

Name of Meeting Quality, Safety and Improvement Committee Date of Meeting 16 May 2023 Agenda item: 4.2

	Managing Risk				
Executive lead:	Rhiannon Beaumont-Wood, Executive Director of				
	Quality, Nursing and Allied Health Professionals				
Author:	Eleanor Higgins, Integrated Governance Manager				
Approval/Scrutiny route:	Business Executive Team				

#### Purpose

Receive the strategic and corporate risks for the purpose of scrutiny and challenge within the Committee's remit.

Recommenda	ation:			
APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
	$\boxtimes$			$\boxtimes$
Recommenda	ation			

The Quality, Safety and Improvement Committee is asked to:

- **Consider** the Strategic and Corporate Risk Register that have relevance to the Committee's remit
- **Take assurance** that the organisation's Strategic and Corporate risks are being managed appropriately

Date: 26 April 2023 Version: 1.0 Page: 1 of 11
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# Link to Public Health Wales Strategic Plan

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities.

This report contributes to all Strategic Priorities

Strategic Priority	Choose an item.
Strategic Priority	Choose an item.

# Summary impact analysis

Equality and Health	No decision is required.
Impact Assessment	
Risk and Assurance	This submission is the relevant strategic and
	corporate risks.
Health and Care	This report supports and/or takes into
Standards	account the Health and Care Standards for
	NHS Wales Quality Themes
	Governance, Leadership and
	Accountability
Financial implications	The financial implications of failing to manage
_	corporate risk effectively are significant, both
	in terms of the potential for loss and also the
	failure to capitalise on opportunities.
People implications	No people implications.

Date: 26 April 2023 <b>Version:</b> 1.0 <b>Page:</b> 2 of 11
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### 1. Purpose / situation

This paper presents the strategic and corporate risks that have relevance to the remit of the Quality, Safety and Improvement Committee.

The paper seeks approval of any changes since the Committee last reviewed the risk(s) and confirmation that the Committee is assured that the risk(s) are being managed appropriately.

The Strategic Risk Register details the highest level risks that could prevent the organisation from delivering on its strategic priorities.

The Corporate Risk Register details the highest level operational risks that are being managed on a day-to-day basis by Executive Directors.

The QSIC Committee will be aware that the Board approved new headline risk descriptors on 30 March 2023. The full refreshed Strategic Risk Register will be submitted to the Board on 25 May 2023 for consideration. The 2022/23 Strategic and Corporate Risks remain current pending approval of the refreshed Strategic Risks

#### 2. Delivery Confidence Assessment

All strategic risks carry a delivery confidence assessment assigned by the Executive Sponsor. The table below demonstrates the RAG status.

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

### 3. Risk Appetite

The strategic themes have been assessed with a risk appetite being approved for each. All strategic and corporate risks have been assessed against the risk appetite. The table below demonstrates the risk appetite by strategic theme.

Strategic Theme	Appetite Descriptor
Enabling better population health and reducing health inequalities through preventative and sustainable measures	Willing
Delivering excellent services for population screening	Cautious
programmes, health protection and infection	

Date: 26 April 2023	<b>Version:</b> 1.0	Page: 3 of 11	
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Supporting improvements in the quality and safety of health and care services	Keen
Maximising the use of digital, data and evidence to improve population health	Willing
Enabling the successful delivery of the plan	Willing

### 4. Strategic Risks

The Strategic Risk Register is the vehicle through which the Board takes assurance that it has a clear understanding of the strategic risks facing the organisation in the delivery of its strategic objectives, together with the severity and the impacts if the risks are realised.

Public Health Wales has six strategic risks with two risks sitting within the remit of this Committee. An overview of changes made since they were last reviewed by the Committee is provided below, with the full risks detailed at Appendix 1.

### 4.1. Risk 1

Following the revisions to the Long Term Strategy, the Executive Sponsor is confident that the current and emerging threats have been considered and incorporated into the Long Term Strategy. The risk continues to be monitored and tolerated and we remain alert to any new emerging threats.

