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Iechyd Cyhoeddus
Cymru
Public Health
Wales

Name of Meeting

Board

Date of Meeting

25 July 2019

Agenda item:

9.1.250719

Board Assurance Framework

Executive lead:	Tracey Cooper, Chief Executive
Author:	Helen Bushell, Board Secretary and Head of Board Business Unit (cover paper) John Lawson, Chief Risk Officer (Board Assurance Framework)

Approval/Scrutiny route:	Business Executive Team – 15 July 2019
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Purpose
The purpose of this report is to provide the Board with an update regarding any significant changes to the strategic risks contained in the Board Assurance Framework (BAF) (that could prevent the delivery of one or more strategic priorities) and action being taken to manage those risks.

Recommendation:				
APPROVE <input checked="" type="checkbox"/>	CONSIDER <input checked="" type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input type="checkbox"/>

The Board is asked to:
<ul style="list-style-type: none"> • Consider the Board Assurance Framework (BAF) and note the updates provided since the Board meeting held on 30 May 2019; • Note the updates provided; and • Approve the revised “due dates”.

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 of the Strategic Priorities

Summary impact analysis

Equality and Health Impact Assessment	No decision is required
Risk and Assurance	This is the Board Assurance Framework
Health and Care Standard	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Governance, Leadership and Accountability
Financial implications	No financial implications
People implications	No people implications

1. Purpose / situation

The purpose of this report is to provide the Board with an update regarding any significant changes to the strategic risks contained in the Board Assurance Framework (BAF) (that could prevent the delivery of one or more strategic priorities) and action being taken to manage those risks. The BAF is attached at **Appendix 1**.

2. Background

The Board Assurance Framework (BAF) describes how Public Health Wales is provided with assurances on the delivery of its core purpose of “working to achieve a healthier future for Wales” supported by its seven strategic priorities outlined within the Integrated Medium Plan 2018/19 – 2020/21, and through robust risk management processes. The organisation’s seven strategic priorities are:

Number	Strategic Priority
1	Influencing the wider determinants of health
2	Improving mental wellbeing and building resilience
3	Promoting healthy behaviours
4	Securing a healthy future for the next generation through a focus on early years

5	Protecting the public from infection and environmental threats to health
6	Supporting the development of a sustainable health and care system focused on prevention and early intervention
7	Building and mobilising knowledge and skills to improve health and wellbeing across Wales

The BAF supports the Annual Accountability Report, which includes the Annual Governance Statement (AGS). The term "BAF" has been used with in NHS settings for a number of years. For the purpose of clarity, this document provides the overall narrative description of the system of assurance operating within the Trust.

The BAF is designed to support the Board in the delivery of its Strategy as outlined with its 3 year Integrated Medium Term Plan (IMTP). The IMTP is underpinned by an annual Operational Plan, which provides more detail on the strategic objectives for the year. The BAF also serves to inform the Board of the strategic risks threatening the delivery of the organisations' objectives. The BAF aligns strategic risks, key controls, the risk appetite and assurance on controls alongside each priority. Gaps are identified where key controls are insufficient to mitigate the risk of non-delivery of objectives. This enables the Board to develop and monitor action plans intended to close the gap.

3. Description/Assessment

The BAF attached to this report (Appendix 1) incorporates all updates provided up to and including 12 July 2019. As part of the routine Business Executive Team agenda, the Executive Team considered the risks and significant issues at their meeting on 15 July 2019.

The Boards attention is drawn to the updates provided within the appendix which are summarised below.

Risk	Risk Description	Executive Sponsor	Action	Progress Update
Risk 1	There is a risk that Public Health Wales will find itself without the workforce it requires to deliver on its strategic objectives. This would be caused by a lack of staff with the relevant skills and / or cultural fit in the external market / education system, internally due to a lack of staff skills and behaviour development, career mobility and succession planning and talent management, or due to undesirable employee attrition.	Director of People and Organisational Development		All actions are marked green and on track for target completion dates
Risk 2	There is a risk that Public Health Wales will cause significant harm to a patient, service user or staff member. This will be caused by misdiagnoses or incorrect identification of serious health conditions, the provision of inappropriate clinical advice or the failure of staff to follow correct procedures.	Executive Director Quality, Nursing and Allied Health Professionals		All actions are marked green and on track for target completion dates. Some actions have been revised / replaced and therefore new dates have been added where appropriate. The Board is asked to review this risk as a whole.

Risk 3	There is a risk that Public Health Wales will fail to deliver a sustainable, high quality and effective infection and screening services. This will be caused by a lack of sufficient workforce capacity; over-reliance on existing systems/procedures, lack of sufficient change capacity and an estate and infrastructure which is not fit for purpose.	Executive Director Public Health Services and Medical Director	3.1 Delivery of the Microbiology Stabilisation Plan	The Board is asked to note the update provided. To allow for this review and the ongoing work to stabilise Microbiology Services, it is requested that the Board approve an extension to this action due date to October 2019.
			3.6 Implementation of Cervical Screening Information Management System (CSIMS)	Considerable delay was initially experienced in obtaining essential demographic information to enable development to start. This prevented progress to original timescales. There has also been turnover of contractors which has added to delay. The first stage of development and testing by users has been completed in March 2019 and was positive. It has recently been identified that progress of development is not in line with initial timescales and IT are now advising that the development will not be ready to implement by September 2019.

