 <p><b>GIG CYMRU NHS WALES</b> Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p><b>Name of Meeting</b> Board</p> <p><b>Date of Meeting</b> 24 November 2022</p> <p><b>Agenda item:</b> 5.3</p>
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## Public Health Wales Strategic and Corporate Risk Registers

<b>Executive lead:</b>	Rhiannon Beaumont-Wood, Executive Director of Quality, Nursing and Allied Health Professionals
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<b>Approval/Scrutiny route:</b>	Rhiannon Beaumont-Wood, Executive Director of Quality, Nursing and Allied Health Professionals
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### Purpose

Receive the Strategic and Corporate Risk Registers for the purpose of scrutiny, challenge and assurance.

### Recommendation:

APPROVE <input type="checkbox"/>	CONSIDER <input checked="" type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Board is asked to:</p> <ul style="list-style-type: none"> <li>• <b>Receive</b> the Strategic and Corporate Risk Registers for the purposes of scrutiny and assurance.</li> </ul>				

**Link to Public Health Wales [Strategic Plan](#)**

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

This report contributes to all Strategic Priorities

<b>Strategic Priority</b>	Choose an item.
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<b>Strategic Priority</b>	Choose an item.
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**Summary impact analysis**

<b>Equality and Health Impact Assessment</b>	No decision is required.
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<b>Risk and Assurance</b>	This submission is the Strategic and Corporate Risk Registers.
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<b>Health and Care Standards</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
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<b>Financial implications</b>	The financial implications of failing to manage corporate risk effectively are significant, both in terms of the potential for loss and also the failure to capitalise on opportunities.
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<b>People implications</b>	No people implications.
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## 1. Purpose / situation

This paper presents the organisations Strategic and Corporate Risk Registers, highlighting any areas of concern that may require further discussion. This paper must be read in conjunction with the Strategic and Corporate Risk Registers.

All Committees consider the Strategic and Corporate Risk Registers and the relevant risks specific to the Committee at each Committee meeting.




The Strategic Risk Register is provided to the Board three times a year and the Corporate Risk Register twice a year to offer assurance over and above the role of the Committees and Business Executive Team.

The Strategic Risk Register details the six current Strategic Risks that were approved by the Board in May 2022. These are the highest-level risks that could prevent the organisation from delivering on its strategic priorities.

The Corporate Risk Register details the seven highest-level operational risks that are being managed on a day-to-day basis by Executive Directors. The Corporate Risk Register was refreshed and approved at BET in September 2022.

## 2. Delivery Confidence Assessment

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

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

## 3. Risk Appetite

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

Strategic Theme	Appetite Descriptor
Enabling better population health and reducing health inequalities through preventative and sustainable measures	Willing

Delivering excellent services for population screening programmes, health protection and infection	Cautious
Supporting improvements in the quality and safety of health and care services	Keen
Maximising the use of digital, data and evidence to improve population health	Willing
Enabling the successful delivery of the plan	Willing

## 4. Strategic Risks

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

An assessment of each of the six strategic risks by the respective risk owner is shown below, along with the current Delivery Confidence Assessment. The full risks are provided in Appendix 1 and 2.

### 4.1. Risk 1

The controls in place relate to teams or meetings that discuss the topic of the risk. One control is assured at the highest level of assurance, the remaining at a BET level or are currently not indicated. A number of actions have been identified and completed during this reporting period. Assurance can be taken in the robust process in place to monitor and respond to potential emerging geopolitical, socio-economic and health threats.

Risk Description						
There is a risk that Public Health Wales will not be sufficiently focused, agile and responsive in discharging our functions, caused by the unpredictable and changing nature of the current and emerging geopolitical, socio-economic and health threats, resulting in an inability to tackle the population health challenges in a sustainable way.						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not Applicable		
Risk Scoring		Score at last Board			Present Score	
Inherent	4	4	16	4	4	16
Current	4	4	16	4	4	16
Target	3	4	12	3	4	12
DCA at last Board				Present Live DCA		
Amber				Amber		
Executive Sponsor Insight						

Ministerial approval of the Board approved IMTP remains outstanding. However the organisation is managing the risk by continuing to monitor the impact of the IMTP to respond to potential emerging geopolitical, socio-economic and health threats. The development of a key data dash board to monitor the health of the nation will provide information to inform any new or additional interventions to respond to emerging health and wellbeing needs. We have met with the CMO and officials in relation to the cost of living crisis and committed to developing a public health approach to it. This is being progressed in a coordinated way across the organisation and will also consider how we best support our own staff. We continue to have regular meetings with Minister's and officials and we are actively engaged with the WHO and IANPHI in order to help identify, assess and support current and emerging threats.

