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Iechyd Cyhoeddus
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Public Health
Wales

Name of Meeting
Board
Date of Meeting
28 November 2019
Agenda item:
8.1.281119

Board Assurance Framework

Executive lead:	Tracey Cooper, Chief Executive
Authors:	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 – 18 November 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 26 September 2019; • Consider 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 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 15 November 2019. As part of the routine Business Executive Team agenda, the Executive Team considered the risks and significant issues at their meeting on the 18 November 2019.

The Boards attention is drawn to the key updates provided within the appendix which are summarised below – these areas are the ones that require Board decision.

Summary of Changes requested to due dates:

Risk	Exec Lead	Action	Requested Date Change:
Risk 2	Executive Director Quality, Nursing and Allied Health Professionals	2.1 Development of an effective management system for updating and disseminating new and revised policies and procedures.	Revised due date requested for March 2020
		2.3 Develop and implement the organisational integrated governance framework and approach.	Revised date requested for September 2020
		2.4 Redefining of the organisation's Quality and Impact indicators and application of the Health and Care Standards	Revised date requested for September 2020
		2.5 Implement an organisational approach to disseminating and raising awareness of the 'Raising Concerns' (whistleblowing) policy	Revised date requested for April 2020
		2.6 Develop and implement an effective incident management system.	Revised date of March 2020 requested.
Risk 3	Executive Director Public Health Services and Medical Director	3.1 Delivery of the Microbiology Stabilisation Plan	Revised date requested for January 2020
Risk 6	Deputy Chief Executive, Executive Director Operations and Finance	6.1 Develop an integrated planning methodology for Public Health Wales	Revised date requested for March 2020
		6.3 Refine and develop outcome measures for our strategic priorities and organisation	Revised date requested for Jan 2020
Risk 7	Director for NHS Quality Improvement and Patient Safety	7.4 Development of a formal working relationship with the Life Sciences hub	Revised date requested Jan 2020
		7.6 Recruitment of a dedicated Non-Executive Director for Life Sciences	Note the update.

4. Recommendation

The Board is asked to:

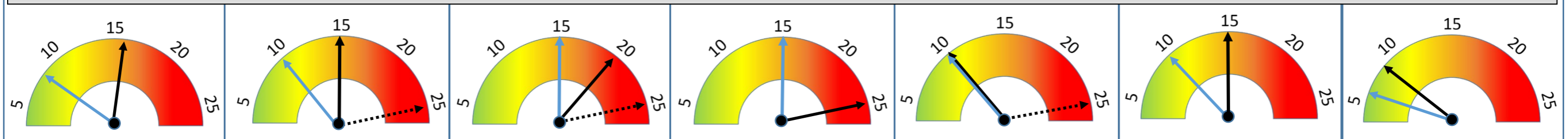
- **Consider** the Board Assurance Framework (BAF) and note the updates provided since the Board meeting held on 28 September 2019;
- **Consider** the updates provided; and
- **Approve** the revised "due dates".

Public Health Wales – Board Assurance Framework Strategic Risk Dashboard November 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

