Annual Governance Statement 2024/25

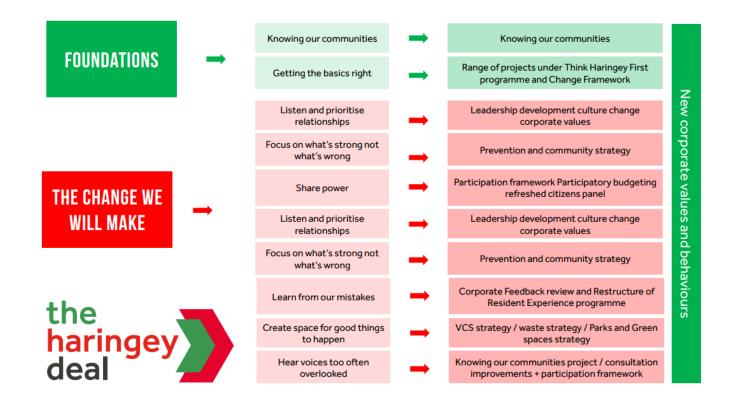
1. Scope of responsibility

- 1.1 We are responsible for ensuring that our business is conducted in accordance with the law and proper standards, that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. We also have a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which our functions are exercised, with regard to a combination of economy, efficiency and effectiveness.
- 1.2 In discharging this, we are also responsible for putting in place proper arrangements for the governance of our affairs, facilitating the effective exercise of our functions, which includes arrangements for the management of risk.
- 1.3 We have approved and adopted a Local Code of Corporate Governance, which is consistent with the principles of the CIPFA/SOLACE Framework 'Delivering Good Governance in Local Government'. Haringey's local code of corporate governance is published on the Council's website and a copy can be obtained from the Council's Monitoring Officer. This statement explains our commitments as part of the Local Code of Corporate Governance, together with how we obtain assurance that these commitments are in place and effective; it also meets the requirements of regulation 6(1) of the Accounts and Audit Regulations 2015, in relation to the publication of an Annual Governance Statement.

2. The purpose of the governance framework

- 2.1 The governance framework comprises the systems and processes, and culture and values, by which we direct and control the activities of the Council. The framework also comprises the activities through which we are accountable to, engages with and leads the community. Through the framework, we monitor the achievement of our strategic objectives and consider whether those objectives have led to the delivery of appropriate and cost-effective services.
- 2.2 The system of internal control is a significant part of the governance framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives, but it can provide a reasonable assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise risks to the achievement of our approved policies, aims and objectives. The system of controls also allows for the evaluation of the likelihood of risks being realised and the impact should they be realised, ensuring that we are able to manage them efficiently, effectively and economically.
- 2.3 The governance framework has been in place for the year ended 31st March 2025 and up to the date of the approval of the annual report and accounts.

- 2.4 As a local authority, we operate in a complex and constantly evolving financial, policy and legislative environment and consequently, our responsibilities and operations continue to evolve. The funding models for local government continue to present challenges. We continue to deliver our ambitions set out in our corporate plan and build on our achievements in the refreshed plan, which we published in the summer. The Council's Corporate Plan sets out our priority actions for delivering our strategy for Haringey.
- 2.5 The Council's leadership remains committed to being collaborative, competent, and radical. In January 2023, we published our Corporate Delivery Plan for the period 2022/26. This Corporate Delivery Plan covers the activity we will focus on delivering including the second half of the cycle between April 2024 and April 2026. The Plan outlines our strategic objectives, priorities, and initiatives aimed at creating a fairer, greener borough. The Plan also includes the outcomes we are working towards as an organisation; the activity planned to deliver these outcomes; how we will work to deliver it; and the key delivery dates. The plan is organised around the following eight separate themes:
 - · Resident experience and enabling success
 - Responding to the climate emergency
 - Children and young people
 - · Adults, health and welfare
 - · Homes for the future
 - Safer Haringey
 - Culturally rich borough
 - Place and economy
- 2.6 These themes demonstrate how we are focussed on working collaboratively, in line with the Haringey Deal, with residents, businesses and partners to tackle the biggest issues affecting our communities.
- 2.7 Haringey Deal was launched in November 2022. The Deal is all about forging a different way of working. It builds on the findings of the Fairness Commission and is grounded what we have heard from residents more recently. This includes pledges to focus on building greater trust between the council and residents; learning when mistakes are made and putting things right quickly; empowering communities to make change happen for themselves; and finding new ways to share power with residents and communities. The Deal also recognises the critical importance of 'getting the basics right.' This means delivering the fundamental core services that any local authority provides to ensure residents are safe and supported, and able to live a good life. The Deal has eight core elements, each of which is being embedded and delivered via a series of programmes and pieces of work. Details of the Deal are set out in the chart below.



- 2.8 A core element of the Haringey Deal has been the launch and roll out of a new set of corporate values. These were developed following a series of staff workshops hosted by the Chief Executive in the autumn of 2022 and were in place for the financial year 2024/25. Our core values are Caring, Collaborative, Community Focused, Courageous and Creative. These were launched via a series of informal staff 'huddles' across the corporate estate including depots and neighbourhood offices. These behaviours are at the heart of refreshed My Conversation (our appraisal approach) guidance which was launched at the start of the 2023.
- 2.9 Following the launch of The Haringey Deal, we have created a portal called The Haringey Deal implementation guidance for staff, which outlines our ambition to change the way we work and change our practices. It makes a commitment to both designing services and developing different relationships with residents and partners with a key focus in the Haringey Deal on working in partnership with communities to address residents' priorities. The implementation guidance intranet hub aims to clarify the ambitions of the Haringey Deal and provide practical examples of exemplary practice, to support us in continuing to develop our approach.

- 2.10 In May 2023, we participated in a Corporate Peer Challenge, organised by the Local Government Association (LGA). The Peer review challenge involved a team of experienced council officers and councillors from other local authorities reviewing our vision, our priorities and plans and the work we are doing as "peers" to provide challenge and share learning. The final report was issued in October 2023 and a copy is available at LGA Corporate Peer Challenge Final Report (haringey.gov.uk). The report noted "Haringey Council is a dynamic and improvement-focused local authority that has strong leadership and should be proud of the services it provides to the community. It provides many good core services to its residents for which it should be rightly proud. The Borough is well-regarded for its high performing schools, and the parks and library services are valued, with the Friends groups keen to collaborate with the Council. It also has a "powerful sense of place, appreciating and celebrating the diversity of the area and the people it serves." The Peers set out several recommendations, a follow up revisit took place on 25 June 2024 with the LGA spending a day meeting staff, networks, partners, senior managers and testing the progress we have made. Specifically, the LGA looked at what steps we had taken since their first visit, and specifically focusing on:
 - Developing a long-term vision and building better partnerships
 - Embedding performance management and delivering change
 - Organisational development and culture change
- 2.11 The peer team were impressed at the level of progress made by Haringey since the Corporate Peer Challenge and noted the detailed and structured approach taken by the Council for making improvements and changes to implement the peer team's recommendations.
- 2.12 Separately, a joint area inspection by Ofsted and the Care Quality Commission (CQC) was carried out of the Area SEND inspection of Haringey Local Area Partnership over a three-week period in January and February 2024. Both the Council and the North Central London Integrated Care Board (ICB) are jointly responsible for the planning and commissioning of services for children and young people with SEND in Haringey. We received the highest rating for delivering high quality services for young people with Special Educational Needs and Disabilities with the report noting "The local area partnership's special educational needs and/or disabilities (SEND) arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The local area partnership is taking action where improvements are needed." The report raised three areas for improvement we continue to make good progress in implementing the recommendations.
- 2.13 In addition, Ofsted carried out a focused visit of Haringey children's service and published their report on 14 March 2025. Inspectors considered a broad range of evidence, including from children's individual records and discussions with social workers and reviewed relevant local authority performance and quality assurance information, and spoke to senior leaders, including the head of the virtual school. The report noted that "Most children in care are making good progress, with a strong focus on their education and social needs, and on maintaining their relationships with birth families where appropriate. Their health needs are a priority, and children living outside the borough have additional support. Children are supported to develop trusting relationships with their social workers. Workers invest time with children and use their skills to engage them and understand their wishes and feelings, and what matters most to them. Workers know children well, and they advocate effectively on their behalf."

