

Risk Identifier					Risk Description			Risk Scoring				Risk Action Plan																											
Risk ID	Domain	Date added	Lead Executive	Directorate (if applicable)	Risk Description (There is a risk that...)	Cause (This will be caused by...)	Effect (The impact will be...)	Inherent Risk			Current Risk				Risk Decision	Action Plan	Status of Action	Target Risk																					
								Likelihood	Impact	Risk level	Likelihood	Impact	Risk level	Trend				Likelihood	Impact	Risk level																			
207	Quality	04/10/2021	Director for NHS Quality Improvement and Patient Safety, Improvement Cymru	Corporate	There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020)	This will be caused by competing priorities, a lack of organisational capacity and capability to support timely implementation	The impact will be noncompliance with the legislative requirements, and a lack of progress in strengthening quality improvement and governance in the delivery of safe services, programmes and functions.	4	4	16	1. Innovation and Improvement Hub creating a culture of improving and innovating for quality within the organisation 2. Commissioned an external provider to support PHW in implementation of the Quality as an Organisational Strategy methodology 3. Establishment of SRO Group for the Duty of Quality to prepare for and support the implementation of the Duty across PHW 4. Implementation plan for PHW with identified leads for each theme 5. Executive representation (Exec Dir of QNAHP's) on the WG Duty of Qualities and Candour Implementation Board 6. Senior representation on the WG Duty of Quality Implementation Group 7. Quarterly reporting to BET and QSIC 8. Highlight Reports presented to WG Board 9. Welsh Government issued minimum requirements as an implementation roadmap 10. Continued involvement in revising guidance and developing education materials 11. Developed coaching support to be provided by I&I Hub for improvement projects	4	4	16	→	Treat	Reporting and information - mechanism and publication schedule / plan in place for sharing DoQ progress information externally	In progress																					
																	Reporting and information - Quality-related information escalation mechanisms in place, with plans for review and consideration at appropriate level	In progress																					
																	Reporting and information: report compiled in March 2024 in accordance with PHW governance process	In progress																					
																	Commissioning: All commissioning arrangements incorporate DoQ requirements	In progress																					
																	Hosting arrangements: All hosting arrangements incorporate DoQ requirements	In progress																					
																	Quality Standards: A clear understanding of changes required to existing quality infrastructure and agreed programme of work to align with Quality Standards 2023	In progress																					
																	Quality Standards: Quality infrastructure clearly aligned to Quality Standards 2023	In progress																					
																	Quality Standards: Routinely monitored, system-wide understanding of what good quality looks like for the broad range of services.	In progress																					
																	Quality Management System (General) - Quality Management System road map agreed and implemented	In progress																					
																	Governance and accountability structures - Board are assured that DoQ is being considered across system	In progress																					
Governance and accountability structures - routine governance documentation is DoQ-ready	In progress																																						
Training and education - All staff trained to determined appropriate level	In progress																																						
New	Operational	26/10/2023	Director of People and Organisational Development	People and Organisation Development	There is a risk that the organisation may not have the capacity or resources necessary to effectively deliver the long-term strategic plan.	This risk arises from a challenging political and financial landscape, which includes staff time being redirected to contribute to the (Covid) public enquiry and an unstable industrial relations climate.	Inability to deliver the long term strategy due to absence of strategic workforce planning.	4	4	16	1. Resource Allocation and Assessment: Assess current resource allocation. Identify gaps between the required resources and what is currently available. Ensure alignment between strategic goals and resource allocation. Adjust resource distribution, as necessary. 2. Capacity Building: Continue to Invest in developing the skills and capabilities of existing staff to handle the strategic plan's demands. 3. Prioritization and Phasing: Evaluate the strategic plan and identify high-priority initiatives. Consider phasing the plan to allow for a gradual rollout, focusing on crucial elements first and postponing or deprioritising less critical components. 4. Scenario Planning: Develop scenarios that account for different levels of resource availability. This will help us be prepared for various resource-related challenges and allow for quick adaptation as circumstances change. 5. Resource Bank: Better utilisation of finances through use of the new Resource Bank to replace agency use and overtime.	3	4	12	Treat	Workforce Planning provide a holistic view of our current critical roles with clear plans that include solutions and interventions that will support the delivery of our priorities. Establish a clear vision outlining the function of job families within PHW and their role in supporting critical elements of the People Strategy. Newly appointed Strategic Workforce Planning Lead to work with Directorates and wider POD team to support the development of local workforce plans. Develop an overarching workforce plan which support us to have the right number of roles with the right skills to support effectively delivery of the long terms strategy and people strategy ambitions, ensuring metrics are in place to measure progress.		2	4	8																			
																Work with internal and external stakeholders to create an organisational approach to recruitment and selection that supports the ambition outlined in the People Strategy and supports delivery of the long-term strategy.																							
																Process Improvement work prioritised																							
																Continue on development of ideal organisational culture including our People Promise (Employee Value Proposition).																							
																Planning and response to any industrial action supported through our organisational architecture for emergency planning and business continuity, informed by national guidance and support from NHS Wales Employers, to ensure service continuity.																							
																1541	Patients & Clients				06/07/2023	Director of People and Organisational Development	People and Organisation Development	There is a safeguarding risk that organizational DBS checks do not prevent unsuitable people from working with vulnerable groups, including children, therefore placing them at risk of harm, abuse and neglect.	DBS checks on individuals are performed on the commencement of employment in PHW and are not renewed thereafter. Employees may not have an appropriate level of DBS check for their role or activity within PHW.	This could mean that vulnerable people accessing and receiving PHW services, may be cared for by an employee or volunteer whom is deemed unsuitable by the DBS to work with vulnerable groups.	4	3	12	A Training session has been delivered by the DBS regional advisor to recruiting managers. An Algorithm has been developed for recruiting managers to utilise when making staff appointments to ensure that the appropriate level of DBS is requested on appointing staff. Training videos have been developed and advertised on POD's SharePoint. The risk has been discussed at the All Wales Safeguarding Network and will be escalated to Welsh Government to establish the National Picture with regards to the frequency of DBS renewals at an All Wales level.	2	3	6	Tolerate	A DBS audit is to be completed to review the level of DBS check assigned to position numbers in ESR to ensure the correct level of check is undertaken based on current guidance and best practice. The results of the audit will be shared with the safeguarding group and an associated action plan if required post audit	Completed	1	3	3