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Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

**Name of Meeting**

Board

**Date of Meeting**

30 May 2019

**Agenda item:**

10.5.300519

# Board Assurance Framework

**Executive lead:** Tracey Cooper, Chief Executive

**Author:** Eleanor Higgins, Corporate Governance Manager (cover paper)  
John Lawson, Chief Risk Officer (Board Assurance Framework)

**Approval/Scrutiny route:** Business Executive Team – 20 May 2019

**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"/>
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The Board is asked to:

- **Consider** the Board Assurance Framework (BAF) and note the updates provided since the Board meeting held on 30 March 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**

<b>Equality and Health Impact Assessment</b>	No decision is required
<b>Risk and Assurance</b>	This is the Board Assurance Framework
<b>Health and Care Standard</b>	This report supports and/or takes into account the <a href="#">Health and Care Standards for NHS Wales</a> Quality Themes  Governance, Leadership and Accountability
<b>Financial implications</b>	No financial implications
<b>People implications</b>	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:

<b>Number</b>	<b>Strategic Priority</b>
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 22 May 2019. As part of the routine Business Executive Team agenda, the Executive Team considered the risks and significant issues at their meeting on 20 March 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
<b>Risk 1</b>	<p>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.</p>	<p>Director of People and Organisational Development</p>	<p>1.1 Deployment / completion of corporate approach to succession planning and talent management.</p>	<p>This action had previously been marked as complete. It has been reintroduced with the following update: 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.</p> <p><b>Request due date of March 2020</b></p>
			<p>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</p>	<p>This action had previously been marked as complete. It has been reintroduced with the following update: Linking to the timescales relating to IMTP, complete a 3-year workforce plan for the organisation drawing together information from directorate and priority plans</p> <p><b>Request due date of December 2019</b></p>

			<p>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</p>	<p>This action had previously been marked as complete. It has been reintroduced with the following update: 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.</p> <p><b>Request due date of January 2020</b></p>
			Controls and assurances	<p>People and Organisational Development workplan has been removed as a 'source of control'.</p>
<b>Risk 2</b>	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	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 and	There are five progress updates within this action. Two are complete, one is due for completion in October 2019. Two have a <b>formal request to</b>

	<p>incorrect identification of serious health conditions, the provision of inappropriate clinical advice or the failure of staff to follow correct procedures.</p>		<p>Ensure Directorates have an effective mechanism for updating Standard Operating Procedures (SOPs) when new legislation/ guidance available</p>	<p><b>extend the due date to October 2019</b> to align all due dates.</p> <p>The following update has been provided: Further progress has been made on updating policies and procedures e.g. incident management, IP&amp;C policies. Additional work still needs to be undertaken in relation to developing an effective system for disseminating new and revised policies (in addition to placing them on the intranet) and will be progressed as the corporate governance team recruitment process is completed.</p> <p><b>Request to extend due date to March 2020</b></p>
			<p>2.2 Development of an effective mechanism to inform staff of new/ updated policies and procedures</p>	<p>There are two progress updates within this action. One is complete and the other has a <b>formal request to extend the due date to October 2019</b> to align with the due dates and action in 2.1 above.</p>

<b>Risk 3</b>	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
			3.2 Delivery of the Infection Service Transformation Programme	The Board is asked to note the update provided
			3.3 Delivery of the Screening for the Future Programme	The Board is asked to note the update provided
			3.4 Review to ensure that our Screening and Microbiology operating systems are all 'failsafe'	The Board is asked to note the update provided
			3.5 Implementation of UK National Screening Committee recommended new tests (Primary Human Papilloma Virus Testing, HPV and Faecal Immunochemical Testing, FIT)	Update 3 May 2019: <u>Implementation of Primary Human Papilloma Virus Testing (HPV) for Cervical Screening</u> was completed in October 2018.  <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