- 2.14 In February 2025, the Care Quality Commission (CQC) published its inspection report assessing how we, as a local authority meet our duties set out in the Care Act (2014). The CQC looked at nine areas spread across four themes and rated the Council as requiring improvement. The CQC's chief inspector of adult social care and integrated care, noted "we found the London Borough of Haringey demonstrated a commitment to transformation and improvements, with clear efforts to support people's independence and wellbeing. Although it's too early to assess the full impact on people's experiences and outcomes we did see some results already. Haringey's reablement services were particularly effective, helping people regain independence and reducing the need for long-term care. We were pleased to see the introduction of a more local approach, making it easier for people to access care and support closer to where they live. The authority worked well as part of a multi-agency team, made up of health professionals, social workers, and specialists, to help people stay healthy and live independently. We saw this play a key role in reducing hospital admissions.
- 2.15 However, there are areas Haringey needs to improve. People were waiting too long to have their care needs assessed and were frustrated with the communication around this. This was reflected in the mixed feedback we received about people's experiences. Once people were being supported, they were generally happy with their assessments, but people with additional communication needs and non-English speakers faced barriers when seeking information or trying to access that support. Haringey is aware of this access issue and it's reassuring to see them taking steps to address it. The authority also needs to address the limited local care provision which reduced people's ability to make choices about their care. This also extended to carers who told us they struggled to get access to the support they needed, making it difficult to get a break from their responsibilities and negatively impacting their wellbeing."
- 2.16 We have a statutory obligation to set a balanced budget and for 2025/26, Cabinet received a paper in February 2025 setting out the proposed General Fund Budget for 2025/26; the Medium-Term Financial Strategy (MTFS) 2025/30, and the capital programme. To set a balanced budget for 2025/26, we sought special permission from Government to allow the Council to use capital receipts and borrowing (referred to as Exceptional Financial Support) of £37m for its day to day running costs and supporting the borough's most vulnerable residents. While the Exceptional Financial Support is required in order for us to set a balanced budget, we appreciate that this is not a sustainable position. We will continue to work, across the council, to reduce costs and to make every penny count and minimise use of EFS as much as possible by exploring ways to improve efficiency and maximise value for money.
- 2.17 In addition, Cabinet received a budget report in March 2025 for the third quarter (April to December 2024) setting out the actual expenditure for the period with projected outturn for the remainder of the financial year. The report projected a year-end outturn of £37.2m forecast overspend, and as the Council has a legal requirement to deliver a balanced position each year, the report noted the authority may not have sufficient resources to cover the full forecast £37.2m overspend and reach a balanced financial position. Consequently, Cabinet was notified the authority may require use of Exceptional Financial Support from government, and that government had agreed in principle that up to £28m could be drawn down for the financial year 2024/25.
- 2.18 KPMG are our external auditors and as such, they are required to provide an assessment of the council's arrangements to secure value for money (VfM). In its assessment, KPMG focused on three key domains: -

- Financial sustainability: How we manage our resources to ensure we can continue to deliver our services
- Governance: How we ensure we make informed decisions and properly manages our risks
- Improving economy, efficiency and effectiveness: How we use information about our costs and performance to improve the way we manage and deliver our services
- 2.19 From their work, KPMG identified five areas of improvement in respect of arrangements to secure VfM and noted these in their Auditor's Annual Report published in February 2025, for the 2023/24 financial year. KPMG's opinion is that the Council does not have appropriate arrangements in place to secure economy, efficiency, and effectiveness in the use of resources. We have agreed the recommendations and set ambitious targets to implement their recommendations.
- 2.20 At the end of March 2025, the Chief Executive concluded his consultation on the changes to the senior leadership of the organisation. The change was in part, a response to the government signalling new ways of doing things, new priorities and the challenging financial position. Following the change, the Placemaking & Housing directorate was disbanded and its services moved to other parts of the council and the senior leadership roles were renamed in order to keep the Council competitive in the recruitment and retention market.
- 2.21 A new directorate of Adults, Housing & Health was established, with a focus on supporting the borough's vulnerable adults and the existing Finance directorate expanded to become the Finance & Resources directorate, adding Digital & Change, Capital Projects & Property and Housing Delivery functions to its portfolio.
- 2.22 The following section highlights each of the seven governance principles set out in the CIPFA / SOLACE framework "Delivering Good Governance in Local Government" and the arrangements in place demonstrating how we meet the governance principles. Any gaps identified as part of the annual review will form an action plan agreed and monitored by the Statutory Officers with all actions to be completed by March 2026.

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D	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
-	A. Behaving with integrity, demonstrating strong commitment to ethical values, a	and respecting the rule of law
<u>B</u>	ehaving with Integrity	
a)	The standards to which Members and Officers are expected to comply are outline here along with links to key policies which are developed in accordance with legislative requirements and good practice. Our standards Haringey Council	
b)	The Council's Member Code of Conduct is captured in the Council's constitution under Part 5 – Codes and Protocols, Part 5 Section A (Nov 2019), which requires members to declare interests; applies to Members and co-opted voting members on election or appointment. Published on the internet: Part 5 Section A Members Code of Conduct.pdf	Complaints process reviewed 24/25. Review of Code planned for 2025/26 once government response to consultation knows on standards regime.
c)	The offer of induction is provided for all new Members when they are elected on expected standards of behaviour. A comprehensive programme has been established since the election in May 2022 to on board new and re-elected members into the Council. The training programme is designed to ensure members are equipped to carry out their role on as committee members. Training on all regulatory committees is mandatory.	
d)	The Officer Code of Conduct was reviewed in 2023, and a new version was published to staff following approval by Members. A copy of the Code is provided to all new officers on appointment and annual reminders are made of the need for employees to comply with specific requirements such as ensuring declarations of interest are formally recorded and declaring any offers of gifts or hospitality which are received.	
e)	Haringey Values were updated in 2023 (Caring, Community-Focused, Collaborative, Creative, and Courageous). The Council ran numerous seminars for staff on what the values meant and how services should demonstrate Haringey values.	

		Identified gaps in compliance, or further action required
f)	Decision-making practices for member decisions follow legal and transparency requirements. Agendas and Minutes of Cabinet and Committees and Officer decisions are recorded and published on Modern.gov. How Decisions are made and scrutinised	
g)	Register of interests and gifts and hospitality for members/co-opted checked on election/appointment. Minutes show declarations of interest sought, and appropriate declarations made for each meeting.	
h)	Requirement for all new staff to complete Register of Interests declaration. Senior managers are required to complete a declaration every two years; officers are reminded to complete a new form as/when circumstances change. The HALO system is used to efficiently manage HR processes under a single portal. Gifts and hospitality for members are recorded with their declarations of interests and are published on the website. Our standards Haringey Council	Ensure full compliance by officers with the requirements set out.
i)	Standard report format requires report authors to state how their proposal meets the corporate objectives and priorities. Report authors must also provide reasoning and evidence for proposals, so that the basis for decisions is clear and include statutory officer's advice, including legal and finance advice. The standard template for reports was refreshed in 2023/24 with updated guidance included for report authors.	
j)	Anti-fraud and corruption strategy is in place, including the Whistle blowing policy (Oct 2024) they will be reviewed again in 2026. The Head of Audit and Risk Management reports on actions, effectiveness and outcomes (and use of the whistle blowing policy) to Audit Committee, in quarterly report and in July as part of the Annual internal Audit Report and provides awareness presentations to Senior Leadership Team. Copies of the policies are on the internet. Anti-fraud and Corruption Policy Oct 2024	
k)	Corporate and service specific complaints policies are in place and published on the website. Level of complaints upheld at Stage 1 and 2 is monitored and reported regularly to the Council's Senior Leadership Team. More information is being	

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	published and made easily accessible to customers. Training sessions have been developed looking at examples of best practice in responses and getting it right first time. Following comments from the Peer Review a forum has been periodically held to help with improvements in this area. Make a complaint Haringey Council	
I)	Local Code of Corporate Governance was refreshed in 2023/24 and was approved at the Full Council in July 2024. <u>Local Code of Corporate Governance</u>	
De	emonstrating strong commitment to ethical values	
m)	The Standards Committee, along with the Council's Monitoring Officer, establishes monitors and maintains the organisation's ethical standards and performance, reporting to full Council, as necessary. The committee deals with allegations of breaches of the Member Code and issue (or require Groups to issue) reminders/advice notes to Members where issues of conduct cause concern. The Standards Committee	
n)	The Council incorporated the Social Value Act requirements into all procurement and contracts; including a standard clause referring to 'PREVENT' in all contracts, as well as safeguarding and health and safety. A broader review of how the authority carries out procurement activity has been completed, and changes will be embedded in 2025/26. A report will go to Cabinet to approve the Council's methodology of complying with Social Value Act requirements.	
0)	A major review of all the Human Resources policies & procedures is continuous. The policies for revision undergo extensive discussion with relevant groups within the council and with trade unions before the final version is presented to Members for their approval, only when approved are policies published, and details communicated to officers. During 2024/25, HR published the Workforce Plan.	

D	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
p)	The Council encourages external providers of services to act with integrity and in compliance with high ethical standards expected by the organisation in information sharing:	•
R	especting the rule of law	
q)	The Chief Executive is appointed by Full Council. Any disciplinary action or dismissal of the statutory officers is dealt with in line with legal requirements that take into account the need for them to fulfil their responsibilities in accordance with legislative and regulatory requirements. Member Committees make decisions on appointments and dismissal of Chief Officers and Deputy Chief Officers. A Statutory Officers Group meets monthly and ensures statutory compliance and is both forward and backward looking and support the organisation and Statutory Officers in fulfilling their roles.	
r)	The Council optimises the powers available for the benefit of citizens, communities and other stakeholders. Decisions are taken, in accordance with relevant statutory requirements and the Council Constitution, by full Council, Cabinet, individual Cabinet members and officers under delegated powers. The Council Constitution is reviewed updated and published on the internet: Council Constitution	
s)	Breaches of law/financial regulations can be the subject of a report to full Council or Cabinet by the relevant statutory officer. No statutory officer reports have been required in 2024/25.	
t)	Statutory officers are available at meetings of the Council/Cabinet to advise and ensure law and regulations are not breached.	Review and update the Council's financial regulations during 2025/26.

