#### (Appendix 2)

Risk 1

There is a risk that Public Health Wales will not be sufficiently focused, agile and responsive in discharging our functions, caused by the unpredictable and changing nature of the current and emerging geopolitical, socioeconomic and health threats, resulting in an inability to tackle the population health challenges in a sustainable way.

	Sponsor and Assurance Group				
<b>Executive Sponsor</b>	Tracey Cooper				
Assuring Group	Quality, Safety and Improvement Committee				

Inherent Risk									
Date	10.05.2022	Likelihood:	4	Impact:	4	Score:	16		

		Risk	c Score			Risk Decision	Delivery Confidence Assessment
Curre	nt Risk		Tar	get risk			
Likelihood	Impact	16	Likelihood	Impact	12	Treat	Amber
4	4	10	3	4	12		

#### **Risk Owner's Overview Assessment Status**

The organisation is still awaiting Ministerial approval of the Board approved IMTP which takes account of the current known threats. We will continue to monitor the impact of the IMTP to respond to potential emerging geopolitical, socio-economic and health threats. The development of a key data dash board to monitor the health of the nation will provide information to inform any new or additional interventions to respond to emerging health and wellbeing needs. We have met with the CMO and officials in relation to the cost of living crisis and committed to developing a public health approach to it. This is being progressed in a coordinated way across the organisation and will also consider how we best support our own staff. We continue to have regular meetings with Minister's and officials and we are actively engaged with the WHO and IANPHI in order to help identify, assess and support current and emerging threats.

DCA RAG	DCA Description
Green	High degree of confidence exists that the controls and actions identified will mitigate the risk to the required level.
Amber	It is feasible that the controls and actions identified will mitigate the risk to the required level but issues remain outstanding that require addressing.
Red	There is little confidence that the controls and actions identified will mitigate the risk to the required level.

# (Appendix 2)

	EXISTING CO	ONTROLS		Level at which the Assurance is provided to					
No.	Control	Exec Owner	SOURCES OF ASSURANCE	Team / Division / Project /Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board	
SR 1.1	Regular Business Executive Team Meetings to review implementation of IMTP and emerging threats	Chief Executive/All Execs	Business Executive Team Minutes			x	x	x	
	Embedded management of health		HPSS DLT minutes and COVID-Ex minutes		X	Х			
SR 1.2	protection response for COVID within HPSS Directorate Leadership Team	National Director of Screening and Health Protection Services and Medical Director	COVID-EX minutes		x				
	Incident Management Teams in	National Director of Screening and Health	Minutes of IMT and summary		Х				
SR 1.3	place for Ukraine conflict in PHW and in UKHSA for UK	Protection Services and Medical Director	Minutes of UKHSA IMT and summary		x	x			
SR 1.4	Regular meetings with Welsh Government Minister(s) and officials which include discussions in relation to existing and emerging health and socio-economic threats in Wales	Chief Executive	Actions arising following meetings as appropriate		x	x			
SR 1.5	Formalised meetings with WHO Collaborating Centre and WHO	Director of Policy Research and Development, Policy, Research and International Development	Minutes of WHOCC and WHO meetings						
SR 1.6	Weekly meetings with a number of IANPHI European Institutes and Ukraine PH Institute	Chief Executive/MB	Notes of meetings at exec lead/BET level as appropriate						