<b>Risk Description</b>	n					
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, socio-economic and health threats, resulting in an inability to tackle the population health challenges in a sustainable way.						
Risk Appetite			Proposa removal	l for de-e *	scalation	or
Willing Not Applicable						
<b>Risk Scoring</b>	Score at	last Com	nittee	Present	Score	
Inherent	4	4	16	4	4	16
Current	3	4	12	3	4	12
Target	3	4	12	3	4	12
DCA at last Committee Present Live DCA						
Amber Amber						
Executive Sponsor Insight						
Ministerial approval of the Board approved IMTP was received.						
The organisation is managing the risk by continuing to monitor the impact of the IMTP to respond to potential emerging geopolitical, socio-economic and						

Date: 26 April 2023 Version: 1.0 Page: 4 of 11

health threats. The development and implementation of a key data dashboard to monitor the health of the nation provides information to inform any new or additional interventions to respond to emerging health and wellbeing needs. We are committed to developing a public health approach to the cost of living crisis through a coordinated approach across the organisation and considering how we best support our own staff. Actions remain on track with updates provided to reflect the development of the Long Term Strategy and senior Public Health Wales representation on Expert Panel reporting to Cabinet and IANPHI in relation to the conflict in Ukraine.

	<b>Inges to controls/actions</b> ed in full risk which can be found in Appendix 1.
Controls	No changes.
Actions	Actions remain on track with update provided to reflect the development of the Long Term Strategy and its implementation for the first three years captured within the IMTP. A wide range of population health activities, mitigating actions and consideration of threats continue to be considered through four nations' connections and international horizon scanning with WHOCC and IANPHI relations.
Opportunities	None identified
Committee consideration of this risk / links to the workplan	<ul> <li>The Committee last considered this risk in February 2023.</li> <li>The Committee were advised that the assurance statement on Strategic Risk 1 remained accurate.</li> <li>The Committee were assured that the risk continued to be managed as part of the Organisation's longer term strategy development.</li> <li>Other recent consideration at Board / Committee level relevant to this risk:</li> <li>The Long Term Strategy was approved at the Board meeting in March 2023.</li> </ul>

# 4.2. Risk 2

The Delivery Confidence Assessment for this risk remains green with the delivery of excellent services continuing to be an overarching priority. Risk reviewed in divisions and was approved via March Directorate Management Team.

Date: 26 April 2023	Version: 1.0	<b>Page:</b> 5 of 11
Date: 20 April 2025		Page. J 01 11

#### **Risk Description**

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.

Risk Appetite			Proposal for de-escalation or removal*			
Willing			Not Appli	cable		
Risk Scoring	Score at	last Com	nittee	Present	Score	
Inherent	3	3	9	3	3	9
Current	3	3	9	3	3	9
Target	3	2	6	3	2	6
DCA at last Com	mittee		Present	Live DCA		
Green				Gre	en	
<b>Executive Spons</b>	sor Insigh	t				

The current DCA remains stable, and the directorate continues to hold the delivery of excellent services as the overarching priority, in line with the development of the refreshed long-term strategy for the organisation. Both incremental continuous improvement and some service transformation initiatives continue against a backdrop of significant strategic and operational demands. The development of new screening programmes will place further demand on the specialist workforce.

	anges to controls/actions ed in full risk which can be found in Appendix 1.
Controls	No changes.
Actions	Actions have been reviewed and updated via March DMT – now running into the 2023 / 24 planning year.
Opportunities	In addition to utilising the forecast underspend in the Directorate to expedite elements of service transformation; the Directorate has leveraged the opportunity presented by the refresh of the LTS to strengthen and articulate a compelling narrative and agreed understanding of excellent services for population screening, health protection and infection. This was agreed and shared in December 2022
Committee consideration of this risk / links to the workplan	<ul> <li>The Committee last considered this Risk in detail in February 2023.</li> <li>The Committee was assured that the risk assessment remained stable, with a continued focus on improvement and transformation.</li> </ul>

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# 4.3. Corporate Risk Register

The Corporate Risk Register has six corporate risks which were approved at Business Executive Team. During this reporting period one risk has been removed and one new risk has been identified. There are now four risks that have relevance to the remit of the Quality, Safety and Improvement Committee. An assessment of each of the risks by the respective risk owner is shown below. The full risks have been detailed at Appendix 2.