Documentation demonstrating compliance with	n the governance principles	Identified gaps in compliance, or further action required
Openness/ Implementing good practice in trans	sparency	
a) The Council Publication Scheme sets out information including under the requirements of the Transpour publication scheme Haringey Council		
Member decisions are rarely taken in the private Member delegated decisions are also taken at public. The constitution allows for deputations a for cabinet key decisions is in place. The local a in the Council Constitution: Council Constitution	meetings advertised and open to the and petitions and a call-in procedure	
b) The Council carries out consultation on a regul- consultation co-ordinator and a consultation ch website. <u>Consultations Haringey Council</u> Under the Haringey Deal, the authority seeks to communities including communities that it engage	arter and toolkit on its internal b better understand all its	
c) To ensure we are able to effectively monitor de set out in our Corporate Delivery Plan, reporting a six-monthly basis (for the lifetime of the plan) dedicated performance sessions at our Corpora via internal meetings and forums with officers a	g takes place formally on and quarterly via ate Leadership Team and	
d) Formal reporting includes progress updates repoverview and Scrutiny Committee for more in-Briefings for Scrutiny Panel Members are arranged meetings and training is provided to encourage performance issues and risks. Browse meetings - Overview and Scrutiny Committee is a service of the	depth consideration. Iged ahead of formal Eunderstanding of	

Documentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
e) In 2022/23 we established a framework for monitoring progress against commitments and intermediate outcomes as set out in our Corporate Delivery Plan (CDP). The framework brings together activity and monitors progress towards the achievement of intermediate outcomes with metrics and commentary on all commitments in the CDP including Manifesto pledges. The framework is not solely based on Performance Indicators so gives a broader picture of change and progress towards achieving our objectives. Updates include metrics and a rating on Direction of Travel. The Corporate Delivery Plan 2024-2026	
f) We use "Monday.com" as a tool for tracking progress where live updates on progress is captured and reported on a quarterly basis with dynamic links and Dashboards so progress can be actively monitored. As part of the early warning and risk analysis Directors also produce a summary of highlights and areas for focus each quarter and these are shared as part of the published papers. More recently we have introduced more robust performance management reviewing our approach to monitoring whereby we have established a single performance framework.	
g) Documentation demonstrating compliance with the governance principles Identific gaps in compliance, or further action required covers key performance indicators, capital delivery, savings programme delivery and transformation programme delivers as part of the Council's new Change framework. Members are briefed on performance across all these workstreams so that they get a holistic view of progress, and we ensure consistency of reporting and aligned governance arrangements as part of the Cabinet Accountability Model. Our Leader is the Cab Member responsible for the CDP and performance so there is clear leadership and accountability.	very
h) In addition to the arrangements that have been put in place to monitor the deliver the Corporate Delivery Plan, new arrangements have been introduced by central	

D	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	Government in the form of an Office for Local Government (OfLOG). The stated purpose of OfLOG is "to provide authoritative and accessible data and analysis about the performance of local government and support its improvement." The data can be viewed at Home - Local Authority Data Explorer - GOV.UK . A report updating on the OfLOG metrics, and any associated risks or early warning flags is discussed at Corporate Leadership Team on a periodic basis to reflect on what the comparator data is telling us.	
	ngaging comprehensively with institutional stakeholders	
)	Formal and informal partnerships allow for resources to be used more efficiently, and outcomes achieved more effectively; key partnerships include the Haringey Safeguarding Children Partnership, Safeguarding Adults Board (SAB), Multi-Agency Risk Assessment Conference (MARAC) and the Community Safety Partnership (CSP). Agendas and minutes for the CSP are published on the website: http://www.minutes.haringey.gov.uk/ieListMeetings.aspx?Cld=444&Year=0	
)	Resident engagement also occurs in formal consultation and engagement processes during 2024/25 this has included extensive community engagement via Wood Green Voices: Wood Green Voices Haringey Council, and Tottenham Voices Tottenham Voices Haringey Council and in relation to key strategies including the Parks and Green Spaces Strategy and Community Safety Strategy.	
()	Last year the council launched the Haringey Engagement Hub which is developing into a 'one stop shop' for all engagement and consultation opportunities. <u>Have Your Say Today - Haringey Engagement Hub - Commonplace</u>	

D. Determining the actions necessary to optimise the achievement of the intended outcomes

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	efining actions/outcomes and sustainable economic, social and environmental enefits	
a)	The Corporate Delivery Plan sets out how the Council will work with partners and with communities to improve the borough and make Haringey a more successful place, while delivering a significant savings programme by 2026. The plan has eight themes, each under-pinned by a series of ambitious targets. It considers and balances the economic, social and environmental impact of policies, plans and decisions. The Plan includes a challenging set of performance measures. Documentation demonstrating compliance with the governance principles Identified gaps in compliance, or further action required.	
b)	Programme planning and management require focus on outcomes and benefits identification and tracking as part of project implementation. There is a clear and consistent approach to the reporting of outcomes, benefits, risks and issues. The Plan was published on the website and recently refreshed to reflect the manifesto priorities of the administration: Ambitious new vision for Haringey Haringey Council	
c)	The Council publishes updates on its website to show how the Council and partners are achieving against specified outcomes and activity including metrics where applicable every six months. https://www.minutes.haringey.gov.uk/ieListDocuments.aspx?Cld=128&MID=10689#AI77431 Agenda for Overview and Scrutiny Committee on Thursday, 27th March, 2025, 7.00 pm Haringey Council	
d)	The intermediate outcomes specify the intended impact on service users, residents and other stakeholders. Effective performance monitoring of the Council's progress towards achieving the outcomes in the Corporate Delivery Plan is fundamental to understanding impact and as such provides a means to	

D	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	measure progress on what we are delivering against what we said we would do i.e. The change we expect to see over the 18-month period of the strategic plan.	
e)	The Council has an agreed Medium-Term Financial Strategy (MTFS). These set out how the Council will deliver the corporate plan taking into account the full cost of operations and within available resources, balancing service priorities, and ensure its workforce has the right skills to enable it to achieve the agreed outcomes. Regular reports are provided to the Cabinet: 2025.26Budget and 2025.30MTFFS ver1.0.pdf	The Council's financial position has deteriorated over the last 12months. Increased demand pressures in social care and temporary accommodation means that setting a balanced budget for 2024/25 and 2025/26 is only possible with exceptional
f)	Robust planning and control cycles cover strategic and operational plans, priorities and targets. An internal process provides regular monitoring and scrutiny of the Corporate Delivery Plan and resources applied. Performance against objectives and outcomes is published on the website as part of papers for Cabinet and also accessible in viewable. Documentation demonstrating compliance with the governance principles Identified gaps in compliance, or further action required dashboards from our web-based project and programme management tool: Corporate Delivery Plan (monday.com)	financial support (ESF). A response and recovery plan has been developed taking account of insight from external audit, internal audit and a financial resilience exercise. The actions are aimed to reduce the current and any future reliance on EFS, improve the Council's financial sustainability, including rebuilding reserves and reducing debt levels by reducing the Capital Programme.
g)	A five-year capital programme was approved by Full Council on 11 February 2025, which sets out the Council's longer-term investment requirements linked to policy objectives, updates are provided to Cabinet annually at the February meeting: 2025.26Budget and 2025.30MTFFS ver1.0.pdf	
D	etermining actions and optimising achievement of intended outcomes	
h)	The Council includes requirements to enhance social value in contracts. For example, construction projects over £1m in value must include an apprenticeship scheme, and where possible, employers are encouraged to pay the London Living Wage.	

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
i)	High value procurements include a significant weighting in the 'social value' section and, where applicable, requirements as to the use of community assets.	
Ε.	Developing the entity's capacity, including the capability of its leadership and th	e individuals within it
De	eveloping the entity's capacity	
a)	and to ensure the Council has the right people in the right places with the appropriate skills to deliver the Council's priorities. The plan is published on the website: haringey-workforce-strategy.pdf . During 2023/24 the Council reviewed this strategy, and on 18 June 2024, Cabinet approved the refreshed strategy and accompanying action plan. There is a clear focus on Directorate-led workforce planning, supported by the Council's corporate services, in the new strategy.	
o)	Workforce expectations also form a clear part of contracting and commissioning processes, as our workforce is not limited to employed staff, including complying with minimum and London Living Wage requirements.	
<u>De</u>	eveloping the capability of the entity's leadership and other individuals	
	The Council Constitution specifies the types of decisions that is delegated and those reserved for the collective decision making of the full Council or Cabinet. Council Constitution	
c)	The Council's Constitution sets out the leader and chief executive roles to ensure the respective responsibilities are defined in accordance with decision-making accountabilities. These comply with relevant statutory requirements. It also includes	Following the change in the structure of the senior leadership, ensure all Council policies and strategies (such as scheme of

