CORPORATE RISK REGISTER

Latest Review - 30/09/2025

| No. | Risk Event Description Ri | Risk Owner | Current Impact | Current Likelihood | Current Risk Score | Proximity | Mitigating Actions In Place | Future Impact | Future Likelihood | Future Risk Score | 1 '' | Future Actions / Update | Date |
|-----|--|---|-------------------|-----------------------|-----------------------|-----------------------------|--|------------------|----------------------|----------------------|---|--|------|
| 1 | financial viability/balance across MTFP including failure to deliver identified savings. | CLT Corporate Director of Finance and Resources | 5 | 5 | 25 | Short and Medium term | The Council's financial position is challenging and necessary action has taken place to protect its long term financial sustainability and reduce reliance on Exceptional Financial Support. During 2024/25 this has included: 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 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. Improvement in forecasting and a focus on delivery of savings. 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 is undertaken annually as part of the budget process and its governance. This includes the newly established Strategic Capital Board to oversee the development, monitoring and reporting of the whole programme and improve the decision making of all schemes A move towards medium term financial planning and starting the process earlier by delivering Budget Series 2025 over the course of 3 months (April to June). This was a two-day Budget Sessions each month with a focus on increasing awareness and accountability of Leadership Network and time over the Budget Series for identifying budget proposals and delivery plans for 2026/27 and beyond. Focus is now on providing assurance on the existing savings for 2025/26. For 2026/27 savings, pressures and budget gap has been articulated as at Sept 2025. Leadership Team has been asked to: Focus on the delivery of existing savings and getting our internal processes and procedures in place. Develop and implement clea | 5 | 5 | 25 | CLT Corporate Director of Finance and Resources | Future actions: External support to: - provide Strategic Advice to the S151 and Leadership Team, aligned to the financial recovery and response plan and the MTFS help the delivery of Adult Social Care savings and help deliver key MTFS cross cutting savings projects such as Procurement and Contracts Further strategic decisions will be needed to determine how best to utilise limited resources to deliver the priorities in the CDP. Through budget planning we will give Members choices for them to prioritise. This will also mean providing assurance of good value for money and our service provision is in line with others (costs and quality). Continue to Lobby and engage Government through various channels for future funding, provide evidence on the importance of relative need in funding allocations. This includes through consultation responses, various professional networks and MPs. Meeting with MHCLG to discuss latest financial position. Government review expected Nov to March - we will need to demonstrate we are delivering. For 2027/28 - Internal officer planning for 2027/28 to commence shortly in preparation for new administration – planning for an emergency budget in Summer / Autumn 2026. CLT will develop a suite of proposals for the new administration to consider. | |
| 1 | | | | | 25 | | 1. Procurement and contracts 2.Improving end to end processes 3.Reducing agency spend. 4.Improving collection of all income due to us. 5. Identify grant funded services - risk where grant ceases in 2026/27, assumption that service stops. Regular review of 'committed' reserves and other historic balances to identify any which can be transferred to manage risks and uncertainties. A full financial response and recovery plan has been developed and overseen by the Chief Executive and Corporate Director of Finance and Resources which has established an organisation emergency response to the financial position. The emergency response has been in place since April and has been reviewed after 6 months. Updated arrangements consists of: - Financial Recovery Board , a single board - bi-weekly meeting of Corporate Directors and Directors chaired by the CEX to provide accountability and assurance in respect of progress against the delivery of the plan and the savings -Financial Recovery Cabinet Group continues to meet 6-weekly, chaired by the Leader to ensure clear political oversight of the emergency procedures In addition to the Recruitment Board, a Spend Control Panel has been put in place to review council discretionary spend and commitments for amounts of £1,000 and above. This includes spend on Purchasing Card, Internal Payments Requests, one-time vendors, variations to contracts and all other purchase orders. The emergency arrangements have been in place since early 2025 to deliver the plan which overall objective is to reduce the reliance on EFS in the future and improve the Councils financial resilience and sustainability. Link to response and recovery plan to