

Strategic Risk Register

Risk 4 There is a risk of weakness in our organisational health, including our culture, capacity, capabilities and governance. *Caused by* sub-optimal leadership, management and engagement and the impacts of the Covid-19 Public Inquiry. *Resulting in* low staff wellbeing and morale, failure to recruit and retain our staff and ineffective performance across one or more of our strategic priorities.

Risk Owner's Overview Assessment Status

The organisation is implementing QOS incorporating governance system mapping and controls and has actions in place to mitigate the risk and close the gaps in assurance.

POD have clear actions in the IMTP which relate directly to this risk, i.e., Work to understand current v desired culture, launching and embedding our 'Being Our Best' framework and a road map to deliver the people promise. Workforce planning is also part of the IMTP deliverables and a critical component in addressing this risk.

Collaborative working between Planning, POD and Communication functions will contribute to improved methods to launch, land and embed related products/messaging. A (pilot) Leadership and Management Development Academy has also been launched, which together with the actions outlined in this plan, will support improved leadership, Management and engagement.

Our Board and Committees are constituted in accordance with our Standing Orders and Scheme of Delegations. The functions of the Board are delivered in line with the Board Etiquette Protocol with external assurance from Audit Wales on performance. There is a robust and dynamic wellbeing provision in place designed to respond to the needs of all staff including those impacted by the Covid-19 Public Inquiry.

Sponsor and Assurance Group

Executive Sponsor	Neil Lewis, Director of People and OD Contributors: John Boulton, Director for NHS Quality Improvement and Patient Safety Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals Huw George, Deputy Chief Executive and Exec Dir Ops and Finance Paul Veysey, Board Secretary and Head of Board Business Unit
Assurance Group	People and Organisational Development Committee

Inherent Risk

Date	16/5/23	Likelihood:	5	Impact:	5	Score:	25
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Risk Score			Risk Decision			Delivery Confidence Assessment
Current Risk		16	Target Risk		6	AMBER
Likelihood	Impact		Likelihood	Impact		
4	4	3	2	Treat		

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EXISTING CONTROLS			SOURCES OF ASSURANCE	Level at which the Assurance is provided to				
No.	Control	Exec Owner		Team / Division / Project / Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board
SR 4.1	Compliance with Information Governance policy and supporting procedures	Executive Director of Quality and Nursing	IG performance report			X		
			Information Governance toolkit			X		
			Information Governance Group assurance to Audit and Corporate Governance Committee			X		
			Information Asset Register			X		
SR 4.2	Compliance with Risk Management policy, procedure and other written control documents (protocol)	Executive Director of Quality and Nursing	Assurance reports on Strategic Risks					X
			Strategic Risk Register and Corporate Risk Register reports to Board				X	X
SR 4.3	Planned People and OD Committee Meetings to review progress v plan (including dashboard data on workforce trends) and consider emerging threats	Neil Lewis, Director of People & OD	PODCOM Minutes from meetings				X	
SR 4.4	Refreshed Long Term	Deputy Chief Executive and Exec Dir Ops and Finance	IMTP Reporting process			X		
SR 4.5	People Strategy and IMTP	Neil Lewis, Director of People & OD	Reporting against IMTP Milestones			X		
SR 4.6	Compliance with Standing Orders, Scheme of Delegation and Board Etiquette Protocol	Paul Veysey, Board Secretary and Head of the Board Business Unit	Internal Audit Audit Wales Annual Accountability Reporting to Welsh Government					X X X
SR 4.7	Ongoing review and development of a wellbeing provision which meets the needs of all staff including those affected by the Covid-19 Public Inquiry	Neil Lewis, Director of People & OD	Strategic Risk Register Staff Survey		x	x	x	x

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Action plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 4.1	Organisational-wide Records Management System	Design and implement Records Management System across organisation	Executive Director of Quality and Nursing	March 2025	December 2023: On target
		Approved Records Management policies and procedures	Executive Director of Quality and Nursing	December 2023 March 2023	December 2023: Consultation process has concluded and policy and procedure are progressing through the approval process. Amend due date to 30/03/24.
AP 4.2	Standardised approach to Governance and Quality Management	Implement Quality as an Organisational Strategy	Director for NHS Quality Improvement and Patient Safety	August 2024	December 2023: On target. Work is progressing to integrate the principles of QOS into work already underway in PHW following a review of the implementation approach in the Summer. Examples include integration into the IMTP planning process; integration with the work on organisational design principles; alignment with work following the culture survey; support to the stage 2 project to iterate the PAD; and support from the I&I hub to tier 1-3 projects as required. A workshop to further develop our macro and meso system maps has progressed this work and a series of further support sessions will be rolled out in January. The workshop also provided an opportunity to

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					bring together all the QOS leadership activities we have been working on to begin viewing as a Quality Management System. A joint BET/LT SBET to share progress & next steps is planned for February 2024.
		Implement year 2 of Integrated Governance implementation plan	Executive Director of Quality and Nursing	March 2024	December 2023 On target
AP 4.3	A co designed / developed high- level plan which will deliver desired culture	Establish a high-level plan which will deliver desired culture (to include communication and engagement aspects)	Neil Lewis -Director People and OD	March 2024	October 2023 Directorate briefings not yet complete and this has been raised as an issue by Trade Unions. New Executive Directors have recently taken up post, which has meant conclusion of this work has taken longer than anticipated. Revise due date to March 2024. December 2023 Work is ongoing across directorates to close the culture gap, organisation and directorate levers are being worked through and the Executive Team are meeting on 24 January 2024 to agree next steps. Engagement plan for 2024/25 and the cycle of activity is being discussed at the newly formed Leadership Forum on 18 January 2024 and the plan will be further refined. Culture advocates are also being trained across

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					the organisation to support this work.
		Develop KPIs to measure how well Managers are engaging their direct reports and use these as part of regular 1-1 reviews	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date at risk of delay due to dependency on AP4.5</p> <p>December 2023 Work ongoing in this area and KPI's development progressing.</p>
AP 4.5	A strategic and systemic approach to employee engagement	Development of a strategic and systemic approach to employee engagement	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date at risk of delay due to dependency on AP4.5</p> <p>December 2023 Linked to AP4.3 and employee engagement is aligned to our culture work.</p>
		Systematic reviews of Staff survey responses and delivery of action plans	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date moved forward 3 months due to staff survey results not being scheduled to be received until 31/01/2024</p> <p>December 2023 NHS Wales Staff Survey outputs are due 31 January 2024, the results will complement the Culture Survey by giving greater detail on specific actions we can take against some of the causal factors (both organisationally and at directorate level).</p>

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<p>AP 4.6</p>	<p>Ownership of organisation wide Workforce Planning process to ensure delivery of capacity and capability risks addresses</p>	<p>Directorates to commit to Workforce Planning process and take action to close workforce risks</p>	<p>Neil Lewis -Director People and OD</p>	<p>March 2024</p>	<p>November 2023 Critical roles have been identified. Resourcing plans required to support the building of pipelines will in place until 31/3/24</p> <p>December 2023 On Target to meet 31/3/24 deadline</p>
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