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required	
	the general scheme of delegation. Each service area also has a service area scheme of authorisation for officers, currently published on the intranet.	delegation) that facilitate its operations are up to date and reflect the new structure.	
d)	Members who sit on Committees are provided with training specific to their responsibilities for these committees. Training sessions have commenced for member for planning, licensing, audit, finance, pensions and treasury.		
e)	The Council provides a programme of training for all members, and members have access to the Council's corporate training and development programme, which is published on the internal website.		
f)	The Council rolled out 'My Conversation', a performance management process, to all staff, which focuses on personal and organisational development and performance; the General Purposes Committee receives regular reports on people management issues in line with the Workforce Plan objectives. Guidance and templates for all staff are published on the internal website. A review was undertaken to refresh the current performance management process in line with best practice and the Council's new organisational values, which rolled out in 2023.	Directors to ensure completion of the My Conversation process by all officers and managers as a matter of course.	
g)	The Council's Workforce Development Strategy aims to create a better place to work. The update Strategy was launched in 2024. The Council's corporate Health, Safety and Wellbeing Board monitors all key aspects of statutory and local requirements and has an action plan in place to address any identified gaps in compliance. Health and Wellbeing Fairs have been run to promote employee health. and there is a dedicated suite of pages on the Council's intranet site focussed on all aspects of employee wellbeing.		
h)	The Council ran a comprehensive staff survey in late 2023, with the results being disseminated in 2024 and an action plan will be developed.	The External Audit Annual Report January	
i)	A wide-ranging management and leadership development programme has been rolled out in 2024, to increase the capability and capacity of all people managers	2025 encouraged the Council to consider the Workforce Strategy due to high reliance on Agency Workers and that the 'time to hire' metric should be monitored.	

Documentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
within the organisation, along with a complete refresh of mandatory training, which is required to be completed by all employees.	
The Council has protocols in place which govern how the operational and working relationships between officers and members are managed and forms part of the Constitution: Council Constitution	Look to refresh the protocol during 2025/26
The Council reviews operations, performance and use of assets on a regular basis to ensure their continuing effectiveness; the Delivery Plan highlights key performance objectives, targets and outcomes, which are monitored and reported via the Council website. The performance reporting also compares current performance with statistical neighbours, London and England averages in most cases: Data and finance Haringey Council	
. Managing risks and performance through robust internal control and strong pub	——————————————————————————————————————
	2CTIVE ACCOUNTAINING
ق. implementing good practices in transparency, reporting, and audit to deliver eff	Solive addoditionally
G. Implementing good practices in transparency, reporting, and audit to deliver eff Managing risk	

achievement of objectives was procured in 2023/24. https://www.minutes.haringey.gov.uk/ieListDocuments.aspx?Cld=730&Mld=9449&Ver=4

been developed to capture directorate and corporate risk registers alongside the other risk and performance information held by the Council. Investment into Corporate Risk Management activity and a technological solution to support

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
b)	The Council's key risks are managed via corporate risk and directorate risk registers. Responsibility for individual risks and issues identified is clearly set out in risk registers. Internal audit reviews of key risks are undertaken as part of the annual audit programme. Performance objectives and outcomes are reported on the website: Data and finance Haringey Council. The corporate risk register was reported to the Audit Committee most recently in March 2025 Corporate cttee - audit.	
c)	Haringey's business continuity planning is based on risk assessment and business impact analysis. Each service area produces a business continuity plan which is updated twice a year. Service continuity plans are incorporated into the Councilwide Business Continuity Plan. The resilience of the Council's digital infrastructure is central to these plans. A Corporate Resilience and Emergency Planning Board meets quarterly to ensure risks and issues are collectively understood and response is collaborative; the Board reflects on incidents to ensure learning from experience. Proactive exercises are undertaken to test arrangements for the Council or as part of a wider exercise in the Borough/London. More information on business continuity and emergency planning is available at: Major emergencies Haringey Council	The Business Continuity arrangements will be refreshed and during 2025/26, the plans reported to the Council's Audit Committee for scrutiny.
Ma	anaging performance	
d)	The Council monitors service delivery effectively including planning, specification, execution and independent post implementation review which is set out in the Delivery Plan and outcome priorities: The Corporate Delivery Plan Haringey Council	
e)	Overview and Scrutiny takes a detailed look at the Council's decisions and policies and works to promote open decision making and democratic accountability in Haringey by holding the Cabinet to account; developing and reviewing policy in an inclusive cross-party manner that involves local communities and other interested parties, reviewing the performance of the Council and scrutinising local services not	

D	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	provided by the Council, such as health services. Overview and Scrutiny Committee also reviews performance on a quarterly basis and individual Scrutiny Panels consider performance with reference to their reviews. The reports and recommendations are discussed and responded to by the Cabinet and published on the Council's website: Browse meetings - Overview and Scrutiny Committee Haringey Council	
<u>S</u>	trong public financial management and robust internal control	
f)	The Medium-Term Financial Strategy (MTFS) outlines the overall financial strategy for achieving the Council's priorities. The MTFS identified savings required to deliver a balanced budget position each year between 2024 and 2029 before being approved by Full Council in February 2025; the reminder has yet to be identified and will form part of the financial planning process during 2025/26. Each Departmental Management Team (DMT) considers finance and budgets at every meeting, looking at both the budget and savings positions and tracking progress on both. Transformation and delivery of outcomes are aligned to achieving savings and remaining within budget limits; the performance outcomes are reported on the website.	Re-assess the Council's financial management arrangements against CIPFA's Financial Management Code (FM Code), which provides guidance for good and sustainable financial management in local authorities.
g)	The Council's financial management is based on a framework of regular management information and review to inform managers and members of the current budget position. Managers submit monthly budget forecasts, and the Cabinet receives quarterly budget management information.	
h)	The Council operates a 'zero tolerance' approach to fraud, bribery and corruption. The anti-fraud, bribery and corruption policy and strategy was reviewed in 2024 and includes appendices specifically relating to money laundering and terrorist financing and a whistleblowing which form part of the overall governance framework to tackle fraud. The policies are published on the Council website and regular articles on how to report fraud and successful outcomes are published. A fraud risk assessment is undertaken annually to help determine the prioritise and the work plan	

Do	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
	for the year. In 2024/25, the Council investigated Housing fraud and 42 properties were recovered and 49 potentially fraudulent Right to Buy applications were prevented. The Council prosecuted three blue badge fraud cases. Referrals made using the whistle blowing policy and all internal cases were reviewed and investigated, in line with our policy and fraud outcomes are reported to the Audit Committee, copies of the reports are on the website. Referrals made using the whistle blowing policy were all reviewed, investigated, and reported to the Corporate Committee, copies of the reports are on the website: Browse meetings - Audit Committee Haringey Council	
i)	The Council's Head of Internal Audit produces an Annual Report including a Head of Internal Audit Opinion which is presented to Statutory Officers and Corporate Leadership Team, and formally presented to Audit Committee in July every year. The Annual Report is a key document used as part of our annual review of governance.	
j)	KPMG were appointed as the Council's external auditors from 2023/24. During 2024/25 the outgoing external auditor completed the outstanding audits, which were presented to Audit Committee in December 2024. KPMG completed their work for the 2023/24 financial year and presented to Audit Committee on 27 January 2025.	
k)	Regular internal and external audit reviews check compliance with financial and contract procedure rules across the Council and the outcomes of these are reported to the Audit Committee on a quarterly basis. Most high priority recommendations, excluding those covering schools' audits, made by internal audit were found to be implemented when follow up audits were undertaken. The Audit Committee fulfilled its terms of reference in relation to audit functions. Following the recent CIPFA application note on Audit Committee, the Corporate Committee's terms of reference have changed, and an Audit Committee created. This Committee's terms of reference are in line with the CIPFA guidance and conforms with CIPFA's application note. Details of the Committee can be found at Browse meetings - Audit Committee Haringey Council	

Docume	entation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
by the stand Public repor	Council's internal control arrangements are subject to annual self-assessment e Head of Audit and Risk Management; any gaps in compliance with mandatory lards are included in the statutory annual Head of Audit report. In line with the c Sector Internal Audit Standards, a peer review was commissioned and ted the Internal Audit Service was fully compliant with the standards Final or the external assessment of the internal audit function (haringey.gov.uk)	
<u>Managir</u>	ng data	
secur and g on the	Council has policies dealing with various aspects of data management including rity and data protection; Freedom of Information Act; information asset registers; general records management. These and supporting guidance are all published e intranet. Data quality policy is published on the website: gey Council Electronic records management policy	
<u>Impleme</u>	enting good practices in reporting	
we re that w fair vi appro states neces any c 2024. of the https:	roduce an annual report to accompany its statement of accounts; for 2023/24, eceived a (disclaimer) qualified opinion from the external auditor. This means while the auditors believe the financial statements generally present a true and few, there were certain matters where they were unable to obtain sufficient and opriate audit evidence. Specifically, the auditor's annual report for 2023/24 is that the auditors were unable to determine whether any adjustments were assary to the opening balances as at the 1st of April 2023 or whether there were consequential effects on the Council's accounts for the year ended 31st March. The auditors also raised a number of recommendations following their review a Council's arrangements for delivering value for money.	