				<p>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><b>To account for the phased implementation of FIT, and a legal challenge during the procurement process which was eventually dismissed (as reported previously), the Board is asked to approve an extension</b></p>
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				<b>for this action to September 2019.</b>
			3.6 Implementation of Cervical Screening Information Management System (CSIMS)	<p>Considerable delay was initially experienced in obtaining essential demographic information. This prevented progress to original timescales. Partner organisations have now provided the data and the project has now commenced. CSIMS system development and testing is progressing. Following robust service acceptance testing by CSW colleagues, it is anticipated that full implementation will take place by end of Quarter 2, 2019/20.</p> <p><b>To account for the initial delay to the project and the need for robust service testing, the Board is asked to approve an extension for this action to September 2019.</b></p>
			3.7 Implementation of risk-based diabetic eye screening	The Board is asked to note the update provided

			3.8 Delivery of Estates Action Plan and Health / Safety Action Plan	The Board is asked to note the update provided
			Sources of Assurance	Three new sources of assurance have been identified: <ul style="list-style-type: none"> <li>• introduction of the National Health Protection Transformation Board,</li> <li>• Screening for the Future Programme Board and the</li> <li>• Public Health Services Directorate Leadership monthly meetings</li> </ul>
			Controls	a new control has been identified in relation to the introduction of the National Health Protection Service Implementation (including investment) Plan
<b>Risk 4</b>	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	Deputy Chief Executive, Executive Director Operations and Finance	Assuring Group	The Board is asked to note that the assuring group for this risk has been identified as the Knowledge, Research and Information Committee  The Board is asked to note the update including

	suffer collateral damage from a wider ranging cyber-attack.			a number of completed actions.
<b>Risk 5</b>	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.	Interim Executive Director Health and Wellbeing	Current risk score	The Board is asked to note that the likelihood of this risk has been reduced from 4 to 2, consequently <b>reducing the current risk score from 10 to 20</b>
			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.	The Board is asked to note the update. The action has turned to red. No requested change to due date has been made. This will be followed up with the lead Executive
			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	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. The action has turned to red. No requested change to due date has been made. This will be followed up with the lead Executive
			5.10 Agree and establish a process to take forward the recommendations in the Long Term Conditions – Investment in Prevention paper	The Board is asked to note the update. The action has turned to red. No requested change to due date has been made. This will be followed up with the lead Executive

			agreed by NHS Chief Executives and Chairs	
			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. The action has turned to red. No requested change to due date has been made. This will be followed up with the lead Executive
<b>Risk 6</b>	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	6.2 Develop revised Performance Management Framework including how we track progress against our Long Term Strategy and outcome based performance metrics	This action has now been marked as completed
<b>Risk 7</b>	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.	Chief Executive	Executive sponsor	The Board is asked to note that the Executive sponsor has been changed from Tracey Cooper to John Boulton, Director for NHS Quality Improvement and Patient Safety
			Assuring Group	The Board is asked to note that the assuring group for this risk has been identified as the Knowledge, Research and Information Committee

			7.2 Development of a framework for embedding a culture of innovation	<b>The Board is asked to note that this action is now complete</b>
			7.4 Development of a formal working relationship with the Life Sciences hub	<b>The Board is asked to note the update and approve the revised "due date" to September 2019</b>
			7.5 Establishment of a New Technology and Innovation Advisory Forum to advise the Board	<b>The Board is asked to note the update and approve the revised "due date" to December 2019</b>
			7.6 Recruitment of a dedicated Non-Executive Director for Life Sciences	<b>The Board is asked to note the update and approve the revised "due date" to September 2019</b>

#### 4. Recommendation

The Board is asked to:

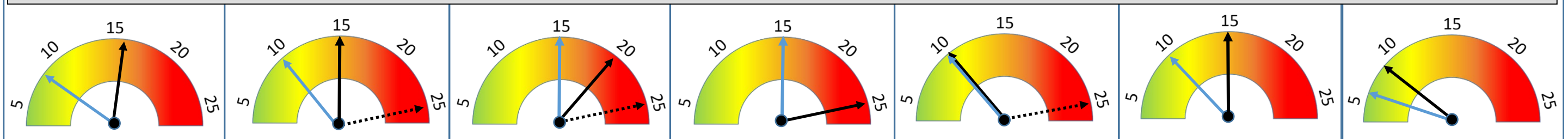
- **Consider** the Board Assurance Framework (BAF) and note the updates provided since the Board meeting held on 30 March 2019;
- **Note** the updates provided; and
- **Approve** the revised "due dates".