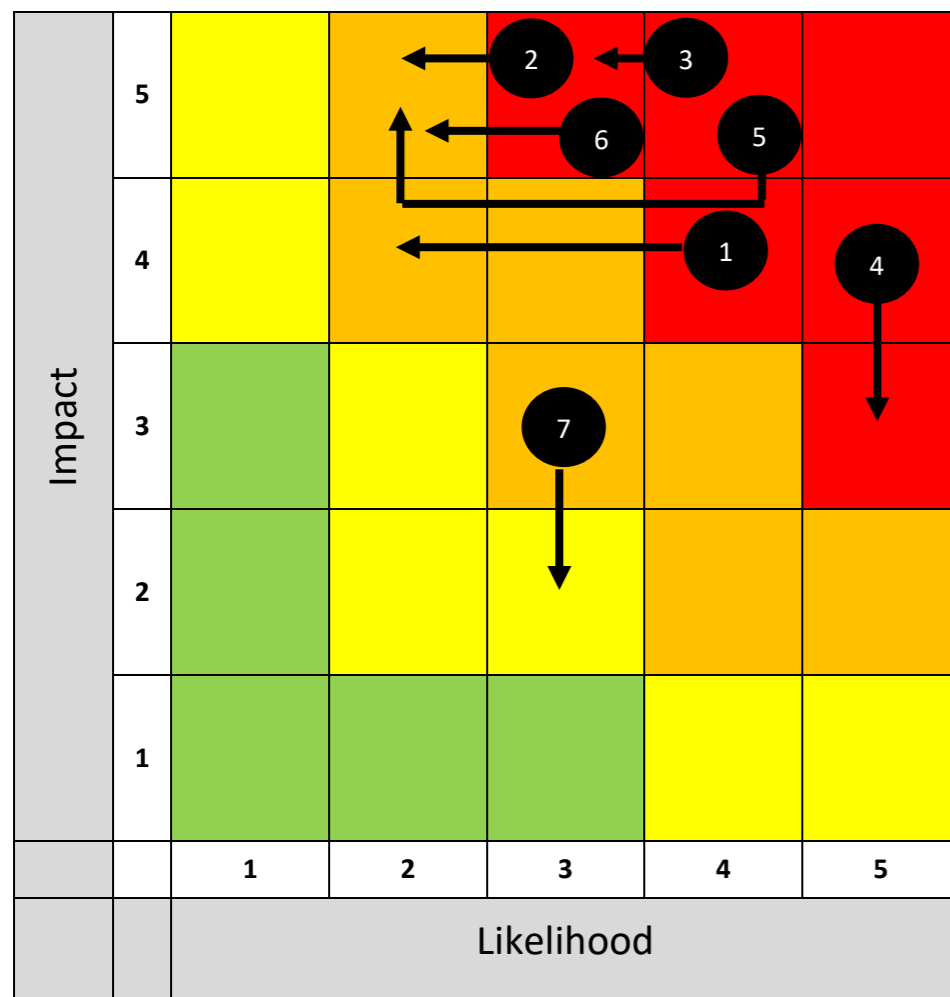
Individual Risk Severity Scores – Inherent Residual → Target → (NOTE - For clarity where inherent and residual risk scores are the same, only the residual is shown)



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	Initial outputs presented to CEO August 2019. A moderation session is being scheduled for the Executive team. Although the moderation session is yet to be scheduled, this has not delayed a review of the approach so far and the drafting of an organisational approach to talent. This work is also being completed in conjunction with HEIW who are undertaking this work across the NHS in Wales.						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	Directorate plans were submitted by the end of October 2019 to support 1.3 and IMTP completion. This was updated to the extended leadership team on 6 November 2019 and remains on track.						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. Excellent feedback received from autumn session with BET, POD Comm and LPF. Second draft being completed during November 2019 in conjunction with the work outlined in 1.2.						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
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	Owner	Progress Update						Due Date	
2.1	Development of an effective management system for updating and disseminating new and revised policies and procedures.	Board Secretary and Head of Board Business Unit	An audit is currently being undertaken to ensure that all policies are listed in one place and that they match the master log of policies held by the Board Business Unit. The date extension is to ensure the audit is completed and relevant actions taken to ensure one central web section of policies is available to everyone.						October 2019
	Ensure Directorates have an effective mechanism for updating Standard Operating Procedures (SOPs) when new legislation/ guidance available		The control policy has been reviewed and the procedures are in the final stages of consultation prior to finalising any changes to both documents. This work is due to commence in early 2020.						New Date requested March 2020
2.2	Development of an effective mechanism to inform staff of new/ updated policies and procedures	Board Secretary and Head of Board Business Unit	The decision has been taken that all policies will be publicly available on the website. Revised processes have also been agreed with the Communications team to ensure a greater approach to coordinated planning with regards to the publishing and publishing of new or revised policies.						Complete