	ocumentation demonstrating compliance with the governance principles	Identified gaps in compliance, or further action required
0)	The Council's Annual Governance Statement (AGS) is produced in accordance with required guidance and included in the statement of accounts; the AGS is reviewed by the Statutory Officers Group and the Audit Committee to ensure that any gaps in assurance or compliance issues are identified and addressed. In 2024/25 there was a formal follow up presented to Audit Committee to communicate the progress with the action plans. Significant issues reported in 2023/24 are being addressed but most will remain on in 2024/25.	
p)	As part of the Delivery Plan, Corporate Directors are responsible for delivering the activity against specific milestones with a responsible manager and Lead Member allocated as owners for each outcome as specified in the Corporate Delivery Plan (CDP). Outcomes, activity, and performance on delivery against the 188 lines of activity and milestones as set out in the CDP. The last performance update report to Cabinet was on 18th March 2025 and papers can be found here: Corporate Delivery Plan Performance Update-Quarter 3 Cabinet 03 24 report.pdf	
<u>A</u>	ssurance and effective accountability	
q)	Internal and external audit provide assurance on the Council's system of internal control to support the section 151 officer requirements, including reporting compliance with financial and contract procedure rules across the Council. The outcomes of internal audits were reported to the Corporate Committee and from 2024/25, the Audit Committee on a quarterly basis. All outstanding recommendations were reported to Corporate Committee; a focus is maintained on ensuring all high priority recommendations are implemented. All outstanding recommendation continue to be monitored.	
r)	The Head of Audit and Risk Management and the internal audit service fully complied with the requirements of the mandatory UK Public Sector Internal Audit Standards, as evidenced by peer review and self-assessment. Access to officers, members and information is provided by the Constitution.	

4. Significant governance issues

4.1 Following our review of governance in 2023/24, we identified some key areas where work would be undertaken in 2024/25 to ensure governance arrangements were in place and effective. An action plan was drawn up and progress as at 31 January was reported to the Audit Committee in March 2025, this is set out below.

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
We need to ensure we deliver savings identified in our Medium-Term Financial Strategy (MTFS) to manage within our financial means and embed change in following transformation of our services, including schools.	The Council's financial position is challenging, and necessary action must take place to protect its long-term financial sustainability and reduce reliance on Exceptional Financial Support. During 2024, a strengthened medium term and annual budget setting process was established which has set some good foundations but must be further improved during 2025. This has included:
Corporate Director of Finance and Resources (s151) March 2025	 Establishing a set of budget and financial planning principles. An open and transparent relationship across the organisation, including with CLT and Members for organisational ownership of the financial position. Review of financial pressures. This has initially focussed on 2025/26 but also across the 5 years of the MTFS. This is now based on the current financial position across services, particularly social care and housing demand (temporary accommodation), increasing the use of data and evidence to forecast pressures, scenario planning and a more realistic view of risks with the estimates. Review of all current and proposed savings to test their validity and assurance on delivery. Review of other assumptions, including inflation and pay to provide a more realistic financial position across the next five years. Regular review of all assumptions through the annual budget setting process as new information comes to light, up to the point of publication. Review of the Capital Programme which will be undertaken annually as part of the budget process and its governance. This includes establishment of a Strategic Capital Board to oversee the development, monitoring and reporting of the whole programme and improve the decision making of all schemes as well as prioritisation

Issue &	Progress update (as at January 2025)
Agreed Action/ Deadline (as at July 2024)	r rogross apatato (as at outlant) 2020)
	 with the expectation of a reduced capital programme over the medium term, reducing the rate at which debt is increasing. A refreshed Budget Week in June 2024 and further planned for 2025 with a focus on increasing awareness and accountability of Leadership Network and time within the week for identifying budget proposals and delivery plans. Review of 'committed' reserves, of which those which are uncommitted are exceptionally low given the level of risk faced by the authority. This has focussed on £22m of balances within the Services Reserve and Grants Reserve to identify any transfer into the Budget Planning Reserve. This review is underway, and the outcome will be reported in the 2024/25 Outturn report and any balances expected to be required for addressing the current forecast overspend of £37m in 2024/25. This review includes the implementation of the budget principle of replenishing reserves over the medium term and an annual contribution has been assumed from 2026/27 onwards. External support commissioned to support in a full review of all services to identify further opportunities to reduce costs and spending and increase income.
	An 'emergency response' will be put in place and overseen by the Chief Executive and Director of Finance and which will establish an organisation response to the immediate financial position for 2025/26. This will be based on an improvement and recovery plan. Progress will be monitored weekly and reported to Cabinet and Scrutiny as part of the quarterly finance report and will form a key part of the Annual Governance Statement reported to Audit Committee. All of the actions put in place in 2024 will continue and be further improved and strengthened
	 but more will be required in light of delivering the recovery plan. For 2025, this includes: A move towards medium term financial planning and work to balance the 2026/27 budget will commence before the end of the current financial year. A review of the structure and format of budget week which will take place earlier in the year and allow more time to focus on delivery of change. More structures communications plan with the whole organisation on the position and changes required

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
	A redesigned Corporate Project Management Office now supports delivery of the Category AA/A projects, to which many savings or required income streams are linked. During 2023/24 the financial position with regards the Local Authority Schools in the Borough has become an increased area of financial risk to the Council. There will therefore be focus on this for 2024/25 from a Governance perspective. The financial partnership between the Council and the Health Sector is another area identified in 2023/24 for strengthened collaboration to drive out outcomes. In January 2025 KPMG presented their Draft Annual Report to the Audit Committee. https://www.minutes.haringey.gov.uk/documents/s149589/ISA260%20Draft%20AC.pdf This report contained three recommendations that have been accepted by management with regards this governance issue. The recommendations relate to: Creating a Financial Resilience Plan. Strengthening the robustness of the budget fortnight. Changing the culture around savings.
	These actions will be tracked as part of the 2024/25 governance processes and completion reported as part of the AGS. The report also contains ten financial control deficiencies and progress to address these will be reported to committee as part of routine financial updates with regards the 2024/25 Annual Statements of Accounts and the External Audit of those documents.
We need to continue to embed the planned improvements across strategic and operational Asset Management which include fully embedding robust management of our operational and Commercial Properties because audit work continues to conclude that systems and controls are inadequate.	The council's adopted Strategic Asset Management and Property Improvement Plan (SAMPIP) 2023-28 contains 10 Action plans, based on the SAMPIP objectives. There are ten Strategic Asset Management Performance Improvement Plans are monitored through Monday.com as part of day-to-day operational performance. Action plan progress and activity is monitored regularly at Capital Projects and Property (CPP) Heads of Service meetings and Senior Management Team meetings.

Issue &	Progress update (as at January 2025)
Agreed Action/ Deadline (as at July 2024)	1 Togress apaate (as at ballaary 2025)
	Progress is then taken through our property governance process on a monthly basis.
Corporate Director of Placemaking and Housing March 2025	The transformational nature of this work means the Corporate Property Model, which is fundamental to the implementation of the action plans; is part of the councils change programme, reported monthly and to Corporate Leadership Team on a quarterly basis.
	Internal Audit resources are allocated to monitor and report independently on progress.
	An annual update of the progress against the SAMPIP action plans is taken to cabinet.
	As part of the above annual reporting, the SAMPIP is also reviewed at Directorate and corporate audit committees throughout the year.
	January 2025 Update
	Cabinet was updated on the progress with the SAMPIP in July 2024. Link to the report attached (Public Pack)Agenda Document for Cabinet, 16/07/2024 18:30
	The full business case for the Corporate Property Model was agreed in October and approved through the council's property governance process. This is a key step in bringing hard and soft FM service back together and ensuring all operational, strategic and commercial property sits in one area.
	Progress reports on the SAMPIP are taken through the councils property governance process on a monthly basis, which is chaired at the top level by the councils 151 statutory officer to ensure corporate compliance and oversight.
	Given the improvements implemented so far, we have significantly improved the financial performance of the commercial portfolio.
	The Property Review process within the SAMPIP has been completed for all directorates with feedback given. This will now inform the next steps with regards to the operational portfolio.