Public Health Wales – Board Assurance Framework Strategic Risk Dashboard May 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 |
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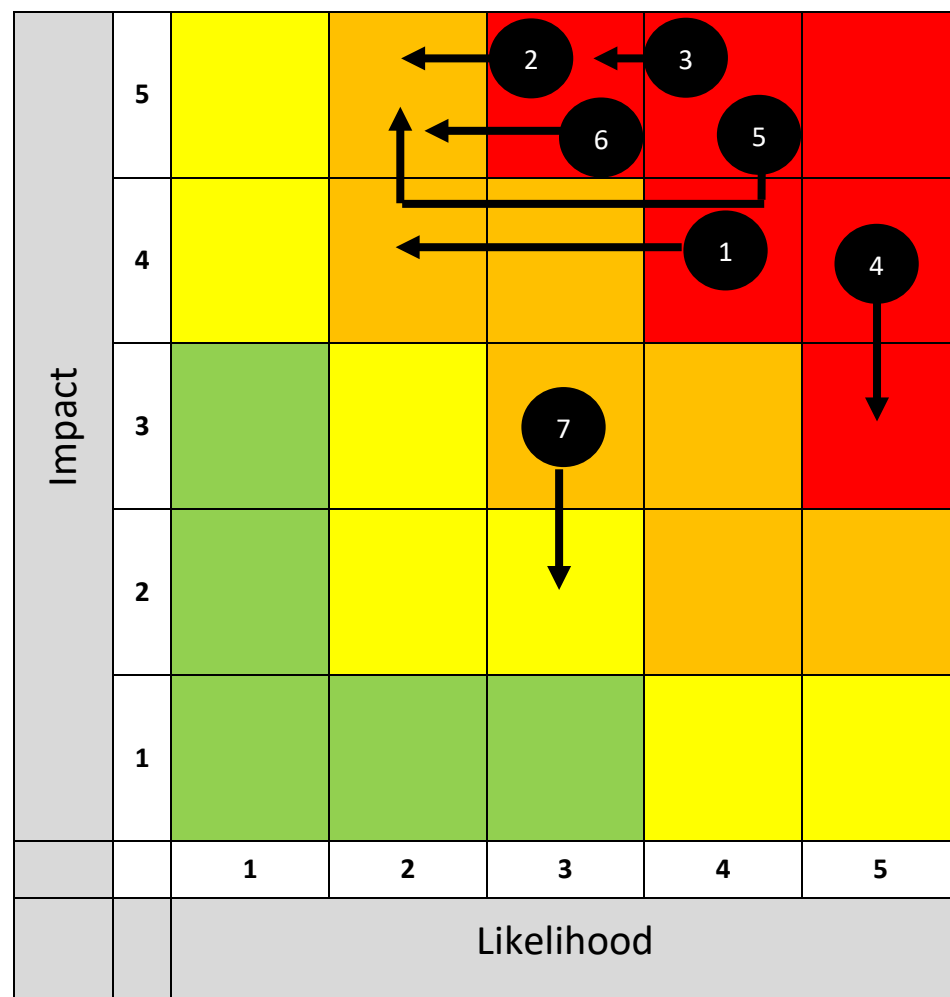
Individual Risk Severity Scores – Inherent ..... Residual → Target → (NOTE - For clarity where inherent and residual risk scores are the same, only the residual is shown)