Action Plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 1.1	Longer term planning for new and emerging threats incorporated into a revised Long Term Strategy to develop a coherent and synergistic approach to multi-shocks.	Development and approval of new Long Term Strategy	HG	April 2023	Ongoing development of the Long Term Strategy and engagement with staff and partners.
	More formalised series of	To be considered by BET with the view of identifying a lead (s) Exec to coordinate a regularised approach to multi-shock public health threat assessment – including domestic and global population health threats.	TC	Ongoing	Cost of living crisis presented by Sumina Azam (SA) and Iain Bell (IB) at Strategic Executive Team meeting on 28.6.22. Actions agreed for SA, IB and Angela Jones to coordinate cross organisational activity to develop a 'Public Health Approach to the cost of living crisis.
AP 1.2	collective public health 'threat' assessment to include health, environmental, socio- economic and geopolitical	Develop a rapid re-prioritisation planning process if required that is triggered by significant threats that require substantial in-year focus/resource	HG	To be confirmed	This will be informed by the population health dashboard that will be considered a part of our Integrated Performance report. This is being presented at a Board development session on the 30.6.22.
	threats, to be incorporated into Strategic Business Executive Team business.	Joint meetings with WG colleagues to consider this with inclusion of international partners as appropriate	MK/MB/SA		WHO roundtable meeting being arranged 9.22 to consider this with focus on cost of living crisis. Establishing monthly meetings with CMO and his team and some of our Exec team for a more strategic approach to population health action and will include emerging threats
		International Horizon Scanning reports to consider new and emerging global public health threats no less than twice a year	МВ	Ongoing horizon scanning. Focus on emerging threats to be confirmed.	

Risk 2

There is a risk that Public Health Wales will not deliver its plans for delivering excellent services for population screening, health protection and infection caused by uncertainty of the impact of current and future health threats and lack of specialist workforce, resulting in inability to prioritise service delivery and transform models of care.

	Sponsor and Assurance Group
<b>Executive Sponsor</b>	National Director Health Protection and Screening Services, and Medical Director
<b>Assuring Group</b>	Quality, Safety and Improvement Committee

		Inl	herent R	isk			
Date	11.05.2022 (reviewed	Likelihood:	3	Impact:	3	Score:	9
	08.07.22)			-			

		Risl	k Score			Risk Decision	Delivery Confidence Assessment
Curre	nt Risk		Tar	get risk			
Likelihood	Impact	a	Likelihood	Impact	6	Treat	Green
3	3	9	3	2	b		

DCA RAG	DCA Description
Green	High degree of confidence exists that the controls and actions identified will mitigate the
	risk to the required level.
Amber	It is feasible that the controls and actions identified will mitigate the risk to the required
	level but issues remain outstanding that require addressing.
Red	There is little confidence that the controls and actions identified will mitigate the risk to
	the required level.

#### Risk Owner's Overview Assessment Status

The current risk score is at the inherent risk level. However, in recent weeks, this had the potential to be higher as the likelihood of an number of enhanced public health incidents had increased (such as monkeypox and exceedance of STEC), on top of the recovery and transition activity relating to transition from pandemic to endemic COVID 19 management.

There are existing controls relating to: workforce planning and development; mitigation of impacts of unexpected health threats through the establishment of effective systems and processes; and strengthening governance arrangements to ensure excellent service delivery in HPSS.

Each of the three divisions in HPSS directorate are likely to score differently if reviewed independently and this will be reflected in divisional and directorate risk registers.

This is a known dynamic risk and as such will be actively monitored and managed in HPSS at both division and directorate levels, all informing the strategic RR.