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
	Follow Up work regarding the Chris Buss property review has been completed in January 2025 and all actions confirmed as implemented. Further follow up work re outstanding audit actions, in this area, will be completed in March 2025. In January 2025 KPMG presented their Draft Annual Report to the Audit Committee. https://www.minutes.haringey.gov.uk/documents/s149589/ISA260%20Draft%20AC.pdf This report contained two recommendations that have been accepted by management with regards this governance issue, specifically relating to Council Leases. The recommendations relate to: Reviewing all Leases. Implementing technology to enable effective monitoring. These actions will be tracked as part of the 2024/25 governance processes and completion reported as part of the AGS.
Following our self-referral to regulator we continue with our Housing Improvement Programme to deliver improvements in the delivery of our housing service and implement recommendations to address weaknesses in our management systems, including Health and Safety risks in Council owned residential properties that deliver improvements to housing for tenants and meets the requirements of the Social Housing Regulator including safe housing. Corporate Director of Placemaking & Housing March 2025	This issue was identified in 2022/23 and the due date set was March 2025, the progress made regarding the statutory compliance failings is noted above, and as expected the wider Housing Improvement Programme continues into 2024/25 and beyond. The project is classified as Category 'A', so monitoring and reporting goes to Corporate Leadership Team via the Corporate Project Office in addition to the local oversight within Placemaking and Housing. Annual Update to Cabinet June 2024. Audit Committee periodically request updates and assurances from the Operational Director for Housing, relating to risk and control due to historic limited assurance audit reports. Internal Audit resources have been allocated in 2024/25 to provide independent assurance to Senior Leaders and Members as part of the 2024/25 Audit Plan. Update January 2025

Issue & Progress update (as at January 2025)		
Agreed Action/ Deadline (as at July 2024)	Progress upuate (as at January 2023)	
Agreed Action/ Deadinie (as at July 2024)	The Council's Housing Annual Compliance Statement was presented to Cabinet on 17 September 2024 which included a summary of the results of the Council's auditors Mazars' audit of the service's reporting against the 'big six' compliance indicators - gas, electric, fire safety, asbestos, legionella and lifts – carried out in May 2024, together with an update on implementation of the new compliance data system which will result in a complete move away from spreadsheet management of these compliance areas, by the end of 2024. The purpose of the report was to provide Cabinet and council tenants and leaseholders with the assurance and confidence that the Housing Service's arrangements for monitoring the 'big six' compliance areas are robust and are subject to ongoing review and improvement.	
	The data shows consistently good performance against the 'big six' health and safety indicators for each of the last three months and we anticipate that we will continue to maintain and build on this position assisted by the full implementation of the new compliance data system across all compliance areas.	
	The service has agreed a target of 700 homes to be made decent by 31 March 2025 with the Regulator. If this target is achieved, it will increase the percentage of homes meeting the standard to 80.0%. 103 homes have been made decent as at the end of Q2. There are a further 620 homes in the pipeline to be made decent through internal works, fire door and other programmes for this year which will enable us to meet the target.	
	We continue to closely monitor and scrutinise performance through our internal governance arrangements, and through six weekly performance reporting to the Member-led Housing Improvement Board.	
Due to the high levels of FOI, SARs that are not completed in time and feedback from Ombudsman we need to continue to	We have an internal self-assessment that is maintained and has evolved since the independent work by Mazars in 2021/22.	
strengthen our information governance arrangements.	We have an improvement action plan that is tracked, and progress reported to the Information Governance Board.	
Monitoring Officer	As part of last year's improvements, we strengthened the arrangements over the Information Governance Board and this new regime will fully embed in 2024.	

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
March 2025	The Information Commissioner have inspected in May 2024, and this will generate new actions to be incorporated into existing actions plans. This Corporate Risk area is owned at Corporate Leadership Team and progress to complete the approved improvement plans is monitored there.
	Update January 2025:
	The assurance ratings from the June 2024 ICO Audit Report were: • Governance & Accountability: Reasonable Assurance • Training & Awareness: Reasonable Assurance • Breach Management & Reporting: Limited Assurance
	The summary report is published on the ICO website.
	The ICO approved our Action Plan to address their recommendations, and they will follow up on completion and implementation in 2025 (date to be agreed).
	20% of actions have been completed and 19% are in progress.
	Progress is reported to the Information Governance Board and the Corporate Leadership Team quarterly.
The range of skills and experience required to fulfil our duties has become increasingly challenging over time, particularly within some professions. The Council needs to have a high-performing workforce that delivers great services by attracting, developing, and retaining talent that delivers quality public services whilst making the best possible use of public money.	New Workforce Development Strategy 2024 has been to cabinet for discussion Informal cabinet in early June and Cabinet approval, likely on 18 June. Launch will be raised in budget week and will be launched by the Human Resources Business Partners shortly after. New approach to Manager training being designed - in progress pilot to launch July 24. Review of the use of Agency Workers use is ongoing and there is an accelerated recruitment protocol in place.

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
Corporate Director of Culture Strategy & Engagement	Restructures and Focused Recruitment Campaigns - high volumes across directorates and recruitment campaigns arranged as required.
March 2025	Update January 2025
	New workforce strategy and action plan approved by Cabinet and launched. Work begun on first Directorate and service-specific workforce development plans, targeting areas with particular recruitment and skills challenges.
	Pilot programme launched and in progress. Initial feedback very positive.
	Focus on agency spend continues and spend is reducing. Reports showing progress are made to the General Purposes Committee. This contract will be retendered in 24/25.
	Action ongoing.
	Internal Audit resources have been allocated in 2024/25 to provide independent assurance to Senior Leaders and Members as part of the 2024/25 Audit Plan.
The Council has recognised weaknesses with regards procurement and contract management arrangements in recent years,	The Council has reviewed its procurement operating model and is embedding a new staffing structure, policies, and procedures along with a new technology platform in 2024.
some incidences of Fraud have occurred in 2023/24 and there has been new regulatory requirements applied from 2025.	This is a significant change programme that continues into the new financial year 2024/25 with wide reaching impact on the governance framework centrally and across directorates.
Corporate Director of Finance and Resources	The project is classified as Category 'A', so monitoring and reporting goes to Corporate Leadership Team via the Corporate Project Office.
March 2025	Audit Committee periodically request updates and assurances from the Chief Procurement Officer, relating to risk and control due to historic limited assurance audit reports. Internal Audit resources have been allocated in 2024/25 to provide independent assurance to Senior Leaders and Members as part of the 2024/25 Audit Plan.

Issue & Agreed Action/ Deadline (as at July 2024)	Progress update (as at January 2025)
	Update January 2025:
	The Council continues to progress implementing the new procurement operating model.
	The revised staffing structure to support the operating model will be in place in November. The revised CSO's are approaching final draft and are anticipated to be in place in March 2025.
	The Procurement Act has been delayed until 24 February 2024 and therefore some new procedures will need to be deferred and aligned with the implementation of the Procurement Act.
	The centralisation of procurements above £25k will be implemented March/April 2025 and is anticipated to mitigate potential non-compliance and fraud.
	Work has begun on implementing new category strategies to deliver better value for money.
	Revised procedures, training and communication is ongoing.
	Delays in the implementation of the e-procurement solution will have an impact on the implementation of some controls until such time as the technology is fully in place.
	In January 2025 KPMG presented their Draft Annual Report to the Audit Committee. https://www.minutes.haringey.gov.uk/documents/s149589/ISA260%20Draft%20AC.pdf This report contained two recommendations that have been accepted by management with regards this governance issue. The recommendations relate to: A 'stock take' of all contracts.
	 Implementing technology to enable more effective monitoring. These actions will be tracked as part of the 2024/25 governance processes and completion reported as part of the AGS.

4.2 We have identified the following significant governance issues during 2024/25 and reiterated those identified in prior years that remain open for monitoring. It is proposed over the coming year to take steps to address the governance issues in these areas and these are set out in the action plan below. The action plan will be monitored during the year to ensure all issues are appropriately addressed.

Issue	Action	Responsibility	Due date
We need to ensure we deliver savings identified in our Medium-Term Financial Strategy (MTFS) to manage within our financial means and embed change in following transformation of our services, including schools. (This may need to be strengthen depending upon the financial outturn / future financial projections).	The Council's financial position continues to be extremely challenging. The outturn position for 2024/25 was a £38m overspend on services, predominantly social care and temporary accommodation. Although this has been partly offset by one off use of reserves and historic balances, £20.4m of savings were expected to be delivered in year, only 63% was delivered. Of the non-delivered savings, £440k has been written out in future years as non-deliverable, the remaining is expected to be delivered in full in 2025/26. In total, £30m of savings are expected to be delivered in 2025/26 and although contingency has increased to protect against the non delivery of some, it will not be sufficient if non delivery percentage remains at a similar level. A strengthened process has been established for the monitoring and reporting of savings which will track bot the financial savings and progress with the changes to deliver the savings. Monitoring is in place monthly to enable corrective action to be taken early in the year for any non delivery and is reported to Silver and Gold through the Council's emergency response arrangements. During budget series in April, the focus was on the delivery of existing savings, with all of Leadership Network working together on the development and implementation of delivery plans, with a particular focus on cross cutting savings. During 2024, a strengthened medium term and annual budget setting process was established which has set some good foundations and planning is well underway for 2026/27 budget planning. This includes:	Corporate Director of Finance and Resources	31/3/2026

Issue	Action	Responsibility	Due date
	 Review of financial pressures. This has initially focussed on 2026/27 but also across the 5 years of the MTFS using the 2024/25 outturn and period 2 forecast for 2025/26 as the basis and strengthening the use of scenario planning to consider risks and uncertainties to give a more realistic view of risks with the estimates. A review of other assumptions, including inflation and pay to provide a more realistic financial position across the next five years. Regular review of all assumptions will continue through until December 2025 as new information comes to light, up to the point of publication. Review of the Capital Programme with the expectation of a reduced capital programme over the medium term, reducing the rate at which debt is increasing. New capital programme governance arrangements are now in place which includes a new gateway process for ensuring that no capital scheme progresses without a clear business case that has been approved. A refreshed Budget Series took place in April, May and June 2025, with a focus on ensuring existing savings are on track for delivery and identifying new savings and income opportunities to balance the budget for 2026/27. These are being considered in a structured way through four lenses (efficiency, commercialism, prevention and prioritisation) to ensure that every £ spent is delivering on the outcomes in the CDP and prioritisation is in line with smaller funding envelope and keeping any ongoing reliance on EFS to a minimum. Review of 'committed' reserves, of which those which are uncommitted are exceptionally low given the level of risk faced by the authority. This has focussed on £22m of balances within the Services Reserve and Grants Reserve 		