				<p>Every effort is being spent to establish the development team capacity to inform a revised project plan, however initial estimations suggest a new implementation date will be in 2020. Activities to establish an accurate plan is being supported by the Trusts' Programme Management Unit.</p> <p>It should be noted the importance of the system being fit for purpose and the development of this first system enables the development of a significant portions of the "core" screening functionality for the IT system which are planned to follow this development for other screening programmes.</p> <p>Note: a new due for this action will be determined following the completion of an urgent review of the project.</p>
Risk 4	There is a risk that Public Health Wales will suffer a major IT security breach resulting in a failure in	Deputy Chief Executive, Executive Director Operations and Finance	Assuring Group	Some actions have been revised / replaced and therefore new dates

	<p>service delivery and/or loss of personal data. This will be caused by a cyber-attack made with malicious intent either directly against Public Health Wales or if we suffer collateral damage from a wider ranging cyber-attack.</p>			<p>have been added where appropriate.</p> <p>The Board is asked to review this risk as a whole following a significant update.</p> <p>The Board is also asked to note that Knowledge, Research and Information were asked to consider the updated risk on the 24 July, a verbal update can be provided during the Board meeting.</p>
Risk 5	<p>There is a risk that Public Health Wales will fail to effectively influence stakeholders and support others to deliver the population health gains required to achieve its purpose. This will be caused by an insufficient investment and delivery of support by our key stakeholders including to the people of Wales, Welsh Government, NHS Wales, PSBs and the Third Sector.</p>	<p>Interim Executive Director Health and Wellbeing</p>	<p>5.3 Subject to a realignment of resources, invest in people to co-produce, maintain and evaluate content for the effective delivery of timely and appropriate information to the public.</p>	<p>The Board is asked to note the update and the ongoing date.</p>
			<p>5.10 Agree and establish a process to take forward the recommendations in the Long Term Conditions – Investment in Prevention paper agreed by NHS Chief Executives and Chairs</p>	<p>The Board is asked to note the update.</p> <p>It is requested that the Board approve an extension to this action due date to September 2019.</p>

			5.12 Subject to identification of new resource, increase support to third sector organisations through the co-design and delivery of the PHW Communities Programme.	The Board is asked to note the update. It is requested that the Board approve an extension to this action due date to September 2019.
Risk 6	There is a risk that Public Health Wales will fail to secure and align resources to deliver on its strategic priorities. This will be caused by funding cuts or inability to make required savings, generate income or move resources within the organisation	Deputy Chief Executive, Executive Director Operations and Finance		All actions are marked green and on track for target completion dates
Risk 7	There is a risk that Public Health Wales will fail to sufficiently consider, exploit and adopt new and existing technologies. This will be caused by the inability to keep up to date with relevant new and emergent technologies, their potential application and having insufficient skills to develop the case for investment.	Director for NHS Quality Improvement and Patient Safety	Assuring Group	The Board is asked to note that the assuring group for this risk has changed to Executive Team / Board And not the Knowledge, Research and Information Committee as advised previously (this was an error).
			Actions	All actions are marked green and on track for target completion dates

4. Recommendation

The Board is asked to:

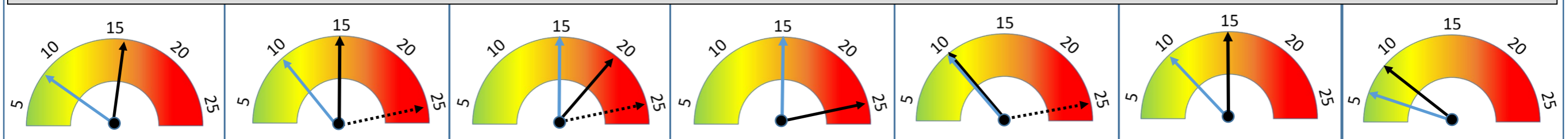
- **Consider** the Board Assurance Framework (BAF) and note the updates provided since the Board meeting held on 30 May 2019;
- **Note** the updates provided; and
- **Approve** the revised “due dates”.

Public Health Wales – Board Assurance Framework Strategic Risk Dashboard July 2019

There is a risk that Public Health Wales will...

- 1. Find itself without the workforce it requires to deliver on its strategic objectives
- 2. Cause significant harm to a patient, service user or staff member
- 3. Fail to deliver sustainable, high quality and effective infection and screening services
- 4. Suffer a major IT security breach resulting in a failure in service delivery and/or loss of personal data
- 5. Fail to effectively influence stakeholders and support others to deliver the population health gains required to achieve its purpose
- 6. Fail to secure and align resources to deliver on its strategic priorities
- 7. Fail to sufficiently consider, exploit and adopt new and existing technologies

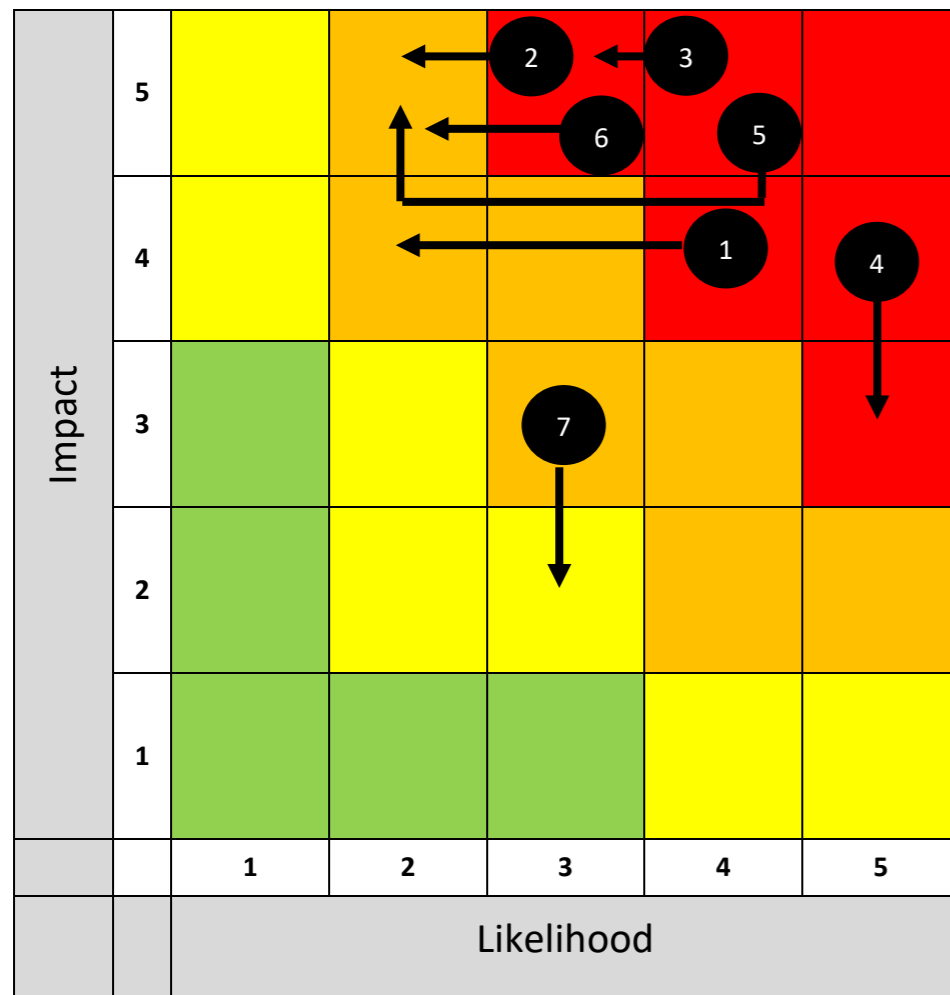
Individual Risk Severity Scores – Inherent Residual → Target → (NOTE - For clarity where inherent and residual risk scores are the same, only the residual is shown)