### Overview of changes to controls/actions

(text marked in red in full risk which can be found in Appendix 1.

<b>Controls</b>	The control in relation to meetings with a number of International Association of National Public Health Institutes (IANPHI) European Institutes and Ukraine Public Health Institute have now ceased and are incorporated into a more general engagement.
<b>Actions</b>	Updates have been provided for all actions with two being completed since the register was last submitted to the Board. These actions address a gap in control relating to a requirement for a more formalised series of collective public health 'threat' assessment to include health, environmental, socio-economic and geopolitical threats, to be incorporated into Strategic Business Executive Team business.
<b>Opportunities</b>	None identified.

## 4.2. Risk 2

Risk 2 is the only risk in which the DCA is indicated to be green rather than amber. This is due to the delivery of excellent services continuing to be an overarching priority. The controls have been fully refreshed and cover a wide range of topics, many of which are assured at the higher levels of Committee(s) and Board. The actions identified relate to internal changes to screening, health protection, microbiology and clinical infection services to address the external environment creating the risk and are actively progressing, providing the assurance that the risk is being managed.

### Risk Description

There is a risk that Public Health Wales will not deliver its plans for delivering excellent services for population screening, health protection and infection

caused by uncertainty of the impact of current and future health threats and lack of specialist workforce, resulting in inability to prioritise service delivery and transform models of care.

Risk Appetite				Proposal for de-escalation or removal*		
Cautious				Not Applicable		
Risk Scoring	Score at last Board			Present Score		
Inherent	3	3	9	3	3	9
Current	4	3	12	4	3	9
Target	3	2	6	3	2	6
DCA at last Board			Present Live DCA			
Amber			Green			
Executive Sponsor Insight						
The current DCA remains stable, and the directorate continues to hold the delivery of excellent services as the overarching priority. Both incremental continuous improvement and some service transformation continue against a backdrop of significant strategic and operational demands. The Directorate have thoroughly reviewed and sharpened the focus of the actions during the month of October resulting in a number of new actions being noted						
Overview of changes to controls/actions						
(text marked in red in full risk which can be found in Appendix 1.						
Controls	Reviewed and refreshed in September.					
Actions	Review of actions in October resulting in the removal of some which were pointing more towards core delivery activity. A number of new actions have been identified.					
Opportunities	In addition to utilising the forecast underspend in the Directorate to expedite elements of service transformation; the Directorate is leveraging the opportunity presented by the refresh of the LTS to strengthen and articulate a compelling narrative and agreed understanding of excellent services for population screening, health protection and infection.					

### 4.3. Risk 3

It would appear that the controls in place are operating effectively to reduce the risk. Planned actions are being progressed, noting the interdependencies with other functional areas across the organisation. The majority of the actions are due to be delivered by the end of the financial year which should have a significant impact on the risk.

Risk Description						
There is a risk that we will not manage organisational change well, caused by multiple change programmes being implemented simultaneously, but in isolation, and insufficient time to effectively engage an exhausted workforce, resulting in high levels of sickness absence, vacancies, staff turnover and stress.						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not Applicable		
Risk Scoring	Score at last Board			Present Score		
Inherent	5	5	25	5	5	25
Current	3	5	15	3	5	15
Target	3	3	9	3	3	9
DCA at last Board				Present Live DCA		
Amber				Amber		
Executive Sponsor Insight						
The current DCA remains stable and the planned actions are being progressed, noting the interdependencies with other functional areas across the organisation.						
Overview of changes to controls/actions (text marked in red in full risk which can be found in Appendix 1.						
Controls	No changes.					
Actions	The actions have been fully refreshed since the last time the register was submitted to Board.					
Opportunities	The Long Term Strategy refresh and Quality as an Organisation Strategy work provides an opportunity to identify future priorities collaboratively, that will enable a more planned and sustainable approach to the management of change, which will mitigate the identified level of risk.					

