to improve recruitment, retention and training a permanent and skilled workforce.</li> <li>Child Exploitation Strategy completed by the Safeguarding Partnership to manage risk to young people in the community.</li> <li>Sufficiency Strategy being refreshed to develop placement options for best outcomes for children in care</li> <li>strengthen recruitment, retention and training permanent workforce</li> </ul>	<p>On track</p> <p>Through 2020/21</p> <p>Launched March 2021</p> <p>Completed Aug 2021</p> <p>To be launched Apr 2022</p>
<b>IMPACT</b>		5	5	★	→				
<b>LIKELIHOOD</b>		5	4	★	→				

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<b>2. Secure Services to Users: A. Process</b>										
2.A.3	Strategic programme to develop and implement transformation change does not deliver	△	15	10	●	→	Assistant Chief Exec	<ul style="list-style-type: none"> <li>Assistant Chief Executive appointed</li> <li>Directorate PMO support in place.</li> <li>Head of Service capacity focused on delivery of transformation and change, in addition to PMO introduced</li> <li>Strategic programmes and projects agreed along with new governance structure</li> <li>Strategic change board arrangements in place and operational, and making a positive impact</li> </ul>	<ul style="list-style-type: none"> <li>Develop an Organisational Development Strategy.</li> <li>Build focus and capacity to develop and implement change</li> <li>Insight, Transformation and ORgansuational Development team created and being recruited to</li> <li>EMT strategic change board receives reports regularly on progress against milestones and OKRs</li> <li>Continue to develop reporting to strategic change board in line with PMO review 10/21</li> </ul>	<p>Reviewed and agreed at EMT by July 2021</p> <p>New structure implemented by June 2021 - Done November 21</p>
								<ul style="list-style-type: none"> <li>Review of PMO and transformation arrangements carried out and reported to EMT October 2021</li> </ul>	Build on progress to date by introducing portfolio approach	1.1.22
	<b>Impact</b>		<b>5</b>	<b>5</b>						
	<b>Likelihood</b>		<b>3</b>	<b>2</b>						

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2.A.4	Elections not conducted in line with law	★	5	4	★	➔	Returning Officer  Director of Law, Corporate Governance  Head of Elections	<ul style="list-style-type: none"> <li>Preparing for London Mayoral and Assembly elections in May 2021 to be run in a Covid secure manner</li> <li>Acting on Directions from GLRO</li> <li>Preparing for four by elections May 2021 to be run in a Covid secure manner</li> <li>Overall project plan on track and in line with milestones currently</li> <li>Extensive staff training and engagement</li> <li>Census completed, awaiting feedback on completion rates.</li> </ul>	<ul style="list-style-type: none"> <li>Deliver Covid safe elections 2021 - Done</li> <li>Implement Boundary Commission changes once confirmed</li> <li>New Target record for Local Elections – May 22</li> </ul>	Ongoing to May 2022
	<b>Impact</b>		<b>5</b>	<b>4</b>						
	<b>Likelihood</b>		<b>1</b>	<b>1</b>						

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Risk Name & Category		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
<p><b>2.A.5 Failure in Adult Safeguarding</b></p> <p><b>(including Mental Capacity Bill and Domestic Homicide)</b></p>	▲	20	20	★	→	<p>Director of Adult Social Care</p> <p>Director of Communities, Partnerships and Leisure</p>	<p>LSAB provided with regular reports on practice, performance and activity data</p> <p>Monthly case audits in place that identify any practice and performance issues.</p> <p>Monitoring of Performance is overseen by DMT.</p> <p>Review completed and actions implemented in June 2021.</p> <p>Continued adherence to Safeguarding Adults policy and procedures ensuring Care Act compliance.</p> <p>SAR Board meets regularly to approve cases that meet the criteria for a statutory Safeguarding Adult Review. Governance arrangements and a referral process are in place to implement lessons learnt.</p> <p>Proactive monitoring of safeguarding referrals received to mitigate and address any institutional abuse.</p>	<p>Safeguarding processes are being reviewed throughout operational and provider services and partner organisations.</p> <p>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 which meets monthly</p> <p>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 applications are being monitored. Demands on Legal Services continue to increase.</p> <p>New system Liberty Protection safeguards will be implemented in April 2022 now that government legal sign off process has been completed.</p> <p>Task and Finish Group in place to monitor all actions from DHR's</p> <p>These are reviewed at Safeguarding Boards and Safer Lewisham Partnership</p> <p>Agreed actions are signed off by the CSP (Community Safety Partnership) and regularly monitored regarding progress / case audit and practice reviews</p>	<p>LSAB quarterly meetings and SAR monthly meetings</p> <p>DMT performance monitored monthly</p> <p>Monthly quality assurance and call over sessions are in place to monitor practice, trends and quality provision</p> <p>Monthly reviews are in place to monitor practice trends.</p> <p>Quarterly</p>