Updated September 2022

	EXISTING CO	ONTROLS		Level at	which th	e Assurar	nce is pro	vided to
No.	Control	Exec Owner	SOURCES OF ASSURANCE  Divisional SMT meeting and minutes		Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board
			Divisional SMT meeting and minutes	/Programme	Х			
SR 2.1	Overview and scrutiny of workforce	National Director Health Protection and	DLT meetings and minutes		Х			
3K 2.1	capacity and capability is provided through clear governance arrangements	Screening Services, and Medical Director	Escalation to BET with meetings and minutes		Х	Х		
	with divisional SMTs and DLT		Divisional, Directorate and Corporate Risk Registers actively updated and risks escalated as appropriate	Х	Х	Х	х	Х
			Business Continuity Action Plans for HPSS divisions	Х	Х	Х		
			Emergency Planning and Business Continuity Group Meeting minutes		Х			
SR 2.2	Implementation of Business Continuity Arrangements where required and	National Director Health Protection and Screening Services, and Medical Director	Training and Exercise reports to Emergency Planning and Business Continuity Group	Х	Х			
W	where appropriate		Emergency Planning and Business Continuity Documentation (regular review and update)	х	х		х	
			Ability to sustain response to health threats		Х			
			Corporate Policy and Control Document Reviews – corporate register update reports	Х	х	Х	х	Х
	Utilisation and development of Policies		Health Protection Division – Standard Operating Procedures (document development, review and approval)	Х	х			
SR 2.3	Standard Operating Procedures and Screen	National Director Health Protection and Screening Services, and Medical Director	Infection Division – Standard Operating Procedures (document development, review and approval), alignment to UKAS accreditation requirements.	х	х	х	х	
	Protocols.		Screening Division –For each of the screening programmes - Standard Operating Procedures (document development, review and approval)	х	х			
			Reports to Quality, Safety and Improvement Committee		Х	Х	X	
			Action Plan and Reports – Divisional Senior Management Teams	Х				
			Medical, Nursing and Multi-Disciplinary Staff Revalidation - Annual Report to People and Organisational Development Committee / Quality, Safety and Improvement Committee				х	
CD 2.4	Uphold high professional standards:	National Director Health Protection and	Quality review visit by Medical and Multi-Disciplinary Revalidation support unit			Х	х	
SR 2.4	Professional Regulation – Medical, Nursing and Multi-Disciplinary Staff	Screening Services, and Medical Director	Quality Indicators Performance Monitoring	Х	Х	Х	Х	
	ivarsing and water bisciplinary stari		Monitor Specialist Registration and Revalidation		X	X	X	Χ
			Medical, Nursing and Multi-Disciplinary Appraisal Process – Quality Indicator		х	х	х	Х
			Medical Job Planning Process – Quality Indicator			Х		Χ
SR 2.5	Established Directorate Financial Management Systems and Processes	National Director Health Protection and Screening Services, and Medical Director	Directorate Finance reports to Directorate Management Team meeting (monthly). Supported by the Business Operations Meeting (BOM)	x	х			

	EXISTING CO	ONTROLS		Level at	which th	e Assurai	nce is prov	vided to	
No.	Control	Exec Owner	SOURCES OF ASSURANCE	Team / Division / Project /Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board	
			Divisional Finance reports to SMT	Х					
			Executive Director Reports (to Executive and Board)			Х		Χ	
			Mid and End of Year Review Reports (Executive scrutiny)			Х		Χ	
			Datix reporting at programme and divisional level	Х	Х	Х			
SR 2.6	Implementation of learning from incidents	Service de la constant de la constan	National Director Health Protection and	Putting Things Right - Quarterly Alert Exception Report (Quality, Safety and Improvement Committee)				Х	
		Screening Services and Medical Director	National Reportable Incident Reporting (Quarterly) to Quality, Safety and Improvement Committee			х	Х		
			Communicable disease surveillance reports	Х	Х				
	Competition on of booking the sector to inform	National Director Health Protection and	Exceedance reports and protocols for escalation and response	Х	Х	Х	Х		
SR 2.7	Surveillance of health threats to inform timely and effective response	Screening Services and Medical Director	Agreed criteria for escalation (reviewed on an annual basis)	Х	Х				
	timely and effective response		Health Protection Situational Awareness Reports – (monthly report to Executive)	х	Х	х		Х	
	Development of Workforce Plans for	National Diseases Health Bustostics and	Reports of progress against developed Workforce Plans	Х	Х				
SR 2.8	-	National Director Health Protection and Screening Services and Medical Director	Reports to the People and Organisational Development Committee				х		
			Directorate and Divisional-level workforce plans		Х				