be inserted when available. Finance Recovery Plan review planned. Purchase to Pay Group established Re-directed dedicated resources to support delivery . Support to Section 151 and FRB.With a focus on delivery and unblocking any barriers to delivery. More structured communications plan with the whole organisation on the position and changes required | | | 25 | | Ongoing Spending Controls: Tighter controls will be implemented: Tighter control of recruitment through Recruitment Panel. Only essential spend agreed by SCP. Previous Cabinet decisions will be taken account of. Controls on system to stop payments not agreed through SCP – internal audit review has shown areas of non compliance. Removal of other payment channels to reduce non compliant purchasing. All purchase card limits reduced to £1,000 except for emergencies. Remove all services reserve, unspent grants reserve, budget stabilisation reserve that cannot be evidenced as formally committed. All General Fund related decision reports and procurement activity over £25,000, including delegated reports, to be signed off by Section 151 (or delegate). | |

| 2 | Non-delivery of transformational change due to lack of corporate change functions | 5 | 4 | 20 Short an Medium term | The Change Framework for Category A programmes was established following CLT approval in January 2024 and sits with the Digital and Change team under the Chief Digital and Innovation Officer. This Framework has established a change function that covers the following: • Led by 2 'Heads of Change', they consist of a core team of permanent officers who are configured to deliver outcomes and impact. • Equal focus given to implementing change, service redesign and benefits as well as traditional project management. • Standardisation across both areas with shared business resources. • Each Head will manage their project pipeline, resourcing, reporting and risk management. • Exception reporting will continue to come to CLT. • This function focuses on Category A projects (although some Category A projects are delivered directly by services) • Regular reporting of projects status to CLT. • Core funding agreed for 25/26, funding in future years tbd • Change Delivery Group in place and validating reporting over past year. | 4 | 4 | 16 | Chief Digital & Innovation Officer | Two 'Heads of Change' appointed and team recruitment completed. Teams lead, manage and oversee delivery of Cat A projects delivered by Change function. Also provide assurance across Cat A projects delivered by services. Change Framework criteria refreshed with more focus on those projects delivering cross council savings. Revised list of Cat A projects agreed with CDG, CLT and Members in May 2025. Team Resources in place for current Cat A projects but there is a lack of dedicated resource for the 3 new Cat A projects added to the portfolio in 2025. Resource review across all Cat A projects underway to manage this as far as possible. Current funding for change expires in Mar 26. Discussions are underway to identify future funding options (one of which could involve alignment with aspects of the Enabling services programme and specifically the review of PPM, but this is very much in discovery stage and will not offer a solution from Apr 26). Interim funding options are being explored here which offer the potential to 'bridge' funding until a longer term solution is in place. The Team are already starting to experience some staff turnover due to lack of certainty around future funding (with 3 leavers in the last quarter). | Sep-25 |
|----|---|---|---|---------------------------------|--|---|---|----|---|---|-----------|
| 9 | Failure to prepare for the impact associated with climate change, including air quality and pollution, extreme weather (e.g. flooding, heat). | 5 | 4 | 20 Medium term | Responding to the Climate Emergency is one of the council's corporate priorities and is monitored through the Corporate Delivery Plan (CDP). Mitigations include producing long-term strategies and plans to reduce the risk and consequences of climate change in the borough. A range of strategies and policies exist detailing the Council's approach to mitigate against the impact of Climate Change, such as the Local Plan, the Haringey Climate Change Action Plan (A Route Map for a Net Zero Carbon Haringey), Pollution Control - Contaminated Land, the Flood Risk Management Strategy, Parks & Green Spaces Strategy and the Affordable Energy Strategy. | 5 | 4 | 20 | Programme Director Wellbeing & Climate Project delivery for climate related items in the CDP is owned by teams across the council | 2) Integrating in the London Council's Resilience Toolkit including: * Building on Heatwave JSNA. * Highways Flood Maps. * Emergency Planning Response. | 31-Oct-25 |