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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.	Secure Services to Users: B. Technology									



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2.B.1	IT is not fit for purpose and/or does not meet business needs (2)	●	6	4	△	↗	Executive Director for Corporate Resources	<p>Directorate participation in corporate PMO arrangements being introduced</p> <p>Review business continuity plans with emergency planning team</p> <p>Key line of business systems include:                      Academy – revs &amp; bens                      Ash – income collection                      Go Place – asset register                      Oracle – fin, HR, &amp; payroll                      PBCS – oracle budget tool                      LCS/LAS and Controc - social care                      Icasework - customer serv.                      Microsoft office suite – all services</p> <p>Now Working with newly formed PMO in CX Directorate to ensure technology elements of change projects is aligned to objectives.</p>	<p>Specific risk around Registrars running Lotus Notes – being replaced with RAFTS</p> <ul style="list-style-type: none"> <li>Specific risk around planning system which is obsolete and not optimised for running on modern infrastructure - regularly failing availability SLA</li> <li>Shared Service Investment Roadmap requires conformed funding to ensure ongoing adequacy of underlying infrastructure</li> </ul>	<p>Nov 21</p> <p>Unknown</p> <p>Feb 22</p>
	Impact		3	4						
	Likelihood		2	1						

Strategic Risk Register – September 2021

	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
<b>2. Secure Services to Users: B. Technology</b>										
2.B.2	Cyber Security breaches corrupt or locks down Council systems or data.	△	15	5	△	➔	Executive Director for Corporate Resources	<p>Legacy 2003 servers removed from estate</p> <p>Improved controls implemented around administrator level access</p> <p>Cyber strategy and cyber response policy approved by EMT</p> <p>Offline back-ups delivered</p> <p>SICTS infrastructure plan to be funded in budget planning going forward</p> <p>Outstanding security audit actions closed down</p> <p>Shared Service have developed a disaster recovery test plan</p>	<ul style="list-style-type: none"> <li>Move to cloud based authentication through MS365 project</li> <li>Scope and secure funding for an Applications and Data Security project</li> <li>Shared Service Investment Roadmap requires confirmed funding to ensure ongoing security of underlying infrastructure</li> <li>Out of support mobiles need to be removed from estate to ensure continued PSN accreditation</li> </ul>	<p>Jul 22 (slipped Mar 21)</p> <p>Dec 21 (slipped Mar 21)</p> <p>Feb 22</p> <p>Feb 22</p>
	Impact		5	5						
	Likelihood		3	1						

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<b>3. Develop Staff and Partners: A. Workforce</b>										
3.A.1	Loss of constructive employee relations	●	9	6	●	➔	ACE	<ul style="list-style-type: none"> <li>Refreshed people management framework in the light of Covid 19</li> <li>Continued employee assistance programme</li> <li>Extended Union engagement</li> <li>Launched Pulse surveys across a diagonal slice of staff</li> <li>Established and strengthened staff networks across the organisation</li> </ul>	<ul style="list-style-type: none"> <li>Continue to run regular Pulse surveys for staff</li> <li>Review key HR policies to ensure they are fit for purpose and reflective of a modern, agile workforce.</li> <li>Refreshing Directorate Consultative Committees with Trade Unions</li> <li>Works Council to be reinstated</li> <li>Review the timing of the next Staff Survey</li> </ul>	<p>Ongoing</p> <p>By January 2022</p> <p>By October 2021</p> <p>By October 2021</p> <p>Ongoing</p>
	<b>Impact</b>		<b>3</b>	<b>3</b>						
	<b>Likelihood</b>		<b>3</b>	<b>2</b>						