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							
		<b>Risk 1</b>							
		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								
Improving mental well-being and building resilience	X								
Promoting healthy behaviours	X	<b>Risk Score</b>							
Securing a healthy future for the next generation through a focus on early years	X	<b>Inherent Risk</b>			<b>Current Risk</b>			<b>Target risk</b>	
		Likelihood 4	Impact 4	<b>16</b>	Likelihood 4	Impact 4	<b>16</b>	Likelihood 2	Impact 4
Protecting the public from infection and environmental threats to health	X	<b>Sponsor and Assurance Group</b>						<b>Risk Decision</b>	
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				<b>Treat</b>	
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	Assuring Group		People and Organisational Development Committee					
<b>GAPS IN CONTROLS</b>				<b>GAPS IN ASSURANCE</b>					
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									
<b>ACTION PLAN</b>									
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.						Request change of due date to 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	Linking to the timescales relating to IMTP, complete a 3-year workforce plan for the organisation drawing together information from directorate and priority plans.						Request change of due date to 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	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.						Request change of due date to 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								
		Inherent Risk			Current Risk			Target risk		
Securing a healthy future for the next generation through a focus on early years		Likelihood 5	Impact 5	<b>25</b>	Likelihood 3	Impact 5	<b>15</b>	Likelihood 2	Impact 5	<b>10</b>
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				<b>Treat</b>		
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"> <li>Process inconsistently applied for updating and disseminating new/ update policies</li> <li>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</li> <li>Lack of corporate approach to succession planning and talent management (see Risk 1)</li> <li>Gaps re effective infection and screening service (see Risk 3)</li> </ul>				<ul style="list-style-type: none"> <li>No consistently applied, monitored and reported quality and impact measures</li> <li>Lack of assurance mechanism for 'Raising Concerns' (Whistleblowing)</li> <li>Lack of assurance mechanism in relation to awareness/ staff training re governance/ assurance processes</li> </ul>						
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	A new process for the development and approval of policies, procedures and other written control documents has been developed. Once approved these are posted on the intranet.					Completed
					A central database of policies is now held by the Corporate Governance Team, indicating their current status. This is reported to Quality Safety and Improvement committee and Board twice a year					Completed
					Further work to be undertaken to ensure Directorates are informed when policies are due to be updated.					Oct 2019
	Ensure Directorates have an effective mechanism for updating Standard Operating Procedures (SOPs) when new legislation/ guidance available				Audit to be undertaken to determine SOPs disseminated to staff when updated and staff aware.					Request to extend due date to October 2019
			Further progress has been made on updating policies and procedures e.g. incident management, IP&C policies. Additional work still needs to be undertaken in relation to developing an effective system for disseminating new and revised policies (in addition to placing them on the intranet) and will be progressed as the corporate governance team recruitment process is completed.					Request to extend due date to March 2020		
2.2	Development of an effective mechanism to inform staff of new/ updated policies and procedures				New policies updated onto the intranet				Completed	

		Head of Corporate Governance	Mechanism to be developed to inform staff when policies have been updated	Request to extend due date to October 2019 to align with due dates for action 2.1 above
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 Rhiannon Beaumont-Wood Huw George Sian Bolton	Training on risk and financial management available	Completed
			Quality Hub established and dates disseminated for 2019	Completed
			Information governance training mandatory for all staff	Completed
			Process for research governance in place. We are currently developing a guide to undertaking projects in PHW, which, once finalised, will be available on the research intranet pages. This aims to help raise staff awareness of research governance and processes. The re-design of the intranet pages will be discussed at the research team meeting in April and following this we can approach the web team for them to make the changes required – timelines will depend on their capacity and on the extent of the changes required	Oct 2019
			<b>Update 28/02/19:</b> Commence the development of the Corporate Governance Framework	Dec 2019
2.4	Implementation and reporting of Quality and Impact indicators across the organisation	Rhiannon Beaumont-Wood	Update 10.10.2018 – Indicators will be incorporated into the Integrated Performance Report in October. Due to the timing of Quality and Safety Improvement Committee, the information was not received at the last Committee, will now be presented in January Committee.	Completed
			Indicators developed and approved at Board in May 2018. Indicators to be incorporated into integrated performance report	Completed
			<b>Updated 19/03/2019:</b> Work to be undertaken with Directorates and Divisions to develop the next level of indicators that reflect maturity and impact.	Oct 2019
2.5	Implement an organisational approach to disseminating and raising awareness of the 'Raising Concerns' (whistleblowing) policy	Head of Corporate Governance	Procedure in place and available on the intranet	Completed
			Slide on 'whistleblowing' incorporated into new staff induction	Completed
			Training to be developed for staff	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	Oct 2019
			Lessons from Raising concerns (Whistle blowing) need to be captured and shared	Oct 2019
Systemic method of sharing learning to be developed	Oct 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	March 2019
.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;"><b>Risk 3</b></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	<b>25</b>	4	5	<b>20</b>	3	5	<b>15</b>
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			<b>Treat</b>		
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	Following the allocation letter to Public Health Wales an investment plan has been developed for the £1.1m included in the 2019-20 allocation. This includes recruitment to specialist roles that will address this risk and as such will be the focus of management attention over the next few months. <b>A comprehensive assurance report on Microbiology Stabilisation and the development of the National Health Protection Service was submitted to the Public Health Wales Board on 28 March 2019. Specific priority for Microbiology Services is included in the IMTP Accountability letter from Welsh Government (April 2019).</b>				31 Jul 2019			
3.2	Delivery of the Infection Service Transformation Programme	Executive Director of Public Health Services	The Transformation Programme Board is continuing to meet and has approved Terms of Reference, Governance and reporting arrangements. A Programme team has been established and work streams have commenced. 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. <b>Further engagement with Welsh Government in relation to investment is ongoing. A Welsh Government led workshop for NHS Wales was held in May 2019.</b>				April 2021			
3.3	Delivery of the Screening for the Future Programme	Executive Director of Public Health Services	<b>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.</b> <b>Any ongoing strategic development work from the programme e.g. workforce development, will need to align with Strategic Priority 6.</b> <b>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.</b>				August 2019			
3.4	Review to ensure that our Screening and Microbiology operating systems are all 'failsafe'	Executive Director of Public Health Services	<b>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</b>				June 2019			