Issue	Action	Responsibility	Due date
	to identify any transfer into the Budget Planning Reserve. The first phase identified £2.9m to contribute to reducing the overspend position in 2024/25 and a furthermore forensic review will be undertaken in quarter 1 of 2025/26. The MTFS assumes replenishing reserves over the medium term and an annual contribution of £3m has been assumed from 2026/27 onwards.		
	An 'emergency response' has been put in place across the organisation in line with GOLD and Silver arrangements and overseeing the delivery of the Financial Recovery Plan developed by the Section 151 Officer. Progress is reported to internally and quarterly though the finance report to Cabinet and OSC. All non-essential spend must now be approved by the Spend Control Panel and the Recruitment Panel must approve all new recruitment. It is likely that tighter controls will be put in place from quarter 2 of 2025/26. The controls are also expected to improve purchasing compliance in line with the Council's policies and processes. A redesigned Corporate Project Management Office supports delivery of the Category A projects and a recent review of the criteria has led to a new set of projects being supported and which are linked to the delivery of savings.		
	During 2023/24 the financial position with regards the Local Authority Schools in the Borough has become an increased area of financial risk to the Council. Full details are published in the 2024/25 outturn report and the number of schools with a deficit has increased to 33. The Council continues to work with schools in deficit on the recovery plans, including staffing restructures.		
	The financial partnership between the Council and the Health Sector is an area of focus in light of the changes to ICBs being implemented by Government. The exact impact is not yet known		

Issue	Action	Responsibility	Due date
	but does pose a financial risk in terms of joint funding arrangements through the BCF. THE 2024/25 VFM risk assessment by KPMG is published elsewhere on the agenda and the Council will respond to any recommendations when the full report is presented to Audit Committee later in the year.		
We need to continue to embed the planned improvements across strategic and operational Asset Management which include fully embedding robust management of our operational and Commercial Properties because audit work continues to conclude that systems and controls are inadequate.	The council's adopted Strategic Asset Management and Property Improvement Plan (SAMPIP) 2023-28 contains 10 Action plans, based on the SAMPIP objectives. Action plan progress and activity is monitored regularly at Capital Projects and Property (CPP) Heads of Service meetings and Senior Management Team meetings. Progress is then taken through our property governance process on a monthly basis. The Corporate Landlord Model was implemented from 1 April 2025, including the transfer of budgets and staffing resources. However, it is likely to require the remainder of the year for this to be fully implemented. This is a key step in bringing hard and soft facilities management service back together and ensuring all operational, strategic and commercial property sits in one area. Cabinet in June agreed the Council's Disposals Policy and an internal Disposals Board, chaired by the Corporate Director of Finance and Resources is in place to oversee the implementation of the policy. Internal Audit resources are allocated to monitor and report independently on progress.	Corporate Director of Finance and Resources	31/3/2026

Issue	Action	Responsibility	Due date
	An annual update of the progress against the SAMPIP action plans is taken to cabinet. The last update was in May 2025.		
	As part of the above annual reporting, the SAMPIP is also reviewed at Directorate and corporate audit committees throughout the year.		
	Good progress has been made on reviewing the Council's commercial property portfolio gaining a more holistic view of the properties and lease arrangements which has significantly improved performance, including increased income levels.		
	In January 2025 KPMG presented their Draft Annual Report to the Audit Committee.		
	https://www.minutes.haringey.gov.uk/documents/s149589/ISA260 %20Draft%20AC.pdf This report contained two recommendations that have been accepted by management with regards this governance issue,		
	specifically relating to Council Leases. The recommendations relate to: Reviewing all Leases.		
	 Implementing technology to enable effective monitoring. These actions will be tracked as part of the 2024/25 governance processes and completion reported as part of the AGS. 		
	The 2024/25 VFM risk assessment by KPMG is published elsewhere on the agenda and the Council will respond to any recommendations when the full report is presented to Audit Committee later in the year.		
Following our self-referral to regulator we continue with our Housing Improvement	The issue was identified in 2022/23, with the Housing Improvement Programme (HIP) continuing from this time. The Housing Improvement Programme was classified as a Category 'AA' project,	Corporate Director of Adults, Housing and Health	31/3/2026

Issue	Action	Responsibility	Due date
Programme to deliver improvements in the delivery of our housing service and implement recommendations to address weaknesses in our management systems, including Health and Safety risks in Council owned residential properties that deliver improvements to housing for tenants and meets the requirements of the Social Housing Regulator including safe housing.	so monitoring and reporting went to Corporate Leadership Team via the Corporate Project Office in addition to local oversight within Housing Services. Of the 213 actions included within this programme, 81% are complete with progress ongoing. A mock inspection of the housing service was carried out by HQN in September/October 2024 against the new Consumer Standards set by the Regulator of Social Housing, which included the Safety and Quality Standard. An action plan was developed in response to identified areas of improvement which is reported to the Member Housing Improvement Board six weekly, with the action plan having been overseen by this Board since March 2025. We continue to closely monitor and scrutinise performance and progress through our internal governance arrangements, and through six weekly performance reporting to the Member-led Housing Improvement Board.		
	The Building Safety Strategy for 2024-28 was approved by Cabinet in July 2024. This strategy details how the Council ensures that buildings within the scope of the Building Safety Act 2022 were effectively managed and safe. The Building Safety Strategy was part of the Housing Improvement Plan, tackling repairs, fireproofing, insulation, security and other renovations and went beyond what is required by the government. The Building Safety Strategy was created with residents and residents' involvement in future decisions remains a core objective. The Council's Housing Annual Compliance Statement was presented to Cabinet on 17 September 2024 which included a summary of the results of the Council's auditors Mazars' audit of the service's reporting against the 'big six' compliance indicators - gas, electric, fire safety, asbestos, legionella and lifts – carried out in May 2024, together with an update on implementation of the new		

Issue	Action	Responsibility	Due date
	compliance data system which will result in a complete move away from spreadsheet management of these compliance areas, by the end of 2024. The purpose of the report was to provide Cabinet and council tenants and leaseholders with the assurance and confidence that the Housing Service's arrangements for monitoring the 'big six' compliance areas are robust and are subject to ongoing review and improvement.		
	As of June 2025 all of the 'big six' modules are now set up on the new compliance system, with full inspection programme information uploaded. All FRA actions have been integrated into the system, removing the use of spreadsheet to manage actions, and we will also look to implement additional modules for other compliance areas.		
	The data shows consistently good performance against the 'big six' health and safety indicators for each of the last three months and we anticipate that we will continue to maintain and build on this position assisted by the embedding of the new compliance data system across all compliance areas.		
	The service has exceeded the target of 700 homes to be made decent by 31 March 2025 with the Regulator, where 791 homes have been made decent for 2024/25. This has meant the percentage of homes meeting the decent homes standard has increased to 80.7% from 78.4% in 2023/24. To achieve this target, mitigating actions included planned internal, Fire Door Replacement and Electrical Works, and a programme of validation surveys. We completed our 3 year stock condition survey in May 2024 with 75% of the stock surveyed.		
	The procurement of four new Partnering Contracts to deliver £560m work over 10.5 years has been completed, with the Contract Award report being approved by Cabinet on 17 June		

Issue	Action	Responsibility	Due date
	2025. This is a key factor to support the achievement of 100% decency by 2028 in line the asset management strategy agreed by Cabinet in 2023. Our performance across Housing Services and specific service areas and improvements are also overseen by the Housing, Planning and Development Scrutiny Panel. Audit Committee periodically request updates and assurances from the Director of Housing Services, relating to risk and control due to historic limited assurance audit reports. Internal Audit resources have been allocated in 2025/26 to provide independent assurance to Senior Leaders and Members as part of the 2025/26 Audit Plan.		
Due to the high levels of FOI, SARs that are not completed in time and feedback from Ombudsman we need to continue to strengthen our information governance arrangements.	Following the ICO Audit in June 2024, the Information Governance team have been working on delivery of the detailed Action Plan to address the ICO's recommendations. Most actions have been completed, a small number are still in progress. The ICO will be doing a desktop review of progress in July 2025, but will not do a full re-audit. Development work will continue after the Action Plan is completed, as we also use the ICO's accountability tracker which goes beyond the focus of the 2024 audit. Specifically in relation to information rights requests (which were not covered in the Audit), a new system was introduced in April 2025. When this has been fully implemented, it should give us greater visibility of cases, more granular reporting and improved case management. Alongside the new system, we are reviewing the way that cases are assigned and the support and guidance we provide to colleagues.	Corporate Director Culture Strategy Communications	31/3/2026