Outstanding actions



Residual Risk Severity Map (showing direction of travel to target)



Strategic Priorities and Risk Appetite 2018 - 2019

Strategic Priority	Risk Appetite Level
Influencing the wider determinants of health	3 – Accepting
Improving mental well-being and building resilience	4 – Willing
Promoting healthy behaviours	3 – Accepting
Securing a healthy future for the next generation through a focus on early years	4 – Willing
Protecting the public from infection and environmental threats to health	2 – Cautious
Supporting the development of a sustainable health and care system focused on prevention and early intervention	3 – Accepting
Building and mobilising knowledge and skills to improve health and well-being across Wales	4 – Willing

Strategic Risk Impact Statement

The consequences of any of the strategic risks being realised would include potential of harm to patients, impacts on the welfare of staff, poor quality service, failure to achieve population health gains, potential litigation at both a corporate and personal level with financial and/or penal sanctions and/or significant reputational damage which could threaten the future of the organisation.

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Applicable Strategic Priorities		Board Assurance Framework							
		Risk 1							
		There is a risk that Public Health Wales will find itself without the workforce it requires to deliver on its strategic objectives. This would be caused by a lack of staff with the relevant skills and / or cultural fit in the external market / education system, internally due to a lack of staff skills and behaviour development, career mobility and succession planning and talent management, or due to undesirable employee attrition.							
Influencing the wider determinants of health	X	Risk Score							
Improving mental well-being and building resilience	X								
Promoting healthy behaviours	X								
Securing a healthy future for the next generation through a focus on early years	X	Inherent Risk			Current Risk			Target risk	
		Likelihood 4	Impact 4	16	Likelihood 4	Impact 4	16	Likelihood 2	Impact 4
Protecting the public from infection and environmental threats to health	X	Sponsor and Assurance Group						Risk Decision Treat	
Supporting the development of a sustainable health and care system focused on prevention and early intervention	X	Executive Sponsor			Phil Bushby, Director of People and Organisational Development				
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	Assuring Group			People and Organisational Development Committee				
GAPS IN CONTROLS				GAPS IN ASSURANCE					
1. An implemented corporate approach to succession planning and talent management 2. There is no Organisational level workforce plan 3. Workforce strategy to support the PHW long term strategy									
ACTION PLAN									
Action Plan	Owner	Progress Update						Due Date	
1.1	Deployment / completion of corporate approach to succession planning and talent management.	Matthew Browne	Following the initial paper in 18/19 outlining the proposed approach, we will complete an initial talent and succession exercise of senior roles during 19/20 and look to roll this out more broadly during the following year. Completion of senior exercise by March 2020.						March 2020
1.2	From returned workforce plans and wider discussion around ways of working to support the IMTP, an organisational level workforce plan will be created to cover the course of the IMTP	Karen Williams/ Karen Fitzgibbon	Linking to the timescales relating to IMTP, complete a 3-year workforce plan for the organisation drawing together information from directorate and priority plans.						December 2019
1.3	Further to 2 above and following discussions with Executive, pull together an organisational level workforce strategy in support of the organisation's long term strategy	Phil Bushby/ Barbara Busby	Building on the work from 18/19 we will conclude a workforce strategy that supports PHW's long term strategy. This will also link to the work being undertaken by HEIW as they develop a workforce strategy for the health and social care system. Work will be completed and taken to the Board in January 2020 for final approval. This work is dependent on securing suitable resource to help complete.						January 2020

EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner
Microbiology action plan	Quentin Sandifer	Detailed Stabilisation and Transformation Action Plans and regular meetings of Public Health Services Directorate leadership Team	Quentin Sandifer
Training plan through the Deanery		Annual training placements and evaluation, trainee engagement and satisfaction survey, Deanery reports and routine meetings	Brendan Mason
Medical Job Planning (including all Public Health Consultants from backgrounds other than medicine)		Job Planning reports and meetings – all verified by Medical Director	Brendan Mason / Andrew Jones
Personal Development reviews	Phil Bushby	People and OD performance report Regular update papers (2 per year) provided to Committee by Director of People and OD	Lisa Whiteman
Detailed workforce Planning, including learning needs analysis		People and OD performance report Regular update papers (2 per year) provided to Committee by Director of People and OD	Karen Williams
People and OD Management Information including People Performance Reports, detailed recruitment MI, appraisal rates and attrition rates		People and OD performance report provided monthly including key people metrics. Specific in depth have been commissioned and executed in respect of sickness absence, staff turnover / attrition and gender diversity	Joe O'Brien
Staff Survey results around career opportunities and levels of engagement		NHS Wales staff survey results and action plans	Peta Beynon
Learning and Development Policies and Procedures		Monitoring of requests and support offered for development through the L&D Policy and High cost learning process	Lisa Whiteman
Leadership and Management Development Programmes		Take up rates and post course evaluation / management and leadership satisfaction scores in the staff survey	Lisa Whiteman
Colleague Development Programme		Take up rates and post course evaluation	Matthew Browne
Apprenticeship and Graduate Schemes		Appraisal Guidance toolkits / Graduate Placement programme and placement take up rates and evaluations	Matthew Browne
Work placement Schemes		Take up rates and post placement evaluation	Matthew Browne
Corporate Health Standard		Achievement of standard and feedback reports from assessors / plans for higher levels of CHS	Jane Rees
Public Health Workforce Development (other than medical / consultant)		Coordination of practitioner scheme development, Welsh Audit Office report and responding actions	Lisa Whiteman
Occupational Health provision		Reports from providers on themes / KPIs, specific case updates / management and inoculation rates (for Flu via WAST and all others for Public Health Services via relevant health Boards)	Karen Williams
Employee Assistance Programme			Jane Rees
P&OD Annual Workplan	Phil Bushby	This plan ensures that a focus is maintained on key activities relating to turnover, improving the recruitment process and developing correct behaviours through initiatives like 'being my best'	Karen W/ Lisa W

Applicable Strategic Priorities		Board Assurance Framework Risk 2								
		There is a risk that Public Health Wales will cause significant harm to a patient, service user or staff member. This will be caused by misdiagnoses or incorrect identification of serious health conditions, the provision of inappropriate clinical advice or the failure of staff to follow correct procedures.								
Influencing the wider determinants of health	X									
Improving mental well-being and building resilience	X									
Promoting healthy behaviours		Risk Score								
Securing a healthy future for the next generation through a focus on early years		Inherent Risk			Current Risk			Target risk		
		Likelihood 5	Impact 5	25	Likelihood 3	Impact 5	15	Likelihood 2	Impact 5	10
Protecting the public from infection and environmental threats to health	X	Sponsor and Assurance Group						Risk Decision		
Supporting the development of a sustainable health and care system focused on prevention and early intervention		Executive Sponsor		Rhiannon Beaumont-Wood, Executive Director Quality, Nursing and Allied Health Professionals				Treat		
Building and mobilising knowledge and skills to improve health and well-being across Wales		Assuring Group		Quality, Safety and Improvement Committee (patient and service user) People and Organisational Development Committee (staff)						
GAPS IN CONTROLS				GAPS IN ASSURANCE						
<ul style="list-style-type: none"> Process inconsistently applied for updating and disseminating new/ update policies Lack of systematic and embedded approach to reflecting and learning from incidents, serious incidents, raising concerns (whistleblowing) etc to enable Public Health Wales to be an agile learning organisation Lack of corporate approach to succession planning and talent management (see Risk 1) Gaps re effective infection and screening service (see Risk 3) 				<ul style="list-style-type: none"> No consistently applied, monitored and reported quality and impact measures Lack of assurance mechanism for 'Raising Concerns' (Whistleblowing) Lack of assurance mechanism in relation to awareness/ staff training re governance/ assurance processes 						
ACTION PLAN										
Action Plan				Progress Update					Due Date	
2.1	Development of an effective management system for updating and disseminating new and revised policies and procedures.			Head of Corporate Governance	Most actions for this risk have been completed, but there are still outstanding issues which are being addressed through a review of the risk action plan					October 2019
	Ensure Directorates have an effective mechanism for updating Standard Operating Procedures (SOPs) when new legislation/ guidance available				As above					March 2020
2.2	Development of an effective mechanism to inform staff of new/ updated policies and procedures			Head of Corporate Governance	As above					October 2019
2.3	Adoption and implementation of an organisational approach to raising staff awareness of the elements that encompass good governance e.g. risk, quality, information governance, financial governance, research governance and corporate governance			Head of Corporate Governance	Some progress has been made in governance areas, but the next steps to advance the maturity of the systems requires the appointment of the Assistant Director of Integrated Governance and for the post holder to work closely with the Board Business Unit					July 2020

		Rhiannon Beaumont-Wood Huw George Sian Bolton		
2.4	Implementation and reporting of Quality and Impact indicators across the organisation	Rhiannon Beaumont-Wood	Quality and Improvement Indicators continue to be reported. Further progress requires cross executive and Board agreement with regard to the organisational approach to Quality and Impact Performance management and measurement	Oct 2019
2.5	Implement an organisational approach to disseminating and raising awareness of the 'Raising Concerns' (whistleblowing) policy	Head of Corporate Governance	All steps have been completed, however it is recognised that further work will be required on organisational culture, in respect of communications.	Sept 2019
2.6	Dissemination across the organisation of learning from incidents, serious incidents, raising concerns (whistleblowing), audits and evaluations	Rhiannon Beaumont-Wood	Lessons learnt from complaints/ concerns captured within Putting Things Right report which is report to the Quality Safety and Improvement Committee and Board quarterly	Completed
			'You Said we Did' used by Screening to share learning on the intranet	Completed
			Service User Experience and Learning Panel captures lessons learnt quarterly	Completed
			Clinical and Quality Audit outcomes captured annually and shared at Quality Safety and Improvement Committee	Completed
			Central database for evaluations to be developed	October 2019
			Lessons from Raising concerns (Whistle blowing) need to be captured and shared	October 2019
			Systemic method of sharing learning to be developed	October 2019
2.7	Actions as set out in Risk 1	Phil Bushby	See Risk 1	Completed
2.8	Actions as set out in Risk 3	Quentin Sandifer	See Risk 3	See Risk 3

.EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner
Policies and Procedures (inc. Standard Operating Procedures, Quality Assurance systems, Failsafe systems etc.) Microbiology Stabilisation Plan Screening for the Future work programme	Quentin Sandifer	Performance data – monthly to Exec and bi-monthly to Board Screening for the Future Programme Board which reports to QS&I Committee Microbiology Programme Board which reports to QS&I Committee	Huw George Quentin Sandifer
Policies and procedures in place to confirm that staff have the qualifications and experience required for roles within the organisation Statutory and Mandatory training Competency and role based training Personal Development reviews Workforce Plan People and OD Management Information including People Performance Reports and detailed recruitment MI.	Phil Bushby	People and OD performance report reporting to POD Committee Regular update papers (2 per year) provided to Committee by Director of People and OD Staff Survey results reported to POD Committee and Board Reports to QS&I Committee and POD Committee	Phil Bushby

Staff Survey results around career opportunities and levels of engagement People and OD Policies and Procedures Leadership and Management development Programme Occupational Health provision			
Incident Reporting procedures	Rhiannon Beaumont- Wood	PTR Report quarterly to QS&I Committee SI reporting as occurs to Board and quarterly to QS&I Committee	Rhiannon Beaumont- Wood
Clinical and Quality audit	Quentin Sandifer/ Rhiannon Beaumont- Wood	Annual Plan and Report to QS&I Committee	Rhiannon Beaumont- Wood
Health and Safety/ Estates Action Plan	Huw George	Reports to Health and Safety Group and into POD Committee	Huw George

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Applicable Strategic Priorities		Board Assurance Framework								
Influencing the wider determinants of health		<p style="text-align: center;">Risk 3</p> <p style="text-align: center;">There is a risk that Public Health Wales will fail to deliver a sustainable, high quality and effective infection and screening services. This will be caused by a lack of sufficient workforce capacity; over-reliance on existing systems/procedures, lack of sufficient change capacity and an estate and infrastructure which is not fit for purpose.</p>								
Improving mental well-being and building resilience										
Promoting healthy behaviours										
		Risk Score								
		Inherent Risk			Current Risk			Target risk		
		Likelihood 5	Impact 5	25	Likelihood 4	Impact 5	20	Likelihood 3	Impact 5	15
Protecting the public from infection and environmental threats to health	X	Sponsor and Assurance Group						Risk Decision		
Supporting the development of a sustainable health and care system focused on prevention and early intervention		Executive Sponsor			Quentin Sandifer, Executive Director Public Health Services / Medical Director			Treat		
Building and mobilising knowledge and skills to improve health and well-being across Wales		Assuring Group			Quality Safety and Improvement Committee Audit and Corporate Governance Committee					
GAPS IN CONTROLS				GAPS IN ASSURANCE						
Lack of specialist workforce capacity to deliver services Lack of capacity to drive transformation of services alongside operational delivery requirements Lack of sufficient clarity and specificity in service operating systems, e.g. 'failsafe' Lack of capacity in NHS partner workforce to deliver services, e.g. screening Some infrastructure (laboratories and premises) is old and deteriorating and in some areas is not fit for purpose										
				ACTION PLAN						
Action Plan		Owner	Progress Update					Due Date		
3.1	Delivery of the Microbiology Stabilisation Plan	Executive Director of Public Health Services	<p style="color: red;">Following the allocation letter to Public Health Wales, an investment plan has been in place for the £1.1m included in the 2019-20 allocation. This includes recruitment to specialist roles (which once successfully completed) will address this risk. This has been the focus of management attention to date. Progress in relation to the second Stabilisation Plan continues to be made and an update report will be presented to the Quality, Safety and Improvement Committee in August 2019. Progress with the stabilisation plan will also be formally reviewed (as requested by the Transformation Board) in July 2019.</p> <p style="color: red;">To allow for this review and the ongoing work to stabilise Microbiology Services, it is requested that the Board approve an extension to this action due date to October 2019.</p>					31 Jul 2019		
3.2	Delivery of the Infection Service Transformation Programme	Executive Director of Public Health Services	<p>The Transformation Programme Board is continuing to meet (next meeting 30 July 2019) and has approved Terms of Reference, Governance and reporting arrangements. A Programme team has been established and work streams have commenced.</p> <p>An advisory paper on National Health Protection Service was submitted to Welsh Government. Additional funding for National Health Protection Service has been received in the 2019-20 allocation. Further engagement with Welsh Government in relation to investment is ongoing. A Welsh Government led workshop for NHS Wales was held in May 2019.</p>					April 2021		
3.3	Delivery of the Screening for the Future Programme	Executive Director of Public Health Services	<p>Project Board and work streams working to timetable. All remaining recommendations from the External Review of Screening Division will be completed by the end of July 2019.</p> <p>Any ongoing strategic development work from the programme e.g. workforce development, will need to align with Strategic Priority 6.</p> <p>A programme board will be held on 6 June 2019 to outline the next phase for the programme. The Programme Manager 2 year secondment post will end in June, as planned.</p>					August 2019		