2.3	Develop and implement the organisational integrated governance framework and approach.	Executive Director Quality, Nursing and Allied Health Professionals / Assistant Director of Integrated Governance	<p>Some progress has been made in governance areas and the following governance systems have been implemented:</p> <ul style="list-style-type: none"> • Corporate Risk Management • Information Governance <p>Recruitment in progress to appoint Assistant Director to lead the design, development and implementation of the organisational integrated governance system.</p> <p>Due to difficulties in successfully recruiting to a key leadership post to take this work forward it is requested that the action due date be extended to Sept 2020 pending agreement on the revised actions that will be described in the new iteration of the Board Assurance Framework</p> <p>Update 18/11/19 – The following actions have been identified as part of the 2019 BAF development work and will be articulated in the new BAF from January 2020. All of the below have deliverable dates between Mar 2020 and Sep 2020.</p> <ul style="list-style-type: none"> • Complete a baseline / gap analysis in current governance arrangements • Deliver a draft strategy for integrated governance • Complete a governance stakeholder mapping exercise 	<p>July 2020</p> <p>New date of Sept 2020 requested.</p>
2.4	Redefining of the organisation's Quality and Impact indicators and application of the Health and Care Standards.	Executive Director Quality, Nursing and Allied Health Professionals / Assistant Director of Integrated Governance	<p>Existing Quality and Improvement Indicators continue to be reported.</p> <p>Board and Executive Team to agree Strategic Priority outcomes and milestones whilst improvement indicators will be identified in readiness for the start of Q1 2020.</p> <p>Update 18/11/19 – The following actions have been identified as part of the 2019 BAF development work and will be articulated in the new BAF from January 2020. All of the below have deliverable dates between Mar 2020 and Sep 2020.</p> <ul style="list-style-type: none"> • Develop a quality / clinical governance dashboard • Present a draft quality strategy • Present a draft plan for building capacity, capability and a quality improvement hub • Identify new organisational quality, impact and improvement indicators aligned to the strategic priority outcomes 	<p>Oct 2019</p> <p>New date of Sept 2020 requested.</p>
2.5	Implement an organisational approach to disseminating and raising awareness of the 'Raising Concerns' (whistleblowing) policy	Board Secretary and Head of Board Business Unit	<p>The policy and a dedicated intranet page is available and relevant sections have been updated. The Board Secretary has attended lead officer training and some work has been undertaken to review best practice in other organisations.</p> <p>An action plan has been developed to ensure the continued dissemination of Raising Concerns. A staff survey will be undertaken to establish a baseline of understanding and appropriate training will be delivered before the end of the financial year.</p>	<p>Sept 2019</p> <p>New date of April 2020 requested.</p>
2.6	Develop and implement an effective incident management system.	Executive Director Quality, Nursing and Allied Health Professionals / Assistant Director of Integrated Governance	<p>Release of revised Datix platform together with the newly approved Incident Management Policy and Procedure is imminent with a clear escalation process</p> <p>Systematic method of sharing learning to be developed in line with newly released Policy and Procedure as outlined above.</p> <p>Due to delays and complications with Datix, and also capacity issues which is requiring the Directorate to scope how it can best re-direct resources, an extension is requested until March 2020 pending agreement on the revised actions that will be described in the new iteration of the Board Assurance Framework.</p> <p>Update 18/11/19 – The following actions have been identified as part of the 2019 BAF development work and will be articulated in the new BAF from January 2020. All of the below have deliverable dates between Mar 2020 and Sep 2020.</p> <ul style="list-style-type: none"> • Delivery of phase 1 of the incident management implementation plan • Revision of PTR report to include management information from new Incident Management System 	<p>Completed</p> <p>Oct 2019</p> <p>New date of March 2020 requested.</p>
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. Staff Survey results around career opportunities and levels of engagement People and OD Policies and Procedures Leadership and Management development Programme Occupational Health provision	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
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	Impact		Likelihood	Impact		Likelihood	Impact	
		5	5	25	4	5	20	3	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	Progress in relation to the second Stabilisation Plan continues to be made and is formally reviewed by the Microbiology Senior Management Team, the Public Health Services Directorate Leadership Team and the Transformation Board (last Board review – 30 September 2019). It has been agreed that the Transformation Board will review the need for its continuation at its meeting in January 2019, and consider whether oversight can be fully remitted back to the Public Health Services Directorate. A final stabilisation report will be considered at this meeting. Therefore, it is requested that the deadline for this action is amended to January 2020.						October 2019 Revised date requested January 2020		
3.2 Delivery of the Infection Service National Health Protection Service Transformation Programme	Executive Director of Public Health Services	The Transformation Programme Board is continues to meet (last meeting 30 September 2019) and receives assurance on the progress of finance and workforce plans. The Board will consider whether it should continue at its meeting in January 2020 (see 3.1). A Programme team is leading the programme and all work streams have commenced. The Minister for Health and Social Services has agreed to prioritise investment for the development of a National Health Protection Service. As such, in addition to the £1.1m Public Health Wales has already agreed to invest in this financial year, the Minister has agreed to further central investment totalling up to £1.043m in 2019/20. Subject to the outcome of the Welsh Government's budget process for 2020/21, the Minister has agreed to further central investment totalling up to £4.790m in 2020/21.						April 2021		
3.3 Delivery of the Screening for the Future Programme	Executive Director of Public Health Services	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. Any ongoing strategic development work from the programme e.g. workforce development, will need to align with Strategic Priority 6. 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 ended in June 2019, as planned. All review recommendations have been completed. Closure report received by Business Executive Team in July 2019.						Completed		
3.4 Review to ensure that our Screening and Microbiology	Executive Director of Public Health Services	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.						December 2019		