| 10 | Building Control reforms Newly-regulated profession to perform certain statutory functions High levels of retirement across the country, major shortage of qualified staff nationally Currently 3 qualified permanent staff, out of structure of 11 posts (vacancy of 73%) (as of July 2025). 1 senior officer left in July 2025. Agency staff rates reaching extreme levels e.g. £95/hr, not sustainable Risk of not being able to recruit & retain staff Risk not meeting statutory requirements Risk of failing audit inspection by the Building Safety Regulator (BSR) | 5 | 4 | Immedia 20 short & medium | Workforce Plan 'Trailblazer' being drafted, presentation to Corporate Director July 2025 | 4 | 4 | 16 | Rob Krzyszowski Denis Ioannou | Update provided in Mitigating Actions as of July 2025 | Jul-25 |

| Risk to safety & emergency critical work of the Council Risk of not fulfilling 24/7 emergency planning / dangerous structures call out rota e.g. devastating fires, vehicles colliding into buildings etc Risk of not coordinating Safety Advisory Group (SAG), signing off Building Safety Certificates & fulfilling Safety at Sports Ground: Act statutory obligations for major events with strategic partners e.g. Tottenham Hotspur Football Club Stadium events (crowds up to 65,000 people), Alexandra Palace events, Finsbury Park events Risk of not providing advice to blue light emergency services including London Fire Brigade, Metropolitan Police for major events to support public safety Risk of delayed Building Contro approvals for Council corporate projects e.g. Civic Centre, Council Homebuilding programme Risk of increased complaints Unable to attract and retain scarce skills or those in high demand. The Council does not have the appropriate skills, capacity and capabilities in place and/or recruited to deliver the Corporate Delivery Plan effectively. | Rob Krzyszowski Corporate Director Culture Strategy Comm | 5 | 4 20 | Immediate, short & medium term Short and Medium term | New Workforce Development Strategy 2024 has been approved and launched in September 2024. Review of the use of Agency Workers use is ongoing and there is an accelerated recruitment protocol in place. Restructures and Focused Recruitment Campaigns - high volumes across directorates and recruitment campaigns arranged as required. Template and workshops designed to assist Directors in formulating workforce action plans New approach to Manager training has been designed and the pilot has launched in September 2024, which will inform future activity. Human Resources reviewed additional employee benefits New purchasing annual leave scheme launched in April 2025 | 5 | 3 | 16 | Officer | New recruitment methods, such as video applications, are being investigated for future potential. | Jul- December 2025 Ongoing March 202 |
|---|---|---|------|---|---|---|---|----|--|--|--|
| Failure to meet Housing / Achieve full regulatory compliance for Council Housing Stock standards | Corporate Director Adults Housing Health | 4 | 4 16 | Short and Medium term | Housing improvement Plan in place as agreed by Cabinet April 23 in place and delivery overseen by housing improvement Board Agreed a target to achieve housing decency by March 2028 with the Regulator and exceeded our interim target of 1000 homes made decent for 23/24 We also achieved our target of developing a new Housing Asset Management Strategy, agreed by Cabinet December 2023, including £627m of investment in the stock over the next 10 years. This will be delivered through 4 new partnering contracts We have procured and are implementing a new compliance management system that will remove the manual data handling, manipulation and human error risks associated with using spreadsheets of complex data management. The system is expected to be fully operational by the end of December 2024 to manage the main 6 compliance areas of Gas, Fire, Water, Electric, Asbestos & Lift safety. The Housing Quality Network has been commissioned to carry out a mock Housing inspection of Housing Service's compliance with the Regulator's consumer standards, to assist with action planning and preparation for housing inspection in Autumn 2024 A project team has been established to assist with action planning and preparation for inspection. Project leads are Programme Manager (HSBS) & Transformation Portfolio Manager (Housing) Cross-cutting Senior Management steering group with representation from across the Council established from July 24 to oversee preparation for inspection and action planning, to meet 6 weekly. The Repairs Board oversees a number of workstreams in the Housing Improvement Plan to improve the repairs service to residents. | 4 | 2 | 1 | Adults Housing Health & Housing and Operational Director - Housing & Building Safety | We have made 791 homes decent in 2024/25, exceeding the target of 700. Mitigating actions to achieve target include planned internal works, 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 revised Contract Award due to be approved in September 2025, following original approval by Cabinet in June 2025. Following mobilisation, go live is expected in March 2026. This is a key factor to support the achievement of 100% decency by 2028 in line with the asset management strategy agreed by cabinet in 2023. All 'Big 6' (FRA, EICR, LGSR, Asbestos, WRA and LOLER) modules are 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 spreadsheets to manage actions. Training with users is ongoing around