3.4	Review to ensure that our Screening and Microbiology operating systems are all 'failsafe'	Executive Director of Public Health Services	<p>The comprehensive failsafe review work continues for Cervical Screening Programme and Wales Abdominal Aortic Aneurysm Screening Programme with regular meetings being undertaken and defined cohorts reviewed. Two of the defined cohorts have recently been reviewed and brought to conclusion. This is likely to take at least another six months to complete.</p> <p>This because this work is very complex, requires our IT specialist colleagues to provide the data and staff who understand the pathways to review. The breadth of the work is not understood fully until the failsafe is fully scoped. All of this work is being undertaken within current staff workload alongside delivering the programmes.</p>	December 2019
3.5	Implementation of UK National Screening Committee recommended new tests (Primary Human Papilloma Virus Testing, HPV and Faecal Immunochemical Testing, FIT)	Executive Director of Public Health Services	<p><u>Implementation of Primary Human Papilloma Virus Testing (HPV) for Cervical Screening</u> was completed in October 2018.</p> <p><u>Faecal Immunochemical Testing (FIT) for Bowel Screening Programme:</u> Implementation started as planned in January as a phased implementation with 1 in 28 invited for screening across Wales offered a FIT test. People who are to receive a FIT are selected randomly from the entire eligible population in Wales who are due for bowel screening and not from specific geographical locations. The phased implementation will continue until the summer 2019, allowing enough time for processes to be fully developed and tested as well as uptake and positivity rates to be monitored. If results of the phased implementation are as expected, national rollout will begin in the summer and FIT test will replace the current GFOBt test for the whole eligible population in Wales.</p>	Sept 2019
3.6	Implementation of Cervical Screening Information Management System (CSIMS)	Executive Director of Public Health Services	<p>Considerable delay was initially experienced in obtaining essential demographic information to enable development to start. This prevented progress to original timescales. There has also been turnover of contractors which has added to delay.</p> <p>The first stage of development and testing by users has been completed in March 2019 and was positive. It has recently been identified that progress of development is not in line with initial timescales and IT are now advising that the development will not be ready to implement by September 2019.</p> <p>Every effort is being spent to establish the development team capacity to inform a revised project plan, however initial estimations suggest a new implementation date will be in 2020.</p> <p>Activities to establish an accurate plan is being supported by the Trusts' Programme Management Unit. It should be noted the importance of the system being fit for purpose and the development of this first system enables the development of a significant portions of the "core" screening functionality for the IT system which are planned to follow this development for other screening programmes.</p> <p>Note: a new due for this action will be determined following the completion of an urgent review of the project.</p>	Sept 2019
3.7	Implementation of risk-based diabetic eye screening	Executive Director of Public Health Services	Project lead commenced in post in February 2019 and project is progressing in accordance with timetable.	April 2021
3.8	Delivery of Estates Action Plan and Health / Safety Action Plan	Deputy Chief Executive / Executive Director of Finance and Operations	Ongoing delivery of estate / Health and Safety action plan in relation to Microbiology Laboratory estate. All actions in relation to HSE Improvement notices are complete and notices removed.	

EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner
National Health Protection Service Implementation (including investment) Plan Microbiology Stabilisation Plan Screening for the Future work Programme Policies and Procedures Standard Operating Procedures	Executive Director of Public Health Services	National Health Protection Service Transformation Board Microbiology Stabilisation Plan Project Board Screening for the Future Programme Board Public Health Services Directorate Leadership monthly meetings	Quentin Sandifer
Health and Safety Action Plan Estate Action Plan.	Deputy Chief Executive / Executive	Public Health Services Directorate Leadership monthly meetings	

	Director of Finance and Operations		
Incident Management System Raising Concerns Policy and Procedure	Executive Director of Quality, Nursing and Allied Health Professionals	Public Health Services Directorate Leadership monthly meetings	

Applicable Strategic Priorities		Board Assurance Framework								
		Risk 4								
		There is a risk that Public Health Wales will suffer a major IT security breach resulting in a failure in service delivery and/or loss of personal data. This will be caused by a cyber-attack made with malicious intent either directly against Public Health Wales or if we suffer collateral damage from a wider ranging cyber-attack.								
Influencing the wider determinants of health	X	Risk Score								
Improving mental well-being and building resilience	X									
Promoting healthy behaviours	X									
Securing a healthy future for the next generation through a focus on early years	X	Inherent Risk			Current Risk			Target risk		
		Likelihood 5	Impact 5	25	Likelihood 5	Impact 4	25	Likelihood 5	Impact 3	15
Protecting the public from infection and environmental threats to health	X	Sponsor and Assurance Group						Risk Decision		
Supporting the development of a sustainable health and care system focused on prevention and early intervention	X	Executive Sponsor			Huw George, Deputy Chief Executive, Executive Director Operations and Finance			Treat		
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	Assuring Group			Knowledge, Research and Innovation Committee					
GAPS IN CONTROLS				GAPS IN ASSURANCE						
ACTION PLAN										

Note

Due to the sensitive nature of the controls and actions and the potential susceptibility to attack this information is available separately to Board members as a confidential briefing

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Applicable Strategic Priorities (Figures indicate Risk Appetite levels)			Board Assurance Framework								
Influencing the wider determinants of health	3	x	<p style="text-align: center;">Risk 5</p> <p style="text-align: center;">There is a risk that Public Health Wales will fail to effectively influence stakeholders and support others to deliver the population health gains required to achieve its purpose. This will be caused by an insufficient investment and delivery of support by our key stakeholders including to the people of Wales, Welsh Government, NHS Wales, PSBs and the Third Sector.</p>								
Improving mental well-being and building resilience	4	x									
Promoting healthy behaviours	3	x									
			Risk Score								
Securing a healthy future for the next generation through a focus on early years	4	x	Inherent Risk			Current Risk		Target risk			
			Likelihood 5	Impact 5	25	Likelihood 2	Impact 5	10	Likelihood 2	Impact 5	10
Protecting the public from infection and environmental threats to health	2	x	Sponsor and Assurance Group							Risk Decision Treat	
Supporting the development of a sustainable health and care system focused on prevention and early intervention	3	x	Executive Sponsor			Jyoti Atri, Interim Executive Director Health and Wellbeing					
Building and mobilising knowledge and skills to improve health and well-being across Wales	4	x	Assuring Group								
GAPS IN CONTROLS			GAPS IN ASSURANCE								
1) There is a lack of a sufficiently well-resourced public information offer. 2) There is a lack of capability and capacity within PHW and its partner organisations to use the most effective behaviour change approaches for public health gain. 3) There is a need for more support for and a more agile vehicle to advise national and local policy makers including WG and PSBs on key population health issues. 4) There is a lack of a co-ordinated, coherent, data driven and evidence-based approach to prevention of long term conditions across the NHS. 5) There is insufficient capacity within PHW to support the third sector to attract resources for and deliver effective public health action.											
ACTION PLAN											
Action Plan			Owner	Progress Update							Due Date
5.1	Increase investment in social marketing that utilise behaviour change approaches		Jyoti Atri	Increased investment has been secured to establish a behaviour change team in 2019.							Completed
5.2	Subject to securing appropriate resources, invest in the necessary digital infrastructure for the effective delivery of timely and appropriate information to the public.		Huw George	SHIFT project has identified the need and level of likely investment required. Web development project well underway. Exploring options for new investment							31/07/19
5.3	Subject to a realignment of resources, invest in people to co-produce, maintain and evaluate content for the effective delivery of timely and appropriate information to the public.		Jyoti Atri	Work has commenced to develop improved access to information for parents in the early years within existing resources. Work on public information will be ongoing.							Ongoing
5.4	Understand the extent to which behavioural change theory is currently used in programmes to change people's behaviours, and identify where knowledge and skills need developing across the public health workforce		Jyoti Atri	Actions being progressed under IMTP SO 3.9 as follows: <ul style="list-style-type: none"> Current application of behaviour change theory across public health system described (Nov 18) Training needs analysis completed (Feb 19) These actions have been delayed due to recruitment delays. The timelines have been revised in the IMTP and are now due for delivery in August 19.							August 2019
5.5	Increase investment in providing specialist public health data and evidence advice to existing strategic national policy initiatives e.g. Early years, Obesity Prevention, Tobacco Control		Jyoti Atri	Investment in the Analytical and Evidence teams provided additional capacity to allow the Observatory to work closely with both Health Improvement and Welsh Government on the development of the Healthy Weight: Healthy Wales Strategy while remaining committed to the							Closed