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<b>3. Develop Staff and Partners: A. Workforce</b>										
3.A.2	Failure to maintain sufficient management capacity & capability to deliver business as usual and implement transformation changes	●	12	6	△	➔	Chief Executive	<ul style="list-style-type: none"> <li>All EMT posts filled with permanent appointments</li> <li>All Director level posts appointed to permanently with start dates agreed.</li> </ul>	<ul style="list-style-type: none"> <li>Complete further transformational service changes and recruit as appropriate</li> <li>Additional spend and recruitment controls remain in place</li> </ul>	<p>Ongoing</p> <p>Ongoing Next review June21</p>
	<b>Impact</b>		4	3						
	<b>Likelihood</b>		3	2						

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3.A.3	Pace of change negatively impacts service delivery and employee morale	●	12	12	★	↗	ACE	<ul style="list-style-type: none"> <li>Regular staff and manager communications from CEX on Council direction</li> <li>Together Lewisham staff engagement network empowering employee voice and opportunities for staff to influence and shape future direction and new initiatives</li> <li>Leading together Lewisham – all manager engagement on council priorities and direction of travel and expectations. Providing opportunity for managers to engage and give feedback</li> <li>Staff pulse surveys conducted to gain insight on how staff feel about new initiatives</li> <li>SLT engagement and opportunity to feedback and shape initiatives</li> <li>New appraisal process launched</li> <li>Outplacement support package for staff</li> </ul>	<ul style="list-style-type: none"> <li>Training for managers on managing and leading through change – Future Working</li> <li>Continue to work with TU colleagues to develop/improve working relationships</li> <li>People Management strategy developed as part of OD strategy (post Covid version)</li> <li>Manager induction programme</li> <li>All staff transformation / restructures programmes should be accompanied by a learning and development plan to support transition to new structure and staff development</li> </ul>	<p>Next milestone – Jan 22</p> <p>Next milestone – Sept 21</p> <p>December 21</p> <p>Slipped to Oct 2021</p> <p>Ongoing</p>

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								<ul style="list-style-type: none"> <li>Further 'Future Working' ED Q&amp;A events to continue engagement with managers and staff to disseminate key messages rolled out</li> </ul>		
	Impact		4	4						
	Likelihood		3	3						

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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
<b>3. Develop Staff and Partners: B. Partnerships</b>										
3.B.1	Multi-agency governance leads to ineffective partnership working  - (See also 3.B.2 Health)	●	8	4	△	➔	EMT	<ul style="list-style-type: none"> <li>Regular meetings and liaison in place between Council and key partners/stakeholders Met Police; VCS; LFB; TfL; Lewisham Homes; Registered Providers; OfSTED; schools/FE; etc.</li> <li>Ongoing strategic partnership boards in place and actively supported and engaged with  Future Lewisham Leaders summit convened in October 21 to bring all key partners leaders together to discuss the priorities and challenges for the Borough and partners</li> </ul>	<ul style="list-style-type: none"> <li>Continue regular meetings and liaison in place between Council and key partners/stakeholders Met Police; VCS; LFB; TfL; Lewisham Homes; Registered Providers; OfSTED; schools/FE; etc</li> <li>Continue with ongoing strategic partnership boards</li> <li>Developing place based recovery plans in partnership with anchor institutions/key partners/stakeholders as a result of the summit.</li> </ul>	<p>Ongoing</p> <p>Ongoing</p> <p>Jan 22</p>
	Impact		4	4						
	Likelihood		2	1						