receiving and managing actions. Regular sessions have been arranged with officers running the 'Big 6' programmes to ensure that inspection certificates are being uploaded to the system and that reconciliations are being carried so that the programme is up to date. Integration with NEC/Northgate is now being progressed to update C365 with new property information, duplicates, voids etc. Further development of the reporting dashboards to present future KPI information. We are progressing additional modules including the Asbestos Register, Building safety Manager Inspections and Fire Door Inspections, as Building Safety Cases and FRAEW (external Wall Surveys) and Structural Surveys as well as domestic asbestos surveys. All of these are in progress however our current primary focus is on the core 6 compliance areas. | |

| 1 | | | | | | | | | | | | | |
|----------|--|---|---|---|----|-----------------------------|--|---|---|---|--|--|------------|
| 5 (Cont) | | | | | 16 | | | | | 8 | | Development of the data integration with NECH and our reporting dashboards is on-going. We are also developing the Building Safety Case module and QR Coding of all communal fire doors. Due to the need to re-align all lift assets with our lift maintenance programme, we are asset tagging and renumbering all our residential, communal passenger lifts. We have started to re-number our assets based on an agreed format which will be progressed to link to QR codes. This is a detailed piece of work initially and is being progressed along side our priority areas for the main 6 compliance areas and additional modules. The HQN mock inspection of the housing service took place Sept/October 2024. Action plan 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 the board since March 2025. HQN have recently been commissioned to carry out an assessment of the actions within the plan against their recommendations from the mock inspection and the evidence against completed actions to provide assurance. Changes to the Repairs Management structure have been implemented with permanent Team managers now appointed. A high-level review of the Housing Repairs service delivery model was undertaken in March 2025, with a report recommending an options appraisal of delivery models approved by Cabinet in July 2025. This initiative is to reduce costs, improve efficiency, and achieve better value for money. A timescale of 6-months was agreed when the report was agreed. A costed proposal for the next phase has been received and is being evaluated to determine next steps. Work is continuing on procurement of a supply chain for the short and longer-term to support out inhouse delivery and ensure future repairs are delivered in line with policy commitments and improve both jobs completed in target time and customer satisfaction. A Damp and Mould CRM system to provide better reporting and understanding of all cases that have da | Dec 2025 |
| | . • | Chief Information Officer & Corporate Director of Finance and Resources | 5 | 3 | 15 | Short and Medium term | Digital architecture reviewed and key controls established. Systems we manage are all backed up so we can revert to a clean version - albeit with some loss of work/updates (however sometime infection is also on the backups due to "sleeper" viruses). Regular internal audits to seek independent assurance Technical solutions for firewall , firmware/soft/ware/hardware solutions are in place. Mandatory training for all staff on Cyber Security Awareness (but not mandatory). Staff Awareness on cyber security via regular posts by Digital Compliance Manager. Pentest Partners procured to provide technical expertise in the management / control of a cyber event. Cyber-Security in My Learning is Mandatory. | 5 | 3 | | of Finance and | We can put in place controls, testing and all the security measures we can to reduce the likelihood we will be subject to a major attack, but the risk and impact will never go away. As a government body we will always be a target for attack and the threat vector is changing constantly. We will however: - Clarify the process and procedures for when a major incident occurs. - Continue to raise awareness in the organisation. - Continue to migrate data and platforms to the cloud - Seek independent assurance from internal audit - Explore backups for our data held in Microsoft, (OneDrive, SharePoint, Teams etc) - We are only available to monitor events during office hours via our SIEM and Microsoft /Palo Alto admin pages. We need to replace our SIEM (expires December 2025 & not fit for purpose) to improve our detection of "odd" events and as far as possible automate reactions, such as texting an on-call employee. - Improve our knowledge and approach to Zero-Day vulnerabilities linked to systems we use are very likely to be exploited and could be undetectable, until the hacker does something deliberate or accidental that is visible to us - Security Team conduct Phishing simulations — a proportion of staff fall for them each time. Unfortunately many are repeat-susceptible and the percentage seems to have plateaued. Will look at the next stage of comms and training to improve this. - Develop an Al policy that takes into account emerging Al platforms and our security. | 31/03/2025 |