	operating systems are all 'failsafe'		<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> <p>Considerable delay was initially experienced in obtaining essential demographic information. A new due date was determined and re-scoped project planning was required. Work and meetings ongoing for remaining failsafe work. Data for the screening episodes of individuals within the cohorts identified for review is being systematically reviewed, and outcomes ratified at regular meetings. Due to not knowing in advance how large each cohort will be, it is challenging to estimate how long the whole review will take for each screening programme.</p>	
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)</u> for Cervical Screening 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> <p>FIT Testing was implemented on 6 September 2019 as planned with all eligible participants having a FIT test kit included in their invitation pack.</p>	Completed
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. 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. 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. 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>Gateway review completed. Task and Finish Group addressed the 15 recommendations to inform the project going forward. This action cannot be progressed until the implementation of the DESW replacement IT system has concluded, service inefficiencies and continuation of manual processes will continue. Information Governance risk associated with high volume paper correspondence processing remains. Development of system specification underway, including identification of day 1 functionality and prioritisation of additional developments (including outsourced printing). Funding agreed for a 12 month project manager to support system procurement, implementation and commissioning.</p> <p><u>Timescales cannot be predicted with accuracy at the present time.</u></p>	Sept 2019
3.7	Implementation of risk-based diabetic eye screening	Executive Director of Public Health Services	<p>Project lead commenced in post in February 2019 and project is progressing in accordance with timetable. Business Executive Team received Transformational Plan in July 2019 and approach approved and to work with PMO to align with programme and project method. Recruitment is at the advertisement stage for transformation team resource. Additional resource identified to strengthen operational governance (recruitment to commence in November 2019) and quality assurance to support optimisation of programme.</p>	April 2021
3.8	Delivery of Estates Action Plan and Health / Safety Action Plan	Deputy Chief Executive / Executive Director of Finance and Operations	<p>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.</p>	

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 Director of Finance and Operations	Public Health Services Directorate Leadership monthly meetings	
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	
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			Treat	
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. Further progression will be dependent on successful recruitment of Director of Knowledge.								Ongoing
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 is now due for delivery in December 19.								December 2019
5.5	Increase investment in providing specialist public health data and evidence advice to existing strategic national	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								Closed

	policy initiatives e.g. Early years, Obesity Prevention, Tobacco Control		Wales Strategy while remaining committed to the 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	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 still awaited (11/9/19).	Completed
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. A Wider Determinants Co-ordinator (Andrea Parr) started in post in mid-August 19 and CWW support is within the remit of this role. Further consideration of the role of CWW vis-à-vis the Building a Healthier Wales Steering Group (see 5.12 below) is required	Completed as no longer relevant
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	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).	Completed