Action Plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 2.1	Divisional review of existing controls	Work across HPSS 3 service divisions to review existing controls and identify gaps, informing the developing action plan to be signed off at Directorate level	National Director Health Protection and Screening Services, and Medical Director	July 2022	Complete – will continue to review
AP 2.2	Implementation of Cervical Screening Information Management System (CSIMS) due to NHAIS being decommissioned	Programme Board and Project Team established – specification agreed and near completion with end to end testing and go/no go decision date set 24 May 2022	Deputy Chief Executive / Executive Director of Finance and Operations National Director Health Protection and Screening Services, and Medical Director	ТВС	Go-live data delayed to ensure adequate testing after concerns addressed. Decision on new date for implementation due to be taken this month.
AP 2.3	Implementation of BSS select for Breast Screening Programme to maintain cohort selection for breast screening due to NHAIS being decommissioned	Working group with NHS England colleagues to progress this change	Deputy Chief Executive / Executive Director of Finance and Operations National Director Health Protection and Screening Services, and Medical Director	March 2023	Steady progress is being made. MOU has been agreed and in process of being signed and then work form will be raised. Working to undertake work this financial year.
AP 2.4	Recovery of the delay in timeliness of Breast Screening, Diabetic Eye Screening and Aneurysm Screening due to impact of pandemic	Implementation of agreed recovery plan for the remaining three screening programmes.	National Director Health Protection and Screening Services, and Medical Director	March 2024	Recovery challenging but progressing according to divisional plans
AP 2.5	Optimisation and Transformation of the Diabetic Eye Screening Programme	Programme is optimised to enable timely and quality programme. Transformational project taken forward to identify sustainable service model. Discovery undertaken with service users, stakeholders and staff to inform model.	National Director Health Protection and Screening Services, and Medical Director	ТВС	Transformation Programme progressing with first key milestone of upgrading the DESW IT system (Optimise) complete. Programme governance and meeting structure in place and being adhered to. Short term funding identified to support capacity of programme
AP 2.6	Replacement of the Breast Screening Equipment	Implementation of the replacement of breast screening equipment in line with timelines – mammography equipment and mobile replacement	National Director Health Protection and Screening Services, and Medical Director	March 2024	Project is progressing well and on time. All static units will have been upgraded by the end of September 2022. We have received a delivery schedule for the Mobile Breast Screening Units with the first delivery expected at the beginning of October 2022.
AP 2.7	Implementation of the reprocurement for the HPV testing equipment for Cervical Screening Programme	Implementation of the replacement of laboratory equipment	National Director Health Protection and Screening Services, and Medical Director	March 2023	This has been challenging due to service and logistical issues and interdependencies including the relocation of equipment out of Magden Park to IP5 to make space for the new Roche platforms. Operational plans have been agreed, team meetings in place and work progressing in line with plan.
AP 2.8	Integrated scrutiny and action planning at directorate level of	Review of current meeting cadence and information flows to identify gaps and opportunities	National Director Health Protection	July 2022	Meeting cadence and information flow rapid review in progress. Recommendations being considered in July by HPSS DLT.
AF 2.0	available management information relating to finance, people, quality, and risk	Strengthen existing system including reintroducing a directorate and business partner subgroup	and Screening Services, and Medical Director	July 2022	Initial subgroup meeting convened drawn from past participants in April 2022 to discuss purpose and scope. Stand up of new system planned July 2022 and is on track

AD 2.0	Sustainable provision of clinical	Continue to recruit Specialty and Specialist Doctors to the Infection Service to support Consultant Workforce Recruitment of Physician Associates	National Director Health Protection	Ongoing	In Progress
AP 2.9	infection services	Proposal to convert non-pay Transformation funds to pay to increase number of clinical staff (Scientists and Specialist Nursing)	and Screening Services, and Medical Director	September 2022	New action
		Review network model to optimise skill mix across multiple sites for Out of Hours working		December 2022	New action
		Change skill mix to include greater numbers of Associate Practitioners (Band 4s) and reduce numbers of Biomedical Support Worker (Band 2/3) to secure higher level competencies		March 2023	New action
AP 2.10	Sustainable provision of laboratory diagnostics including	Replace the MALDI-TOF platforms in the Regional Laboratories	National Director Health Protection and Screening Services, and Medical	September 2022	New action
	Out of Hours	Complete molecular testing tenders for provision of Respiratory and Central Nervous System syndromes	Director	March 2023	New action
		Centralisation of Roche testing platforms at IP5 to provide i. centralised respiratory testing including COVID and ii. centralised sexual health infection testing including postal service		i. November 2022 April 2023	New action
	Out of Hours Acute Health	Implement new central contact process	National Director Health Protection	September 2022	New action
AP 2.11	Protection Protection	Reviewing the model of service delivery to test resilience and sustainability	and Screening Services, and Medical Director	March 2023	New action
AP 2.12	Surge Plan for Acute Health Protection	Agreed oversight and surge plan for Acute Health Protection	National Director Health Protection and Screening Services, and Medical Director	September 2022	New action