			<p>conclusion. This is likely to take at least another six months to complete. Propose date end December 2019.</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>	
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>Update 3 May 2019: <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> <p><b>To account for the phased implementation of FIT, and a legal challenge during the procurement process which was eventually dismissed (as reported previously), the Board is asked to approve an extension for this action to September 2019.</b></p>	<p>April 2019</p> <p><b>Propose change of due date to Sept 2019</b></p>
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. This prevented progress to original timescales. Partner organisations have now provided the data and the project has now commenced. CSIMS system development and testing is progressing. Following robust service acceptance testing by CSW colleagues, it is anticipated that full implementation will take place by end of Quarter 2, 2019/20.</p> <p><b>To account for the initial delay to the project and the need for robust service testing, the Board is asked to approve an extension for this action to September 2019.</b></p>	<p>June 2019</p> <p><b>Propose change of due date to Sept 2019</b></p>
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.</p>	<p>April 2021</p>
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. <b>All actions in relation to HSE Improvement notices are complete and notices removed.</b></p>	

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



	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								
		<b>Risk 4</b>								
		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	<b>Risk Score</b>								
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	<b>Inherent Risk</b>			<b>Current Risk</b>			<b>Target risk</b>		
		<b>Likelihood</b> 5	<b>Impact</b> 5	<b>25</b>	<b>Likelihood</b> 5	<b>Impact</b> 4	<b>25</b>	<b>Likelihood</b> 5	<b>Impact</b> 3	<b>15</b>
Protecting the public from infection and environmental threats to health	X	<b>Sponsor and Assurance Group</b>						<b>Risk Decision</b>		
Supporting the development of a sustainable health and care system focused on prevention and early intervention	X	<b>Executive Sponsor</b>		Huw George, Deputy Chief Executive, Executive Director Operations and Finance				<b>Treat</b>		
Building and mobilising knowledge and skills to improve health and well-being across Wales	X	<b>Assuring Group</b>		Knowledge, Research and Innovation Committee						
<b>GAPS IN CONTROLS</b>				<b>GAPS IN ASSURANCE</b>						
<b>ACTION PLAN</b>										