Strategic Risk Register – September 2021

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	<ul style="list-style-type: none"> <li>Partnerships in place across health and social care.</li> <li>Monitoring of initiatives takes place via DMT, S75 Board and HWBB.</li> <li>Integration planning continues with new joint posts agreed and recruited</li> <li>Developed the strategic commissioning function.</li> <li>Care at home leadership group has now been established.</li> <li>.Whole system recovery plan has been developed</li> </ul>	<ul style="list-style-type: none"> <li>Continue to develop the Lewisham Health &amp; Care partnership alliance arrangements whole system change.</li> <li>Care at home leadership group has now been established.</li> <li>Continue to develop strategic commissioning function.</li> <li>Proposals for Commissioning Alliance and provider alliances are being developed.</li> <li>Work with providers to develop an operational model for Care at Home and Adult Mental Health.</li> <li>Whole system recovery plan has been developed.</li> <li>Review of changes to Police/CRC + NPS/Fire</li> </ul>	<p>Monthly by Lewisham Health and Care Partners Board.</p> <p>Completed</p>
	<b>Impact</b>		4	2						
	<b>Likelihood</b>		3	2						



Strategic Risk Register – September 2021

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
<b>4. Develop Staff and Partners: A. Procurement</b>										
4.A.1	Failure to manage strategic suppliers and related procurement programmes. (13)	●	12	6	△	➔	Executive Director for Corporate Resources	<ul style="list-style-type: none"> <li>Published work on community wealth building as part of inclusive growth strategy development</li> <li>Growth in service for additional x2 posts</li> <li>Rolled out quarterly procurement training courses for all appropriate officers</li> <li>Fees and charges report published in 20/21</li> <li>Current years Social Value report was published in Aug 20</li> <li>Contract management toolkit and supporting training</li> <li>Contract management dashboard for performance tracking in place</li> </ul>	<ul style="list-style-type: none"> <li>Work on memorandum trading accounts for priority services re commercial work</li> <li>Ensure Contract Management Dashboard Reporting is tabled quarterly at DMTs</li> <li>Hold the 'Meet the Buyer' event with all Lewisham Deal participants</li> <li>The Annual Compliance checklist for all contracts</li> </ul>	<p>Slipped due to Covid Next Mar 2022</p> <p>Start Nov 21</p> <p>Nov 21</p> <p>June 22</p>
	Impact		4	3						
	Likelihood		3	2						

Strategic Risk Register – September 2021

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
<b>4. Develop Staff and Partners: A. Procurement</b>										
4.A.2	Global commodity price increases/supply chain shortages	●	12	6	●	➔	Executive Director for Corporate Resources	<b>Live Contracts:</b> Monitor prices in current contracts via the contract management framework; Use variation clauses to amend scope;  <b>Procurements:</b> Market engagement and benchmarking;	Use variation clauses to amend scope of existing contracts  Review specifications; Identify supply chain shortages in key projects (Capital, Catering, Energy, Transport, Care Services) and seek acceptable alternatives where possible.	Quarterly contract management reporting  Monthly financial reporting
	Impact		4	3						
	Likelihood		3	2						

Strategic Risk Register – September 2021

Ref	Risk	Current status	Current score	Target score	Current v target	Direction of travel	Responsible	What have we done & source of assurance	What are we planning to do	By when
<b>4. Services Represent VFM: A. Performance</b>										
4.B.1	Failure to manage performance leads to service failure	●	12	4	△	➔	Chief Executive	<ul style="list-style-type: none"> <li>Transferred reporting of risk to Audit Panel</li> <li>Director sessions, as part of Senior Leadership Team (SLT) held regularly to improve alignment, embed collaborative working, help shape new policies and ways of working and monitor key service activity, forecasts etc</li> <li>Good collaborative work, and a One Council approach, evidenced during response to Covid19 and through themed approach to budget 21/22 development</li> <li>Following creation of a single corporate policy and performance team, service data &amp; performance priorities have been revisited and updated performance reports are being reported to EMT regularly</li> </ul>	<ul style="list-style-type: none"> <li>Continue to embed the programme and project management approach across the Council</li> <li>Continue to embed the culture of manager's being responsible for gripping their budgets and for delivery of agreed savings</li> </ul>	November 2022
	<b>Impact</b>		<b>3</b>	<b>2</b>						
	<b>Likelihood</b>		<b>4</b>	<b>2</b>						

