# logo_NHSGG&C_dark_blueHealth & Safety Risk Register

**Directorate/Service/Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Completed By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Risk Ref** | **Description of Risk** | **Existing Controls** | **Residual Level of Risk** | **Further Action / Controls Required** |
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**REMEMBER: - Anything that cannot be resolved locally must be taken to the next level of management.**