			delivery of other planned organisational priorities. The longer-term investment in the Evidence team has increased the organisations capacity for evidence reviews and provided a resource that can guide similar nations priorities in a timely manner in the future.	
5.6	Utilise the WHO CC to act as a policy think tank for WG and other Public Health stakeholders. Deliver the work plan of the WHO CC.	Mark Bellis	WHO CC work programme delivery progressing according to plan. An introductory meeting with the WHO Venice Office organised in November 2018. First annual WHO CC report was submitted in March 2019. A key outcome is Wales becoming an 'influencer country' in the new WHO Health Equity Solutions Platform, to be launched in 2019.	Ongoing
5.7	Ensure more effective Health Impact Assessments through an enhanced HIA Support Unit	Mark Bellis	Additional funding has been incorporated into the WHIASU budget and is being utilised by the Unit to provide enhanced support.	Closed
5.8	Continue the periodic meetings with Cabinet Secretaries, Ministers and their officials across Government as appropriate in order to inform them on the work of Public Health Wales and support the application of health in all polices in their respective areas.	Jan Williams/ Tracey Cooper	First round of meetings completed	Ongoing
5.9	Advocate for a co-ordinated, coherent, data driven and evidence based approach to chronic disease prevention across NHS Wales.	Jyoti Atri	A paper was submitted to and agreed by the NHS CEOs and Chairs and thence to the Cabinet Secretary during June 18 making the case for an increase in preventative funding in support of health and well-being.	Completed
5.10	Agree and establish a process to take forward the recommendations in the Long Term Conditions – Investment in Prevention paper agreed by NHS Chief Executives and Chairs	Tracey Cooper/ Jyoti Atri	Update July 2019: The first Building a Healthier Wales Co-ordinating Group meeting has been held where the background to the work was explained and the Terms of Reference Discussed. The group agreed to hold an away day in September to further scope and prioritise work under Building a Healthier Wales. Ministerial approval on the £10m is expected today (18.07.19).	The Board is asked to approve a change of date to September 2019
5.11	Ensure CWW is able do proper analyses of complex, wicked issues and to co-design evidence based or logical national programmes of action.	Jyoti Atri	CWW is continuing a developmental approach in line with its agreed process which has been approved by the SLG. Capacity to support CWW has been identified and is subject to recruitment of CPH with is currently in progress.	31/07/19
5.12	Agree and establish a process to take forward the recommendations in the Long Term Conditions – Investment in Prevention paper agreed by NHS Chief Executives and Chairs	Tracey Cooper/ Jyoti Atri	Update July 2019: The first Building a Healthier Wales Co-ordinating Group meeting has been held where the background to the work was explained and the Terms of Reference Discussed. The group agreed to hold an away day in September to further scope and prioritise work under Building a Healthier Wales. Ministerial approval on the £10m is expected today (18.07.19).	The Board is asked to approve a change of date to September 2019
EXISTING CONTROLS			SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner	