Strategic Risk Register – September 2021

Ref	Risk	Current status	Current score	Target score	Current v target	Direct' n of travel	Respons ible	What have we done & source of assurance	What are we planning to do	By when
<b>Services Represent VFM: B Performance</b>										
4.B.2	Delivery of the Building for Lewisham programme fails to make full use of available funding streams and/or exceeds the Councils financial parameters	●	12	8	●	➔	Executive Director HRPR	<ul style="list-style-type: none"> <li>Held 3 x risk workshops with LH and LBL</li> <li>Split programme into tranches to consider risks appropriately; under construction, planning, approved pipeline, unapproved pipeline.</li> <li>Agreed changes to planning schemes to improve viability, including agreement to use of 40% RTB receipts.</li> <li>Have secured high level of GLA grant – due to be approved at M&amp;C in November.</li> </ul>	<ul style="list-style-type: none"> <li>Urgent work to consider options to improve scheme viability, programme viability and provide clarity on deliverable social homes starts and completions on approved and unapproved pipeline schemes.</li> <li>Review Shared Ownership strategy including analysis of risk and exit strategy.</li> <li>Review RTB assumptions following revised Government guidance</li> <li>Review implications of first homes guidance on programme risk.</li> </ul>	<p>Q2 2021/22 and ongoing</p> <p>Q2 2021/22</p> <p>Q2 2021/22</p> <p>Q2 2021/22</p>
	Impact		4	4						
	Likelihood		3	2						

## Strategic Risk Register – September 2021

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
<b>Services Represent VFM: B Performance</b>										
4.B.3 Failure to comply with consumer standards set by the Regulator of Social Housing	Our Housing Management providers (Lewisham Homes, RB3, TMO) found to not meet one of the four consumer standards set by the Regulator of Social Housing	●	9	6	△	➔	Director of Housing Services	LBL has made a self-referral to the Regulator of Social Housing and commissioned an independent review of a damp/mould/disrepair case highlighted by an ITV programme. The Council is closely monitoring the implementation of the Lewisham Homes Lessons Learnt Action Plan as well as implementing the Action Plan from the Independent Review	LBL will be making significant changes to our clienting arrangements for Lewisham Homes Clienting including monitoring progress towards specific KPIs in the LH Disrepair Action Plan and implementation will be tracked monthly at Clienting meetings, Strategic Clienting and at EMT meetings  The new clienting framework to incorporate clienting of the TMO, RB3 and Lewisham Homes so that there is effective oversight of all housing management and the service received by our tenants and leaseholders.	
	Impact		3	3						
	Likelihood		3	2						

Strategic Risk Register – September 2021

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
<b>5. Manage within Budget: A. Financial</b>										
5.A.1	Financial Failure and inability to maintain service delivery within a balanced budget	△	25	4	△	➔	Executive Director for Corporate Resources	<p>Audited financial statement and VFM – unqualified</p> <p>MTFS, regular monitoring of reserves and provisions, and balanced budget</p> <p>Financial planning addresses historic pressures, emerging demand / costs, and cuts needed in future years.</p> <p>Financial planning considers commitments across collection fund, general fund, schools, housing, pension fund, and capital plans</p>	<ul style="list-style-type: none"> <li>Prepare work on 22/23 budget timetable and approach – HRA, DSG, Capital, TMS and delivery of cuts. Thematic cuts work launched in Sept.</li> <li>Review MTFS and treasury plans with updated capital strategy for budget</li> <li>Monitor local government finance changes – covid and spending review – to ensure changes required are made in good time</li> <li>PMO/EMT to monitor cuts are implemented as agreed or alternatives found to keep budget balanced – new ASC Board chaired by CX, as well as Resources Board for other cuts.</li> <li>Unwind Covid funding from BAU service delivery to ensure budget remains balanced through recovery work</li> </ul>	<p>Done Next - Jan 22</p> <p>Done Next - Mar 22</p> <p>Done Next - Jan 22</p> <p>Reported in finance monitor Next - Dec 21</p> <p>Ongoing as part of budget build for 22/23 above</p>
	Impact		5	4						
	Likelihood		5	1						