An additional column has been added to the Corporate Risk Register in response to an assessment by Audit Wales. This additional column details the responsible Committee delegated to scrutinise the corporate risks on behalf on the Board.

# 4.4. Risk 203

Current risk remains unchanged. Risk reviewed in division and approved via March Directorate Management Team. A number of significant changes to the actions are planned including an IT upgrade, outsourcing of letter printing and funding for specialist expertise, all of which are likely to have a positive impact on the status of the risk. These activities have been delayed.

<b>Risk Description</b>							
DESW is unable to	o provide a	n accurate	and qualit	y-assured	programn	ne to the	
diabetic populatio	n of Wales	, and to tra	insform the	e service t	o provide	a quality-	
assured program	ne for the	increasing	diabetic po	pulation.	·	. ,	
Risk Appetite			1	•	scalation	or	
			removal				
Cautious			Not appli	cable			
Risk Scoring	Score at	last Comr		Present	Score		
Inherent	5	4	20	5	4	20	
Current	5	4	20	5	4	20	
Target	3	4	12	3	4	12	
Overview of cha	nges to c	ontrols/a	ctions	-			
(text marked in re	_	=		d in Appen	dix 2.		
Controls	No changes.						
	J						
Actions	Progress	has been m	nade for so	me eleme	nts of the	actions	
	-	s have bee					
		sues with a					
Opportunities					e Director	ate	
	Exploiting the opportunity provided by the Directorate underspend.						
Committee							
consideration		o this risk:			, comm		
of this risk /							
links to the							
workplan							

Date: 26 April 2023	<b>Version:</b> 1.0	<b>Page:</b> 7 of 11
Dute: 20 April 2025		I agei / OF II

Knowledge, Research and Improvement Committee received							
a Deep	Dive	into	Equality	which	included	reference	to
Diabetic	Eye S	creen	ing Servic	e Wale	s.		

# 4.5. Risk 207

Likelihood of risk reduced from 5 to 4, thereby reducing overall risk to 16. Monthly preparedness highlight reports are being provided to the all Wales Duty of Quality and Candour Implementation Board, showing everything is currently on track for Public Health Wales. Quality as an Organisational Strategy implementation is in progress. The Clinical Governance Framework under development, following a further workshop in March, is due to be presented at QSIC in July 2023. Once approved, this should provide an additional control which can form part of the assurance arrangements for Duty of Quality and Candour.

<b>Risk Description</b>						
There is a risk that	t Public He	alth Wales	will fail to	meet the	requireme	ents of
The Health and So	ocial Care (	Quality an	d Engagem	nent) (Wal	es) Act (20	020).
<b>Risk Appetite</b>						
			removal	*		
Willing			Not appli	cable		
Risk Scoring	Score at	last Comr	nittee	Present	Score	
Inherent	5	4	20	5	4	20
Current	5	4	20	4	4	16
Target	3	4	12	3	4	12
<b>Overview of cha</b>	nges to c	ontrols/a	ctions			
(text marked in re	ed in full ris	sk, which c	an be foun	id in Apper	ndix 2.	
Controls	An additio	nal contro	l has been	implement	ted by the	Duty of
	Candour I	mplement	ation Grou	p being se	t up	
Actions	Progress f	<sup>f</sup> or a numb	er of actio	ns has bee	n achieve	d
	including	PHW's resp	onse to th	e Welsh G	overnmen	t draft
		on docume		,		
	_	sational pr		•		
	Candour i	s in place a	and on trac	ck. A Duty	of Candou	ır
		tation grou				
Opportunities	Contributi	on to Wels	h Risk Poo	l Network	and Subgr	oups
	and influencing the materials produced.					
Committee	The Committee has regular updates for assurance					
consideration	programmed into the work plan on Health and Social Care					
of this risk /	(Quality a	nd Engage	ment) (Wa	ales) Act (2	2020).	
links to the						
workplan		pdate for t			•	•
	where the	<u>e Committe</u>	e took ass	urance fro	<u>m the upd</u>	ate and

Date: 26 April 2023	<b>Version:</b> 1.0	Page: 8 of 11

progress of implementation of the Duty of Quality within Public Health Wales.
A further update is scheduled for the May 23 meeting.
Other recent consideration at Board / Committee level relevant to this risk: N/A

# 4.6. Risk 208

Current risk remains unchanged. Risk reviewed in division and approved via March Directorate Management Team.