#### 4.4. Risk 4

The controls in place are owned by all Executives rather than one designated area so it is important to ensure the controls are coordinated. There are a number of actions which are due to be completed by the end of the financial year with a number dependant on each other.

Risk Description
There is a risk that we are unable to attract and retain the required professional workforce caused by skill shortages and increased pressures on

staff, which has been exacerbated by the Covid-19 pandemic, resulting in there being insufficient capability and capacity to deliver our plans						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not Applicable		
Risk Scoring		Score at last Board			Present Score	
Inherent	5	5	25	5	5	25
Current	3	5	15	3	5	15
Target	3	3	9	3	3	9
DCA at last Board				Present Live DCA		
Amber				Amber		
Executive Sponsor Insight						
Our work around the employee value proposition (EVP) has now commenced, with stakeholder meetings currently taking place. A focus group session with Leadership Team and Exec is planned for the 21 Nov. Early actions are about gaining insight into current climate/culture/offer, alongside engaging key stakeholders in shaping our future offer.						
Overview of changes to controls/actions (text marked in red in full risk which can be found in Appendix 1.						
Controls		No changes.				
Actions		Actions linked in IMTP are progressing well.				
Opportunities		As we move through the focus groups and analysis of what makes us / will make us a great place to work, we will be a more informed position to tailor our offer in a way which makes us attractive to both internal and external employees/potential employees. This, alongside other POD projects, will support attraction and retention thereby mitigating associated risks.				

#### 4.5. Risk 5

Key investments have been made and we will further review the actions to ensure they are the right actions to impact positively on the risk. It is recognised that the impact of these actions will be longer term. The previous gaps in controls have now been updated and filled. The risk score remains the same.

<b>Risk Description</b>
There is a risk that we will fail to exploit data to inform and direct public health action and interventions. This will be caused by data being held in silos, difficulty accessing the data and inability to access to provide the impact on



public health. This will result in worse public health outcomes in Wales and increased information governance risk within Public Health Wales.						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not Applicable		
Risk Scoring	Score at last Board			Present Score		
Inherent	5	4	20	5	4	20
Current	5	4	20	5	4	20
Target	3	4	12	3	4	12
DCA at last Board				Present Live DCA		
Amber				Amber		
Executive Sponsor Insight						
A key element of the risk relates to the recruitment of key hires. All investments posts have now been appointed into.						
Overview of changes to controls/actions (text marked in red in full risk, which can be found in Appendix 1.)						
Controls	One control (SR 5.4) has been identified since the register was last submitted to Board.					
Actions	The gaps in control to which the identified actions are addressing have now been indicated with some additional new actions indicated.					
Opportunities	None identified.					

#### 4.6. Risk 6

Risk Description		
Risk Appetite		Proposal for de-escalation or removal*
Risk Scoring	Score at last Board	Present Score
Inherent		
Current		
Target		
DCA at last Board		Present Live DCA
Executive Sponsor Insight		

<b>Overview of changes to controls/actions</b> (text marked in red in full risk which can be found in Appendix 2.	
<b>Controls</b>	
<b>Actions</b>	
<b>Opportunities</b>	

## 5. Corporate Risk Register

The Corporate Risk Register has been fully refreshed since it was last considered at the Board. Public Health Wales now has six corporate risks where were approved at Business Executive Team in September 2022. An assessment of each of the risks by the respective risk owner is shown below The full risks have been provided in Appendix 3.

### 5.1. Risk 203

The risk has a number of controls in place however the risk score currently remains the same. There is one action identified which has progressed over the last 12 months i.e. working with partners to increase the number of clinic locations. The new clinic pilot project is progressing well and as this work continues, the risk should be appropriately addressed.