## Strategic Risk Register – September 2021

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
<b>5. Manage within Budget: A. Financial</b>										
5.A.2	Lack of provision for unforeseen expenditure or loss of income in respect of Council's liabilities or funding streams	●	12	6	△	➔	Executive Director for Corporate Resources	<ul style="list-style-type: none"> <li>Pension Fund triennial actuarial valuation</li> <li>Annual actuarial review of insurance provisions and claims</li> <li>Provision and Reserves strategy regularly reviewed to support monitoring and medium term financial planning positions</li> <li>Monitor and contribute to consultations on future of local government finance</li> <li>Working with LG Futures to support monitoring of the Collection Fund and income assumptions for CTax and NNDR</li> </ul>	<ul style="list-style-type: none"> <li>Prepare for Business Rates devolution – now on hold and London pool stopped</li> <li>Implement investments strategy following the Pension Fund valuation – LCIV and Storebrand</li> <li>Assess impact of LGFS following the Chancellor's Autumn Budget, CSR &amp; FFR with Autumn Chancellor's budget.</li> <li>Review bad debt provisions and write offs required post Covid to ensure return to effective income collection part of recovery planning – part of accounts (will follow accounts work)</li> </ul>	<p>As per Gov't timetable that has been delayed</p> <p>Done Next - Dec 21 for PEPPA</p> <p>Ongoing Oct/Nov 21</p> <p>Accounts delayed to Nov Next Mar 22</p>
	Impact		4	3						
	Likelihood		3	2						

Strategic Risk Register – September 2021

Ref	Risk	Current status	Current score	Target score	Current v target	Direction of travel	Responsible	What have we done & source of assurance	What are we planning to do	By when
<b>5. Manage within Budget: A. Financial</b>										
5.A.3	Loss of Income to the Council – Failure to collect debt	●	12	9	★	➔	Executive Director for Corporate Resources	<ul style="list-style-type: none"> <li>ASC charging now all on latest policy. All financial assessments re-done.</li> <li>Ash review for sundry debt concluded to move with a manual solution to:                             <ul style="list-style-type: none"> <li>○ Avoid more IT risk &amp; time</li> <li>○ Have immediate impact</li> <li>○ Realise Oracle &amp; Controcc benefits</li> </ul> </li> <li>Additional resource into debt collection team for support improved collection rates</li> <li>For 20/21 and into 21/22 due to impact of Covid-19 focused on monitoring of income collection positions for all types of debt.</li> <li>LL and Controc systems aligned to Oracle for ASC and CSC</li> </ul>	<ul style="list-style-type: none"> <li>As part of wider consultancy review of ASC, look to improve finance assessment and self-funding recovery</li> <li>Review Collection Fund debt collection processes to improve performance as part of recovery work as part of unwinding Covid support and return to BAU</li> </ul>	<p>Sept 21</p> <p>Next Sept 21</p>
	Impact		3	3						
	Likelihood		4	1						





Strategic Risk Register – September 2021

Ref	Risk	Current status	Current score	Target score	Current v target	Direction of travel	Responsible	What have we done & source of assurance	What are we planning to do	By when
<b>COVID- 19 Overall Risk</b>										
5.B.2	Failure to effectively contain the ongoing impacts of Covid-19 and deliver services	●	10	9	★	↗	Chief Executive	<ul style="list-style-type: none"> <li>• Strategy and objectives.</li> <li>• Covid risk register identifies key areas of concern and responsibilities</li> <li>• Multi-agency partnership working following a command and control structure.</li> <li>• Sub groups established to deal effectively with key areas of response</li> <li>• Service priorities determined to support the critical functions of the council</li> <li>• Support critical functions from non-critical services through Covid Action Team.</li> <li>• Community Champions programme established to ensure communications are effectively reaching all areas of the community</li> <li>• Communications strategy</li> <li>• Targeted testing for identified critical key workers to limit the impacts.</li> <li>• Provide support to the Vaccination Programme</li> <li>• Weekly EMT Covid meetings led by Public Health, including London reporting</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to respond to changes in guidance and legislation</li> <li>• Continue to provide support to staff and residents through services and communications</li> <li>• Move Covid emergency response management to 'business as usual' under Public Health from July 2021</li> <li>• Review need to sustain as separate risk or return to BAU</li> </ul>	<p>Ongoing – with engagement of Members and Senior Leadership Team</p> <p>Done</p> <p>Quarterly</p>
	Impact		5	3						
	Likelihood		2	3						