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;"><b>Risk 5</b></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	<b>25</b>	Likelihood 2	Impact 5	<b>10</b>	Likelihood 2	Impact 5	<b>10</b>
Protecting the public from infection and environmental threats to health	2	x	Sponsor and Assurance Group							<b>Risk Decision</b>  <b>Treat</b>	
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. <b>Work on public information will be ongoing.</b>	31/03/19							
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"> <li>Current application of behaviour change theory across public health system described (Nov 18)</li> <li>Training needs analysis completed (Feb 19)</li> </ul> <b>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.</b>	28/02/19							
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	<b>Update January 2019:</b> A new paper entitled Building a Healthier Wales has been considered by Chairs and Chief Execs on 29 January. The paper received a positive response and was then discussed at the Health and Social Care Leadership Event on 12 <sup>th</sup> March. The paper was also signed off by PHW Business Executive on 19 <sup>th</sup> March and will now go to the Board. <b>We are now moving on to the next steps of establishing a co-ordination group to take forward implementation.</b>  <b>There have been delays in receiving confirmation on the advice provided to Welsh Government on spend for prevention. Confirmation on the allocation of £10m is expected imminently.</b>	31/03/19
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	Subject to identification of new resource , increase support to third sector organisations through the co-design and delivery of the PHW Communities Programme.	Jyoti Atri	The co-design and delivery of the PHW Communities Programme is ongoing. Resource realignment being explored to identify new resource. <b>We have not yet identified additional resource for this. It may be considered as part of Building a Healthier Wales.</b>	31/03/19

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;"><b>Risk 6</b></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									
			<b>Risk Score</b>								
Securing a healthy future for the next generation through a focus on early years	4	X	<b>Inherent Risk</b>			<b>Current Risk</b>			<b>Target risk</b>		
			Likelihood 3	Impact 5	<b>15</b>	Likelihood 3	Impact 5	<b>15</b>	Likelihood 2	Impact 5	<b>10</b>
Protecting the public from infection and environmental threats to health	2	X	<b>Sponsor and Assurance Group</b>						<b>Risk Decision</b>		
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					
Building and mobilising knowledge and skills to improve health and well-being across Wales	4	X	Assuring Group			Audit and Corporate Governance Committee					
<b>GAPS IN CONTROLS</b>						<b>GAPS IN ASSURANCE</b>					
<ul style="list-style-type: none"> <li>Governance arrangements for management of new Long Term Strategy</li> <li>Performance Management Framework aligned to new Strategy and governance arrangements</li> <li>Robust resource based planning</li> <li>Evidence of efficiency across the organisation</li> <li>Model for monitoring savings and investments</li> </ul>						<ul style="list-style-type: none"> <li>Outcome based performance metrics</li> </ul>					
<b>ACTION PLAN</b>											
Action Plan		Owner	Progress Update								Due Date
6.1	Develop new priority oversight and governance arrangements to manage the new strategic priorities as part of transition year	Huw George/ Sally Attwood	<b>Complete.</b> Leads for each priority have been agreed and priority groups have been meeting since September 2018.								Completed
6.2	Develop revised Performance Management Framework including how we track progress against our Long Term Strategy and outcome based performance metrics	Ioan Francis	<b>Update 22/05/19- Complete.</b> Revised Performance Management Framework has been drafted and circulated to the Executive team. An implementation plan will be developed during the next few months to take this forward.								Complete
6.3	Continue to strengthen performance management arrangements throughout the organisations	Ioan Francis	<b>Update 22/05/19- On track-</b> Work continues to strengthen approach to performance management and links to action 6.2 above.								Ongoing
6.4	Realise savings from organisational efficiency work streams	Huw George	<b>Update 22/05/19- On track.</b> After having initially set a balanced plan, an additional savings target was created with £400k of savings linked to organisational efficiency work streams. The savings target of £2.198m excludes the £400k in relation to Organisational Efficiency. All savings schemes have been identified for the £2.198m. The intention for financial year 2018/19 was to identify efficiencies within four areas namely; Procurement, Estates, Travel & Subsistence and Workforce. 61% has been realised from the efficiencies generated from this financial year and have been re-invested in the areas generating the savings with more formalised plans in place for 2019/20 where these savings will form part of the overall savings identified for the Trust.								Ongoing
6.5	Scope options for disinvestment and realignment of budgets including resource mapping against priorities	Huw George/Angela Fisher	<b>Update 22/05/19- On track -</b> Our Budget Strategy 2019/20 has submitted to Welsh Government as part of our Strategic Plan 2019/22 and will further detail provided through our Annual Plan 2019/20. The baseline against our priorities is included in the budget strategy. Further work will be undertaken to refine this baseline during early 2019/20 and this will also be driven through the improved planning arrangements for managing the Strategy.								31 Dec 2019
6.6	Develop improved integrated workforce planning arrangements to understand resource implications	Phil Bushby	<b>Update 14/03/19- On track-</b> To inform development of our Strategic Plan 2019/22, People Business Partners have worked with Directorates to identify any medium to long term workforce issues including shortage specialities or hard to recruit positions. A workforce plan for the period 2019-								Ongoing