<b>Risk Description</b>	1						
There is a risk that	it Health Pi	otection a	nd Screeni	ng Service	s will not l	be able	
to deliver high qu	ality servic	es in North	n Wales Inf	ection Divi	ision as th	ey are	
struggling to recru	uit and reta	ain sufficier	nt medical	and clinica	l staff.		
<b>Risk Appetite</b>			Proposa	l for de-e	scalation	or	
	removal*						
Cautious			Not appli	<u>cable</u>			
Risk Scoring	Score at	last Com	nittee	Present	Score		
Inherent	4	4	16	4	4	16	
Current	4	4	16	4	4	16	
Target	2	2	4	2	2	4	
<b>Overview of cha</b>							
(text marked in re	ed in full ris	sk which ca	an be found	d in Appen	dix 2.		
Controls	No change	es.					
Actions	Progress	nas been p	rovided wł	nich indicat	that act	ivities	
			bruary - B				
		supported recommendations. The division is continuing with					
	blended s	ervice deliv	very and re	ecruitment	strategy.		
Opportunities	None ider	None identified					
opportunities	None identified.						
Committee	Committee received comprehensive update at the February						
consideration	2023 meeting, which related to challenges facing the						
of this risk /	delivery of clinical infection services in North Wales.						
links to the							
workplan		The Committee considered:					
			the work of			,	
	_	•	onged use				
			here had n			,	
	furt	her, one d	of the age	ncy staff e	employed	had been	

Date: 26 April 2023	<b>Version:</b> 1.0	Page: 9 of 11	

# 4.7. Risk 303

Current risk remains unchanged. Risk reviewed in division(s) and approved via March Directorate Management Team and noted that ability to mitigate lies outside of organisational control. Risk description has been further refined since Committee last received this risk.

#### **Risk Description**

There is a risk that the LINC process will not allow us to develop a product that meets our needs and is an improvement on the system currently in place. There is also a chance that the LINC programme will not be able to deliver and a Plan B will need to be put in place.

This is a risk for both screening and microbiology.

			-	Proposal for de-escalation or removal*			
Cautious	Not applicable						
Risk Scoring	Score at	last Comr	nittee	Present Score			
Inherent	3	4	12	3	4	12	
Current	5	4	20	5	4	20	
Target	3	2	6	3	2	6	
<b>Overview of changes to controls/actions</b> (text marked in red in full risk which can be found in Appendix 2.							

Date: 26 April 2023         Version: 1.0         Page: 10 of 11
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Controls	HPSS Directorate meeting identifies and escalates issues to
controis	5
	LINC Programme Board. DHCW have procured, developed
	and implemented a LIMS.
Actions	Communication with LINC colleagues and at screening LDP.
	Issues and risks documented and escalated within LINC and
	to DLT. Complete tasks assigned to us and engage with the
	process.
Opportunities	None identified
Committee	Committee first received this risk at the meeting in
consideration	February 2023.
of this risk /	
links to the	
workplan	

### 5. Additional Considerations

The following section details any additional considerations for this Committee.

#### 5.1. New Risks

There are no new risks identified for consideration during this reporting period.

#### 5.2. Risks proposed to the escalated or de-escalated

There are no risks proposed to the escalated or de-escalated during this reporting period.

#### 6. Well-being of Future Generations (Wales) Act 2015

No decision required.

#### Recommendation

The Committee is asked to:

- **Consider** the Strategic and Corporate Risk Register that have relevance to the Committee's remit
- **Take assurance** that the organisation's Strategic and Corporate risks are being managed appropriately

Date: 26 April 2023 Version: 1.0 Page: 11 of 11
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