Risk 3

There is a risk that we will not manage organisational change well, caused by multiple change programmes being implemented simultaneously, but in isolation, and insufficient time to effectively engage an exhausted workforce, resulting in high levels of sickness absence, vacancies, staff turnover and stress.

Sponsor and Assurance Group					
<b>Executive Sponsor</b>	Director of People and Organisational Development				
Assuring Group People and Organisational Development Committee					

	Inherent Risk										
Date	11/05/2022 (reviewed 07.09.22)	Likelihood:	5	Impact:	5	Score:	25				

Risk Score					Risk Decision	Delivery Confidence Assessment	
Curre	nt Risk		Tar	arget risk			
Likelihood	Impact		Likelihood	Impact		Treat	Amber
3	5	15	3	3	9		

DCA RAG	DCA Description
Green	High degree of confidence exists that the controls and actions identified will mitigate the risk to the required level.
Amber	It is feasible that the controls and actions identified will mitigate the risk to the required level but issues remain outstanding that require addressing.
Red	There is little confidence that the controls and actions identified will mitigate the risk to the required level.

#### **Risk Owner's Overview Assessment Status**

It is recognised that a number of functions play a material role in the effective management of change. People & OD have a key role, together with Strategy & Planning; in addition to the critical role of line managers in leading and handling change effectively.

There are a large number of change programmes currently planned and already underway within the organisation.

Although there are many measures already in place in relation to managing sickness, staff well-being, as well as the OCP process, it is recognised that until we move to a more controlled system for the commissioning and monitoring of change programmes, there will continue to be some risk that we will not be able to manage organisational change as well as we would like, due to over commitment.

	EXISTING CO	ONTROLS		Level at which the Assurance is provided to					
No.	Control	Exec Owner	SOURCES OF ASSURANCE	Team / Division / Project /Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board	
	Dartnership working with Trade		Appointment of 2 dedicated change Trade Union representatives to support change initiatives	x					
SR 3.1	Partnership working with Trade Union's to engage at informal and formal stages of change and working	Director of People and Organisational	Organisational Change Policy provides a framework to undertake change including staff engagement	x	х				
31(3.1	with change leads to support initiatives	Development	Papers and Minutes to demonstrate the provision of updates to Local Partnership Forum, Joint Medical & Dental Negotiating Committee, Business Executive Team and People & Organisational Development Committee			x	x		
SR 3.2	Strategic Priorities in relation to planned change have been identified in the Integrated Medium Term Plan	All Executive Directors	Papers and Minutes to demonstrate regular review via Project Boards to monitor progress and impact on workforce	x	x	x	x		
	(IMTP)	Deputy Chief Executive and Director of Operations & Finance	Minutes of monthly meetings to review IMTP progress		x				
SR 3.3	A People & Organisational Development Organisational Change Policy change tracker in place to	Director of People and Organisational	Monthly meeting to demonstrate change initiatives discussed and monitored regularly with Partners and Trade Union Change Leads		x				
3.5	identify changes as they are initially discussed in order to identify planning and resourcing implications	Development	Local Partnership Forum quarterly				x		
SR 3.4	Provision of change master classes to	All Executive Directors	Provision of change master classes to managers	X	Х				
3K 3.4	managers by external provider	7.11 Excederve Directors	Change toolkit available to support managers	х	x				
CD 2 F	Managing Attendance at Work proactively supported by People &	All Evacutive Directors	Managing Attendance at Work Policy provides framework to support sickness absence management	x	x				
SR 3.5	Organisational Development Advisor	All Executive Directors	Mandated manager training delivered locally	Х	X				
	team		Directorate and Divisional Assurance Dashboards provide key insights to be acted upon by line managers with advice and support from People & Organisational Development.	x	x	x			
SR 3.6	Wellbeing provision in support of	Director of People and Organisational	Employee Assistance Programme	X	Х				
JI 3.0	staff experiencing anxiety of change	Development	Occupational Health Provision	Х	Х				
			Minutes demonstrating directorate action plans monitored at Health & Safety Meetings	х	х				
			Staff wellbeing survey	Х	Х	Х	X		