Applicable Strategic Priorities (Figures indicate Risk Appetite levels)			Board Assurance Framework								
Influencing the wider determinants of health	3	X	<p style="text-align: center;">Risk 6</p> <p style="text-align: center;">There is a risk that Public Health Wales will fail to secure and align resources to deliver on its strategic priorities. This will be caused by funding cuts or inability to make required savings, generate income or move resources within the organisation</p>								
Improving mental well-being and building resilience	4	X									
Promoting healthy behaviours	3	X									
			Risk Score								
Securing a healthy future for the next generation through a focus on early years	4	X	Inherent Risk			Current Risk			Target risk		
			Likelihood 3	Impact 5	15	Likelihood 3	Impact 5	15	Likelihood 2	Impact 5	10
Protecting the public from infection and environmental threats to health	2	X	Sponsor and Assurance Group						Risk Decision		
Supporting the development of a sustainable health and care system focused on prevention and early intervention	3	X	Executive Sponsor			Huw George, Deputy Chief Executive			Treat		
Building and mobilising knowledge and skills to improve health and well-being across Wales	4	X	Assuring Group			Audit and Corporate Governance Committee					
GAPS IN CONTROLS			GAPS IN ASSURANCE								
<ul style="list-style-type: none"> Fully embedded governance arrangements for management of new Long Term Strategy Revised Performance Management Framework aligned to new Strategy and governance arrangements Robust resource based planning Evidence of efficiency across the organisation Model for monitoring savings and investments 			<ul style="list-style-type: none"> Outcome measures and performance metrics 								
ACTION PLAN											
Action Plan		Owner	Progress Update							Due Date	
6.1	Develop an integrated planning methodology for Public Health Wales	Sally Attwood	Update 05/07/19- Programme Manage Office established in 2018 and staffing establishment stabilised. Upskilling programme for PMO staff (project and programme management) is ongoing. In September 2019; project and programme management methodology launch; organisation-wide community of practice; project planning training and software roll out							30 September 2019	
6.2	Implement the actions arising following the review of the priority arrangements undertaken in June 2019	Sally Attwood	Update 05/07/19- Post-review, a range of measures have been put in place/agreed, including: new vice chair role, Strategic Priority Co-ordination Group (inaugural meeting 23/7/19); change control procedure, Local Public Health Team representation on Strategic Priority Groups. Further work to be undertaken on matrix working and resource alignment							31 December 2019	
6.4	Refine and develop outcome measures for our strategic priorities and organisation	Sally Attwood	Update 05/07/19- Strategic Planning and Performance supporting all Strategic Priority Groups on development of outcomes and metrics, as identified in the Value and Impact Framework.							01 October 2019	
6.5	Realise savings from organisational efficiency work streams	Huw George	Update 05/07/19- an update on progress presented to BET on 15 July. Position at end of quarter 1 confirms on track to deliver the required efficiency savings to support the agreed investment bids profiled expenditure plans in 2019/20. Further work required to meet the recurrent savings target							Ongoing	
6.6	Develop longer term investment and savings Strategy	Angela Fisher	Update 05/07/19- The organisations future investment and savings strategy will be shaped by the value and impact work, particularly in respect of assisting the decision making process on dis-investments, re-investments and prioritisation. In the short term whilst the work on the value and impact programme progresses, a workstream as part of business process improvement programme has been established to review the capital asset register and capital planning process. For 2019/20, the agreed bids against the £2.2m investment fund and the savings schemes that generated the investment fund are being monitored closely. The outcomes of which will also inform the future investment and savings strategy.							31 March 2020	

6.7	Agree wider approach to value and impact across the organisation. This will include work on four work streams: <ul style="list-style-type: none"> • Value in Finance • Performance Framework • Evaluation • Extended Balance Sheet 	Huw George	Update 05/07/19- A session with the Public Health Wales Board was held on 4 July 2019 outlining the organisational approach to measuring value and impact. This includes focusing on outcomes, performance, evaluation and impact, value for money and extended balance sheet. Work has commenced across a number of the workstreams and will continue during 2019. The Head of Financial Intelligence, Value and Impact will also take up post in September to support the delivery of this organisational approach.	31 March 2022
6.8	Develop long term People Strategy aligned to Public Health Wales Long Term Strategy	Phil Bushby	Refer to BAF Risk 1 (action 1.3) for current progress update.	January 2020

EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner
Mid and End of Year Reviews Joint Executive Team meetings and papers- biannually Quality and Delivery meetings/papers- quarterly Budget setting process Strategic Priority Groups Business Executive team monthly consideration of Performance Report Committee deep dives Priority Coordination Group	Huw George	Long Term Strategy- Working to achieve a healthier future for Wales Welsh Government and Board approved Strategic Plan 2019-22 Board approved Annual Plan 2019/29 Integrated Monthly Performance Report to Board (Service/Finance/Quality/ People) Annual accounts Audits of financial systems and audit management Chairs appraisal documentation	Huw George

Applicable Strategic Priorities		Board Assurance Framework									
Influencing the wider determinants of health	X	There is a risk that Public Health Wales will fail to sufficiently consider, exploit and adopt new and existing technologies. This will be caused by the inability to keep up to date with relevant new and emergent technologies, their potential application and having insufficient skills to develop the case for investment.									
Improving mental well-being and building resilience	X										
Promoting healthy behaviours	X	Risk Score									
Securing a healthy future for the next generation through a focus on early years	X	Inherent Risk				Current Risk			Target risk		
		Likelihood 3	Impact 3	9	Likelihood 3	Impact 3	9	Likelihood 3	Impact 2	6	
Protecting the public from infection and environmental threats to health	X	Sponsor and Assurance Group							Risk Decision Treat		
Supporting the development of a sustainable health and care system focused on prevention and early intervention	X	Executive Sponsor				John Boulton, Director for NHS Quality Improvement and Patient Safety					
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	Assuring Group				Knowledge, Research and Innovation Committee					
GAPS IN CONTROLS					GAPS IN ASSURANCE						
Lack of a corporate system for ensuring a consistent approach to innovation and the exploitation of new and emergent technology											
ACTION PLAN											
Action Plan		Owner	Progress Update						Due Date		
7.1	Identify a replacement Executive lead for innovation	Tracey Cooper	John Boulton has now been appointed and has taken up the role of Executive lead for Innovation						Completed		
7.2	Development of a framework for embedding a culture of innovation	John Boulton	Innovation paper provided to BET on 20 May 2019, and first meeting planned for June 2019						Completed		
7.3	National and International horizon scanning to be embedded into the strategic planning process	Huw George	For updates please refer to Action 6.7						Ongoing		
7.4	Development of a formal working relationship with the Life Sciences hub	John Boulton	Update May 2019: Meetings have taken place with respective Chairs and CEO of Lifesciences Hub and Public Health Wales and John Boulton has met with Chief Executive of the Life Sciences Hub. Ongoing discussion around combined work priorities.						September 2019		
7.5	Establishment of a New Technology and Innovation Advisory Forum to advise the Board	John Boulton	Update May 2019: Terms of Reference approved by Board in July 2018. Preliminary planning meetings will be taking place between May and August 2019, with the first meeting of the Forum planned for September 2019. First meeting date is dependent on diary availability of industry experts that will be invited to attend the meeting.						December 2019		
7.6	Recruitment of a dedicated Non-Executive Director for Life Sciences	Helen Bushell	Update May 2019: Recruitment in progress. Advert due to go live early June 2019.						September 2019		
EXISTING CONTROLS					SOURCES OF ASSURANCE						
Control		Owner	Assurance						Owner		