Issue	Action	Responsibility	Due date
The range of skills and experience required to fulfil our duties has become increasingly challenging over time, particularly within some professions. The Council needs to have a high-performing workforce that delivers great services by attracting, developing, and retaining talent that delivers quality public services whilst making the best possible use of public money.	We have a workforce strategy which principally was created to deal with this risk. The main action in the current municipal year is for Directors and Corporate Directors to complete workforce action plans for their areas which outline their workforce needs across the spectrum in terms of, for example, recruitment, retention and learning and development. These needs need to be framed in the context of future service delivery and the finances available. A corporate template has been developed and tested, and resources made available to support all Directors and Corporate Directors with this important task. On a more day to day level, we have core HR policies available to support managers and leaders in managing their existing workforce and recruiting new employees, including flexibility on recruitment of current agency workers into directly employed posts and arrangements to pay market supplements where it can be objectively justified.	Corporate Director Culture Strategy Communications	31/3/2026
The Council has recognised weaknesses with regards procurement and contract management arrangements.	The Council has reviewed its procurement operating model and the new staffing structure is in place to facilitate all contract re-tenders above £25k to be managed by the Strategic Procurement Team. This new operating model and new processes will continue to be embedded during 2025 and is anticipated to mitigate potential noncompliance and fraud.	Corporate Director of Finance and Resources	31/3/2026
	The revised CSO's are now in place and were agreed by full Council. Savings of £9m are expected on contracts over the next three years and a new Procurement and Commissioning Programme is now in place which has four workstreams: Review of large value contracts Review of all contracts due for re-tender		

Issue	Action	Responsibility	Due date
	Review of off contract spend		
	Establishing category management for contracts		
	The programme will cover the full commissioning, procurement and contract management cycle, recognising that improvements are required in all areas. Delivery is being managed through a separate governance board, with progress being reported through to Procurement Board.		
	Procurement Board are also responsible for overseeing all new retenders and improving procurement and contract compliance.		
	The Council is compliant with the requirements of the new Procurement Act but some processes are currently manual and an e-procurement system is not yet in place – options are being considered.		
	Regular updates are provided to Audit Committee relating to risk and control due to historic limited assurance audit reports and this will continue during 2025/26.		
	Work has begun on implementing new category strategies to deliver better value for money.		
	Revised procedures, training and communication is ongoing.		
	Delays in the implementation of the e-procurement solution will have an impact on the implementation of some controls until such time as the technology is fully in place.		
	The 2024/25 VFM risk assessment by KPMG is published elsewhere on the agenda and the Council will respond to any		

Issue	Action	Responsibility	Due date
	recommendations when the full report is presented to Audit Committee later in the year.		

5. Review of effectiveness

- 5.1 We take responsibility for conducting an annual review of the effectiveness of our governance framework, including the system of internal control. The review of effectiveness is informed by the statements of assurance and annual governance self-assessments by each corporate director and director, who have responsibility for the development and maintenance of the governance environment; the Head of Audit and Risk Management's annual report, and by comments made by the Council's external auditors and other review agencies and inspectorates.
- 5.2 The Corporate Director of Finance and Resources holds the Council's statutory section 151 Officer role; the Head of Legal and Governance (the Council's Monitoring Officer) and the Head of Audit and Risk Management have also reviewed the work done by the Council relating to governance issues in 2024/25. Their comments on the key governance issues are as follows:
 - Corporate Director of Finance and Resources:

Demand pressures across social care, temporary accommodation, home to school transport and housing benefit, as well as the non-delivery of the agreed savings programme continues to be one of the Council's main critical issues and driving the very challenging financial position. Funding from Government is not sufficient to manage the increasing demand and the recent Spending Review, although will provide for a multi year settlement and some certainty over the next three years will be insufficient.

In the past any gap in delivery of savings or other unplanned overspend has been met with an unplanned drawdown from Council reserves and in 2024/25, £14.4m has been utilised. However, as reported in the last couple of budget reports to Full Council emphasised are already extremely low and any use of reserves to balance the budget or use to address overspends in future years is no longer an option. The 2024/25 Budget included £36.4m of new growth for Adults, Children's, and Housing demand. However, this was not sufficient, leading to a £38m overspend on service budgets. The final use of reserves and review of historic balances has provided £37m of one off contributions to mitigate this overspend but the Council has been reliant on EFS from Government of £10m for 2024/25 and expecting to require up to £37m for 2025/26. This is not a sustainable solution because of the borrowing costs associated with EFS which only adds to the scale of the budget shortfall each year.

A forensic review of the remaining £19.7m in the services reserve and unspent grants reserve is underway to determine if any further sums can be released, but it is expected this will identify that most are largely committed.

The 2025/26 budget assumes £30.4m of savings but a reliance on Exceptional Financial Support of up to £37m to set a legally balanced budget, after accounting for known budget pressures.

An emergency response to the financial position is in place with Gold and Silver emergency arrangements in place to oversee the delivery of the Financial Response and Recovery Plan prepared by the Section 151 Officer. This includes a spending control panel to agree all non-essential spend over £1,000, recruitment panel to agree all new recruitment. Given the severity of the financial position and to minimise use of EFS going forward, tighter controls are expected to be put in place from quarter 2 of 2025/26.

The updates MTFS is presented to Cabinet on 15 July and shows that forecast gap across the MTFS period from 2026/27 is at least £121m, of which £34m is for 2026/27. The report includes details of the approach being taken to identify savings and income opportunities to reduce the gap, with a particular focus on 2026/27 and planning is well underway through Budget Series sessions with the Leadership Team during April, May and June 2025. The General Fund Reserve has been retained and protected at £15.4m. The MTFS also includes an annual contribution to replenish reserves from 2026/27 onwards to support the Council's financial sustainability.

The annual review of the capital programme is underway to review all pipeline schemes that have not yet started with a view to reducing the size of the programme and limit any new borrowing from 2026/27.

- <u>Director of Legal & Governance (Monitoring Officer)</u>: The Monitoring Officer is not aware of any significant governance issues in relation to member code of conduct and complaints for 2024/25. The work in strengthening the governance concerning acquisitions and disposals, Information Governance and Delivery of the Housing Improvement Plan will be reviewed again during 2025/26. New governance controls in relation to the Councils financial position were introduced in 2024/2025 and will continue into 2025/2026.
- Head of Audit and Risk Management: Internal audit continues to focus on areas of risk in the organisation and on areas where governance improvements are necessary, based on the work of internal and external audit. During 2024/25, the Council is taking steps to improve governance over areas identified as significant governance issues, though for most, full implementation will continue into the next financial year and probably beyond. For the audit work completed, weaknesses in internal controls were identified from the work of internal audit.

Specifically, audits assigned a low level of assurance were: Financial Assessment of Clients, Leisure Services Insourcing (pre-implementation), Governance over Delivery of Savings, Support for Children provider payments process, Accounts Receivable (Sundry Debtors), New Operating Model – Procurement Act 2023, Corporate Performance and Intelligence and Change Projects and Programme Portfolio (Change Portfolio), Management Over Gifts & Hospitality, Management of Staff Performance, Review and Management of Off Contract Spend, and Implementation of Panacea (Procurement source to pay system). The work of internal audit also reported on work that began in 2023/24 but was completed in 2024/25.

- 5.3 The Head of Audit and Risk Management has also provided an Annual Audit Report and opinion for 2024/25. The report concluded that in most areas across the Council, with the exception of those areas receiving 'limited' or 'Nil' assurance are where audit actions had not been completed as planned, there are sound internal financial control systems and corporate governance arrangements in place, and that risk management arrangements are satisfactory. The Annual Report highlighted the root cause of a number of risks identified from audits and the subsequent recommendations; these include management control to direct services, record keeping and data quality, the maintenance of full audit trails, and supervision controls.
- 5.4 Directorate Management Teams have discussed a statement of assurance covering 2024/25 which is informed by work carried out by Corporate Directors; Directors; Heads of Service and Managers; internal audit; any external assessments; and risk management processes. The statements are used to provide assurance that any significant control issues that have been brought to their attention have been dealt with appropriately. No significant governance issues, apart from those identified at paragraph 4.2 were recorded.
- 5.5 The Chartered Institute of Public Finance and Accountancy (CIPFA) statements on the role of the Chief Financial Officer and the role of the Head of Internal Audit in public service organisations have both been incorporated into the Council's overall governance arrangements. During 2024/25, the Council can confirm that both the Chief Financial Officer and Head of Internal Audit fulfilled all the requirements set out within the CIPFA statements. No gaps in compliance were identified for either role.
- 5.6 The Leader of the Council and the Chief Executive have been advised of the implications of the result of the review of the effectiveness of the governance framework by the Audit Committee, and a plan to implement enhancements and ensure continuous improvement of the system is in place.
- 5.7 The evidence provided concerning the production of the Annual Governance Statement has been considered by the Chief Executive and will be considered by the Council's Audit Committee in July 2025. The Statutory Officers concluded that the Council has satisfactory governance systems in place and satisfactory plans to address the identified issues to ensure improvement; these arrangements continue to be regarded as fit for purpose in accordance with the governance framework. The Chief Executive along with the other members of the Corporate Leadership Team are committed to implementing the action plan, strengthening, and improving controls and keeping the effectiveness of the Council's corporate governance arrangements under review during the year.

Signed by:



Councillor Peray Ahmet Leader of the Council

Date: 25 June 2025



Andy Donald Chief Executive

Date: 24 June 2025