Action Plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 3.1	No clear picture or process of measuring / controlling the amount of change planned across the wider organisation and the impact this has for People &OD	Work being undertaken by Strategic Planning and Performance teams will allow greater understanding of planned changes and its impact.	Deputy CEO and Director of Operations and Finance	30/09/2022	Update 07/09/2022 – Action completed.  Feasibility Report giving recommendations to Strategic BET on the 14 June 2022 followed up by monthly updates thereafter.  Workshop scheduled for August 2022 for enablers to discuss the future scoping and commissioning of change programmes.
		Oversight and informed decision making on proposed future change programmes	All Executive Directors	31/03/2023	Update 07/09/2022 - Workshops scheduled for September 2022 for enablers to discuss the future scoping and commissioning of change programmes
		Ensure the People & OD section of the IMTP fully reflects the change priorities for the period of the IMPT	Director of People and OD	31/03/2023	Due date reflects new planning cycle date
AP 3.2	Expertise and understanding of how to lead change, whilst minimising the negative impact on staff	Development and delivery of a 'Managing Change Effectively" programme, targeting People Managers) to increase their capability in change management skills in support of organisational change	Director of People and OD	31/03/2023	Linked to IMTPM_317
AP 3.3	Incomplete Directorate workforce plans	Develop and deliver training and support to build the skills of managers in planning, predicting and identifying workforce supply and demand. Includes roll out of Strategic Workforce Planning training and supporting resources from HEIW	Director of People and OD	30/09/2022	Update 07/09/2022 - Directorate Workforce Planning Sessions led by the Strategic Resourcing and Workforce Planning Manager are being scheduled with Directorates SMT's including Finance and People & OD Partner to initiate workforce planning activity
		Integration of change management requirements in Directorate and Divisional Workforce Plans	All Executive Directors	31/03/2023	IMTPM_320  Update 07/09/2022 - Linked to above action as well as LTS refresh work
AP 3.4	Lack of agreed organisation design principles and process for commissioning and resourcing of organisational change work	Develop an agreed approach to organisation design, commissioning and resourcing of organisational change work for subsequent implementation	Director of People and OD	31/03/2023	Update 07/09/2022 - Initial scoping meetings scheduled for September 2022  IMTPM_321

AP 3.5	Varied levels of staff engagement and involvement in change processes	Proactively involve staff in informal engagement and co-creation of change as an essential part of OCP activity for all new change initiatives	All Executive Directors	Ongoing	Update 07/09/2022 - In progress being developed initiative and initiative
AP 3.6	Varied levels of engagement with TU colleagues at national level	Continue to strengthen relationships with national TUs to improve the culture of partnership working in PHW	Director of People and OD	Ongoing	Update 07/09/2022 - In progress strengthening TU and POD working relationships in support of organisational change; building upon what has already started through dedicated Lead Change TU reps

Risk 4

There is a risk that we are unable to attract and retain the required professional workforce caused by skill shortages and increased pressures on staff, which has been exacerbated by the Covid-19 pandemic, resulting in there being insufficient capability and capacity to deliver our plans

	Sponsor and Assurance Group					
<b>Executive Sponsor</b>	Director of People and Organisational Development					
Assuring Group People and Organisational Development Committee						

	Inherent Risk								
Dat	te	11/05/22	Likelihood:	5	Impact:	5	Score:	25	

	Risk Score						Delivery Confidence Assessment
Curre	nt Risk		Tar	get risk			
Likelihood	Impact	15	Likelihood	Impact	۵	Treat	Amber
3	5	13	3	3	9		

DCA RAG	DCA Description
Green	High degree of confidence exists that the controls and actions identified will mitigate the risk to the required level.
	'
Amber	It is feasible that the controls and actions identified will mitigate the risk to the required
	level but issues remain outstanding that require addressing.
Red	There is little confidence that the controls and actions identified will mitigate the risk to
	the required level.