			2022 is being drafted and will be available for consideration by the Executive by 31/03/19. Engagement workshops have also been held to further explore longer-term workforce requirements in line with our Long-term strategy which will inform and be fed into the development of the workforce strategy. See updates in risks 1.2 and 1.3.	
6.7	Develop improved planning arrangements through the Senior Leadership Team and Business Leads Group	Sally Attwood/Angela Fisher	<b>Update 22/05/19- on track.</b> Following a workshop with the Senior Leadership team an approach to planning and programme management will be developed. The approach was discussed with Business Leads on the 14 May and will be considered by the Executive Team in June 2019.	Ongoing
6.8	Undertake improved monitoring of savings and investments	Huw George/Angela Fisher	<b>Update 22/05/19- On track</b> Following receipt of the Public Health Wales allocation letter in December 2018, Directorates have identified areas for proposed investment to support and accelerate delivery of the Long Term Strategy. Directorates have identified savings and areas for investment which have been agreed and will be implemented during 2019/20. Delivery of the savings and investments will be monitored through a new process established by the Financial Delivery Unit and as part of our Annual Plan 2019/20. The Finance Business partners will continue to work closely with Directorates to ensure savings plans and investments are delivered within required timescales.	Ongoing
6.9	Evaluate arrangements developed as part of our transition year	Huw George	<b>Update 22/0519 – Complete.</b> A review of our priority arrangements took place on 01 May 2019. Proposals arising from the workshop will be considered at an additional Extended Leadership Team meeting on 03 June 2019 and arrangements communicated at the staff conference on 14 June 2019.	Complete

EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner
Mid and End of Year Reviews Joint Executive Team meetings and papers- biannually Chairs appraisal documentation Quality and Delivery meetings/papers- quarterly Budget setting process	Huw George	Long Term Strategy- Working to achieve a healthier future for Wales Board approved Strategic Plan 2018-21 Board approved Annual Plan 2018/19 Integrated Monthly Performance Report to Board (Service/Finance/People) Annual accounts Audits of financial systems and audit management	Huw George

Applicable Strategic Priorities		Board Assurance Framework									
Influencing the wider determinants of health	X	<p style="text-align: center;"><b>Risk 7</b></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	<b>Risk Score</b>									
Securing a healthy future for the next generation through a focus on early years	X	<b>Inherent Risk</b>				<b>Current Risk</b>			<b>Target risk</b>		
		Likelihood 3	Impact 3	<b>9</b>	Likelihood 3	Impact 3	<b>9</b>	Likelihood 3	Impact 2	<b>6</b>	
Protecting the public from infection and environmental threats to health	X	<b>Sponsor and Assurance Group</b>							<b>Risk Decision</b>		
Supporting the development of a sustainable health and care system focused on prevention and early intervention	X	<b>Executive Sponsor</b>				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	<b>Assuring Group</b>				Knowledge, Research and Innovation Committee					
<b>GAPS IN CONTROLS</b>					<b>GAPS IN ASSURANCE</b>						
Lack of a corporate system for ensuring a consistent approach to innovation and the exploitation of new and emergent technology											
<b>ACTION PLAN</b>											
<b>Action Plan</b>		<b>Owner</b>		<b>Progress Update</b>						<b>Due Date</b>	
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 style="color: red;">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.</p>						31/03/19 Propose change of due date to September 2019	
7.5	Establishment of a New Technology and Innovation Advisory Forum to advise the Board	John Boulton		<p style="color: red;">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.</p>						30/04/19 Propose change of due date to December 2019	
7.6	Recruitment of a dedicated Non-Executive Director for Life Sciences	Helen Bushell		<p style="color: red;">Update May 2019: Recruitment in progress. Advert due to go live early June 2019.</p>						31/03/19 Propose change of due date to September 2019	



EXISTING CONTROLS		SOURCES OF ASSURANCE	
Control	Owner	Assurance	Owner