| | Adequate processes are not in place to safeguard vulnerable children and adults within the borough who were or should have been in receipt of services, either from the council or a partner agency. | Director of Children's | 5 | 3 | 15 | Medium Term | A developed quality assurance system is constantly reviewed Quality Assurance Framework in place Performance monitoring on national KPI's every quarter with good outcomes Strong Learning framework in place from deaths of service users with good involvement of family members or representatives Strong focus on early intervention and safeguarding prevention Arrangements in place to mitigate the risk of death or serious injury to a child arising from abuse or neglect, in addition to those covered above, include caseload monitoring, quality assurance activity including case audit, maintaining low levels of vacancies for social workers. Multi-Agency-Safeguarding-Hub, Local Safeguarding Children Partnership (LSCP) Annual Report; Child Protection Report; Quality Assurance team in Adults, reviewing contracted services and council services. Adults and Children safeguarding - Mandatory safeguarding training for all staff. Positive assurances from external inspections of Children's Services. Adults - The CQC rated Safeguarding as 'Good'. They highlighted the recent changes made to pathways to improve the experience not meeting s.42(2) thresholds. The role of the Safeguarding Adults Board was highlighted for its positive partnership approach to strategic safeguarding across the borough. of residents including increased response times. Strong practice in 'Making Safeguarding Personal', positive support for practitioners through training and workshops, good multi-agency working and preventative interventions for those residents Positive assurances from external inspections of Children's Services. | 5 | 2 | | Children's Services Corporate Director Adults Housing Health | ADULTS Adults - A robust adults board is in situ and will continue to provide assurance for multi-agency management. Multi-agency systems and pathways are in place to ensure that clear provision and support is provided where necessary. Policies, procedures and training matrix, demonstrate high levels of efficiencies in this area. Additionally, our newly implemented ASC Improvement Board and associated governance will support continuous improvement in this area. CHILDRENS Ensure thresholds clearly understood by all professionals. Opportunities provided for shared learning through audits and training events/conferences. Ongoing training opportunities provided to frontline staff via children's academy and other external offers. Regular supervision is provided to staff to ensure all work is reviewed by managers on at least a monthly basis. Ensure competent and timely completion of assessments, conferences and reviews completed in line with statutory guidelines. Checked Monthly Ensure all performance remains at least in line with national and statistical neighbours through benchmarking activity. To be checked weekly, monthly or annually depending on the indicator. Regular audits are undertaken as part of our quality assurance framework. This gives an additional lens on practice and allows strengths to be noted and areas for improvement to be considered and addressed by managers. Advise and check that maintained schools have risk assessments in place, covering all safety matters that pertain to children, young people and staff. | 31/3/25 |

| 11 | Failure to instigate arrangements for the proper management of Council property (including commercial and administrative buildings). | 4 | 3 | 12 | Medium term | The council's adopted Strategic Asset Management and Property Improvement Plan (SAMPIP) 2023-28 contains focused 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. Appropriate governance is now established. Progress is then taken through our property governance process on a monthly basis. Reporting on statutory compliance is provided quarterly. 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. | 4 | 2 | 8 | Director for Capital Projects & Property | Implement the Property Improvement Plan. Review actions in the improvement plan and determine whether updates required. | 31/012/202 |
|----|--|---|---|----|----------------|--|---|---|---|--|--|------------|