#### **Risk Owner's Overview Assessment Status**

The implementation of our People Strategy as well as our Strategic Equality Plan remain crucial to our ability to manage this strategic risk. With data insights taken from recruiting, leavers (exiting), movers (internal) and promotions, etc. there will be a continuous view of the current position.

Our divisional / directorate workforce plans must be robust ensuring we understand our current talent, i.e. those in place to deliver now and what our future internal talent looks like. Where future talent does not exist within the organisation, there will need to be strategies to ensure gaps do not open up and leave the organisation vulnerable to failing to deliver.

	EXISTING CO	ONTROLS		Level at which the Assurance is provided to						
No.	Control	Control Exec Owner SOURCES OF ASSURANCE		Team / Division / Project /Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board		
SR 4.1	People Strategy	Director of People and Organisational Development	Bi annual progress reports to BET and PODCOM			x	x			
CD 4.2	Directorate and Divisional		Workforce challenges and related workforce plans to address workforce issues are set out in IMTP narrative and workforce planning returns	х	х	х				
SR 4.2	Workforce Plans supported by P&OD BPs	All Execs	Regular reporting and review, e.g. quarterly, is encouraged via SMT/ DLT / directorate performance reviews	х	x					
			Annual update via IMTP cycle			X	X			
SR 4.3	My Contribution/ Career development and Performance Check-ins	All Execs	Quarterly and monthly organisational and directorate level reporting and Performance Assurance Dashboard		X	X	X			
	Directorate and Divisional		Directorate performance reviews	Х	Х					
SR 4.4	Assurance Dashboards providing	All Execs	Active use of recruitment data	X	X					
SR 4.4	key insights to be acted upon linked to workforce plans	All Exces	Analysis of Starter and Leaver data	x	x					

Action Plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress	
		Establish succession plans throughout the organisation for key roles	Director of People & OD	30/12/2022	Update 06/09/2022 - Last year's process has been critiqued and is currently undergoing further development. We are on track to meet the original target date.	
	•	Establish more detail of the workforce required to deliver our refreshed long-term strategic plan, including role mix, grade mix, skill mix, and placement of roles in the wider Public Health system	Director of People & OD	30/12/2022	Update 06/09/2022 - This data will be gathered as part of the workforce planning project. Dates are now in diaries for POD and Directorate leads to establish directorate workforce plan.	
AP 4.1	Develop robust workforce plans	Develop clear plans for addressing scarce and emerging skills in line with local and national shortage specialities and forecast gaps between skills supply and demand	Director of People & OD	31/03/2023	Update 06/06/2022 - The data derived from the workforce planning exercise will shape plans in this area. We are also strengthening links with HEIW to ensure we adopt a whole system approach.	
				Work with our partners to raise awareness of and widen access to careers in Public Health, e.g. through advanced apprenticeships or other nongraduate routes (to expand our supply of suitably experienced candidates and increase participation and progression from under-represented groups).	Director of People & OD	31/03/2023
		Increase the number of placements, secondments, honorary contracts and joint posts spanning organisation boundaries, increasing skills transfer in both directions	Director of People & OD	31/03/2022	<b>Update 06/09/2022 -</b> As above.	
AP 4.2	Ensure PHW's employment offer helps retain top performers and attract the best external talent.	Develop a compelling employee value proposition and employer brand for social media and recruitment advertising whilst ensuring the lived experience matches the promise.	Director of People & OD	31/03/2023	<b>Update 06/09/2022</b> - The tender process completed at the end of August and we have secured a partner to work with on this project.	