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	<p>Update 07/11/19- PMO launched on 16 September 2019 which includes a planning and project methodology for Public Health Wales. 24 members of staff across the organisation have attended Microsoft project training at foundation and advanced level and members of the PMO team have undertaken MSP training and project and programme management training. Two senior managers have been accepted on the NHS Planning Diploma run by Cardiff Business School and started on 21 October. This programme of upskilling will continue during 2019/20.</p> <p>Request change of date to 31 March 2020.</p>						30 September 2019		
6.2	Implement the actions arising following the review of the priority arrangements undertaken in June 2019	Sally Attwood	<p>Update 07/11/19- Post-review, a range of measures have been put in place/agreed including a new vice chair role and Strategic Priority Co-ordination Group established. A schedule of all priority group meetings is now available on SharePoint and is under continual development. A new change control procedure is now in place for priority groups and enabling functions. Agreed reporting arrangements to Business Executive team on changes to the Annual Plan, including a full report to the November meeting.</p>						31 December 2019		
6.3	Refine and develop outcome measures for our strategic priorities and organisation	Sally Attwood	<p>Update 07/11/19- throughout the summer the Strategic Planning and Performance team has supported Strategic Priority Groups on developing outcomes and metrics, as identified in the Value and Impact Framework. On 30 September a joint meeting was held with Non -Executive Directors to consider a draft outcomes framework which was discussed at a workshop with the extended leadership team on 9 October 2019.. Further refinement of outcomes both at an organisational level and by strategic priorities is being undertaken through the priority groups and will be discussed at the Board development session in December 2019 with formal approval of outcomes in January.</p> <p>Suggested revised implementation date of 31 January 2020.</p>						01 October 2019		
									Revised date requested 31/01/2020		

6.4	Realise savings from organisational efficiency work streams	Huw George	Update 07/11/19- At the end of October 2019 we remain on track to deliver 2019/20 savings. Discussions regarding recurrent savings and plans for 2020/21 have taken place in November and will be further progressed through a workshop with the Senior Leadership Team at the next meeting.	Ongoing
6.5	Develop longer term investment and savings Strategy	Angela Fisher	Update 07/11/19- 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. Head of Financial Intelligence, Value and Impact has taken up post in September 2019 and has begun taking this forward. Resource mapping exercise currently underway to inform potential realignment of budgets to priorities. 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. The budget setting principles for 2020/21 has been drafted and will be further refined upon receipt of Welsh Government allocation letter.	31 March 2020
6.6	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 07/11/19- All four workstreams are progressing. Value in Finance workstream has commenced which includes costings and resource mapping (see 6.5). A project to develop a corporate analytics function has commenced to take forward implementation of the performance framework. Expertise from ONS has been secured to accelerate this work. Within the WHO CC Directorate, a pilot approach to take forward the extended balance sheet as part of work to understand our Social Return on Investment is also underway. The four workstreams continue to meet bi-monthly to ensure alignment between the different elements.	31 March 2022
6.7	Develop long term People Strategy aligned to Public Health Wales Long Term Strategy	Phil Bushby	Update 07/11/19 - Refer to BAF Risk 1 (action 1.3) for current progress update. This is covered under BAF 1.	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	<p style="text-align: center;">Risk 7</p> <p style="text-align: center;">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.</p>								
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		
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			Treat		
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	Assuring Group			Executive Team, Board					
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	<p>Update November 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. Request change of date to January 2020.</p>						September 2019 Revised date requested for Jan 2020	
7.5	Establishment of a New Technology and Innovation Advisory Forum to advise the Board	John Boulton	<p>Update November 2019: Terms of Reference approved by Board in July 2018. Preliminary planning meetings between October and November to map key stakeholders. First formal meeting of the Forum planned for January 2020. First meeting date is dependent on diary availability of industry experts that will be invited to attend the meeting.</p>						December 2019	
7.6	Recruitment of a dedicated Non-Executive Director for Life Sciences	Helen Bushell	<p>Update September 2019: Post has been amended to focus on recruiting one generic role and one technology entrepreneur/constructive disruptor. Recruitment in progress. Shortlisting complete and interviews scheduled for 3 October 2019</p> <p>Update November 2019 – decision has been made not to pursue this recruitment. The Chair and relevant staff have reviewed Non-executive recruitment requirements and a new recruitment process will commence in December 2019.</p>						September 2019	
EXISTING CONTROLS				SOURCES OF ASSURANCE						
Control		Owner	Assurance						Owner	