| 13 | Integrated delivery models for local health & care services does not deliver Housing Health | 4 | 3 | 12 | Medium term | The CQC inspection rated Partnership and Communities as 'Good'. The report highlighted strong collaboration with various partners, including the Integrated Care Board (ICB), Health services, and the Voluntary, Community, and Social Enterprise (VCSE) sector. There were clear structures and roles within the Haringey Borough Partnership (HBP) and Health and Wellbeing Board support shared objectives and strategic alignment. Teams like the Integrated Reablement team and Multi-Agency Care and Coordination Team (MACCT) work closely with health partners to provide coordinated care, reduce hospital admissions, and support independence. The local authority engages with the VCSE sector to understand and meet local needs, supporting grassroots organisations and involving them in decision-making processes. Integrated Services within Neighbourhoods will be a key component of our phase 2 development of Localities, aligned to the Independence and Early Intervention Team. | 3 | 2 | | Director - Adult Social Care | Ongoing regular communication and engagement with ICB, health services, and the Voluntary, Community, and Social Enterprise (VCSE) sector to align goals and expectations. This is of particular significance as the NCL ICB undergoes its merger with NWL ICB. Involvement in the development of Neighbourhoods as one of the integrator organisations for Haringey along with Whittington Health and Haringey GP federation. Clearer pathways and processes under development to ensure continuous learning opportunities related to integrated care practices and system navigation. Additionally, our ASC Improvement Board, Borough Based Partnership, and Health and Wellbeing Board are overseeing and supporting continuous improvement in this area. | 31/12/2025 |
| 3 | Impact of significant external economic factors, affecting service delivery, the local economy, employment opportunities and cost of living for residents. | 3 | 3 | 9 | Long term | The main concerns are rising cost of living, recovery of the economy from Covid-19, and the overall economic environment, particularly inflation and interest rates increases. Steps taken so far are: Establishment of a Cost of Living Support to provide advice, support and access to services to residents (https://www.haringey.gov.uk/community/here-help-financial-support-residents?utm_source=Media&utm_medium=Press%20release&utm_campaign=Financial%20Supp ort%20Helpline%20HtH); • Connected Communities is a programme designed to improve access to council and voluntary support in Haringey • Close monitoring of inflationary pressures and the impact on contracts and services; • Continued monitoring of impacts on construction costs and supply chain • Review of Business Continuity Plans; • Work across services on plans to support the local economic recovery, which includes a focus on supporting local business and employment; • considering the impact of demand led services in to the medium and longer term from Covid-19 and changing economic conditions; • Identify inequalities within the borough that have been exposed through Covid-19, and who will be most impacted by the rising cost of living and to address these as part of the Recovery Framework. • Continuous monitoring of the economic environment, including through our Treasury advisors, Arlingclose, other advisors and through professional networks. | 3 | 3 | 9 | Corporate Director of Finance, Chief Executive and CLT | | on-going |
| 7 | Failure to transform insourced leisure services including culture and operations to improve performance Corporate Director Env & Resident Exp | 3 | 3 | 9 | Short term | Insourced workforce being restructured onto Haringey terms and conditions - opportunity to address culture change. Capital works transformation programme in place - phase 1 complete and phase 2 planned approved and underway. Recruitment to vacant lifeguarding posts complete - improves service reliability and opening hours Management resource capacity being created through restructure. | 3 | 2 | | Programme Director Wellbeing & Climate | Governance for all related workstreams is now in place including a Wellbeing & Climate Board and a steering group. Leisure Transformation Programme has been developed and a in development following appointment of Leisure Transformation Manager has been appointed. Management restructure has completed and new Head of Service role is out for recruitment. ion which creates more capacity to deliver transformation and harmonise workforce. Culture change programme being developed with HR, alongside restructure of insourced workforce. Performance management indicators for the service developed, in line with industry leisure standards. Re-procurement of leisure management system underway to provide better customer journeys and improved commercialisation opportunities. | |

| 4 | incident affecting employees or member of the public. | Corporate Director Culture Strategy Communication CLT | 4 | 2 | 8 | Short & Medium term | Health and Safety arrangements policy in place. Arrangements also in place for the for directorates to carry out risk assessments and assess risk exposure for staff. All reported incidents are reported and the H&S team monitor the incidents. A corporate Health, Safety and Wellbeing Board in place to receive reports from directorate Health, Safety and Well Being Boards every quarter and receive information from the Health and Safety team. | 4 | 2 | 8 | Corporate Director Culture Strategy Communication CLT | Development and implementation of a new Corporate H&S Strategy. | 31/12/2025 |
|---|---|---|---|---|---|---------------------------|---|---|---|---|--|---|------------|
| | | | | | | | | | | | | | |