Risk 5

There is a risk that we will fail to exploit data to inform and direct public health action and interventions. This will be caused by data being held in silos, difficulty accessing the data and inability to access to provide the impact on public health. This will result in worse public health outcomes in Wales and increased information governance risk within Public Health Wales.

Sponsor and Assurance Group							
Executive Sponsor Executive National Director of Data, Knowledge and Research							
<b>Assuring Group</b>	Knowledge, Research and Information Committee						

Inherent Risk										
Date	25/11/2021	Likelihood:	5	Impact:	4	Score:	20			

Risk Score						Risk Decision	Delivery Confidence Assessment
Current Risk			Tar	get risk			
Likelihood	Impact	20	Likelihood	Impact	12	Treat	Amber
5	4	20	3	4	12		

#### 

#### Risk Owner's Overview Assessment Status

The directorate has gone through a period of change following the standing down from the COVID response, return of staff to substantive roles and returning to a steady state.

Successful delivery against the objective appears feasible, however, there are significant dependencies/actions, including:

- recruitment and onboarding of key hires,
- acquiring of new sills and ways of working,
- building of relationships to establish robust and ongoing collaboration within the directorate, across the organisation and wider partners to ensure we maximise the benefit across all data sources including surveillance, screening, non-communicable disease and wider determinants of health

KEY CONTROLS				Level at which the Assurance is provided to						
No.	Control	Exec Owner	SOURCES OF ASSURANCE	Team / Division / Project /Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board		
SR 5.1	Development of research & evaluation and digital & data strategies for Public Health Wales to take drive forward our needs on this area.	Director of Data, Knowledge and Research	KRIC on behalf of the Board			×	×	×		
SR 5.2	Developing our data storage, access and linking as part of the Local Data Resource and contributing/interacting with DHCW for other data needs in Health Care.	Director of Data, Knowledge and Research	Internal audit in Q3	×	×					
SR 5.3	Recruitment into new investment posts progressing quickly to bring in additional skills	Director of Data, Knowledge and Research	Management control	×	×	×				
SR 5.4	Ensure we maximise exploitation of our data and information	Director of Data, Knowledge and Research	KRIC on behalf of the Board	×	×	×	×	×		

Action Plan No.	Gaps in controls		Action Plan	Exec Director	Due Date	Progress
AP 5.1		To have all or place	ur data accessible through one	Director of Data, Knowledge and Research	31/10/2022	Band 9 x 2 Head of Data Science and Head of Data roles now in post.
AP 5.2		Develop a Pu dashboard	blic Health overview	Director of Data, Knowledge and Research	31/10/2022	Consultancy and project with Amarcuni completed April 2022.
AP 5.3		Recruitment skills and kno	of key personal to fill gaps in wledge	Director of Data, Knowledge and Research	31/10/2022	Investment supplied for the roles of: Data Engineer, User Centred designer, User
AP 5.4			agree a research and rategy and a digital and data	Director of Data, Knowledge and Research	31/10/2022	Centred Researcher, Principal Analyst, 2 Advanced Data Analysts, 2 Evaluators. All roles out to advert with interviews scheduled
AP 5.5		Move from d	iscovery phase into alpha betic eye screening and begin t service improvements	Director of Data, Knowledge and Research	31/10/2022	for W/C 19/09/2022.  User Centred Designer and User Centred Researcher with the specific objective of developing user personas. Head of Digital Experience now in post will participate in the hiring process.  DESW discovery completed April 2022 and now developing the approach for alpha. Spending plans submitted for consideration to fund Alpha.
AP 5.6			discovery phase into a single on-communicable and le diseases	Director of Data, Knowledge and Research	31/03/2023	Just starting to scope the work and approach. Workshops now in progress.
	Assurance for maximising		arch and evaluation strategy	Director of Data, Knowledge and Research	28/02/2023	Research & evaluation strategy being presented at KRIC on 21/09/2022
AP 5.7	exploitation of our data and information	Five data scie	ences projects to be agreed	Director of Data, Knowledge and Research	30/09/2022	Currently a long list of 10 projects being considered.