<b>Risk Description</b>						
DESW is unable to provide an accurate and quality-assured programme to the diabetic population of Wales, and to transform the service to provide quality-assured programme for the increasing diabetic population.						
<b>Risk Appetite</b>				<b>Proposal for de-escalation or removal*</b>		
Cautious				Not applicable		
<b>Risk Scoring</b>	<b>Score at last Board</b>			<b>Present Score</b>		
Inherent	5	4	20	5	4	20
Current	5	4	20	5	4	20
Target	3	4	12	3	4	12
<b>Overview of changes to controls/actions</b> (text marked in red in full risk which can be found in Appendix 3.						
<b>Controls</b>	No changes.					
<b>Actions</b>	Utilising directorate underspend to allocate £200K resource to support service transformation managed through the Programme Transformation Board. Currently out to the					

	digital market place to procure specialist capacity to support the alpha phase of the transformation.
<b>Opportunities</b>	Exploiting the opportunity provided by the directorate underspend.

## 5.2. Risk 207

The risk has a number of controls in place however the risk score remains the same. A number of preparatory scoping activities have been completed however further progress on the remaining actions has been impacted by the delays associated with the publication of the Duty of Quality and Duty of Candour guidance which is currently out to consultation and the timeline is outside the control of the organisation.

Risk Description						
There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020)						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not applicable		
Risk Scoring	Score at last Board			Present Score		
Inherent	5	4	20	5	4	20
Current	4	4	16	5	4	20
Target	3	4	12	3	4	12
Overview of changes to controls/actions (text marked in red in full risk, which can be found in Appendix 3.						
<b>Controls</b>	All controls have been refreshed including an external provider being commissioned and is now in place to support PHW in implementation of the Quality as an Organisational Strategy methodology.					
<b>Actions</b>	All actions have been full refreshed.					
<b>Opportunities</b>	<p>Joint communications pending sign off and will start the communication process to support engagement of the wider organisation with Quality as an organisational Strategy.</p> <p>Duty of Candour representative will be on the Duty of Quality SRO group to ensure close alignment.</p>					

## 5.3. Risk 206

The controls in place indicate a positive impact on reducing the risk. A notable progression is the improvement in appraisal compliance providing the organisation with quantitative data. The action to carry out a quality audit on

appraisals to ascertain that the performance is indeed aligned to the priorities remains important to further reduce the risk.

Risk Description						
Risk that individual and team performance and development is not aligned with the organisation's strategic and operational priorities						
Risk Appetite			Proposal for de-escalation or removal*			
Willing			Not applicable			
Risk Scoring	Score at last Board			Present Score		
Inherent	4	4	16	4	4	16
Current	4	3	12	4	3	12
Target	1	3	3	1	3	3
Overview of changes to controls/actions (text marked in red in full risk which can be found in Appendix 3.						
<b>Controls</b>	No changes.					
<b>Actions</b>	The actions relating to continuous and improved monthly and quarterly reporting to BET collectively and individual directors, with the addition of ESR drop in sessions for the areas with the largest compliance deficit has now been completed and a quality audit of "My Contributions" is underway.					
<b>Opportunities</b>	<p>The 12-month rolling compliance for My Contribution appraisals is currently at 66.7% against the Welsh Government target of 85%.</p> <p>Since April 2022, we have seen a nearly 10% increase in Appraisal Compliance, from a figure of 57.7% at the start of the financial year.</p> <p>With pay progression coming into force in October 2022, part of the criteria to be put forward for an increment is staff needing to have an appraisal date entered into ESR within the last 12 months, which has had a positive impact on appraisal compliance figures.</p> <p>(To support the introduction of pay progression a communications plan was developed that included direct emails to those immediately affected. In addition, a suite of resources to support staff and Line managers were made available and drop-in sessions were undertaken to provide advice and guidance. This has resulted in pay progression meetings being recorded in ESR for all staff who are due a Pay-step in October.)</p>					

	We continue to hold regular ESR drop-in sessions for managers and staff who require support with ESR. These are well received by those accessing the support. We continue to provide directorate level monthly compliance data on My Contribution dates recorded in ESR. A reminder about Mid-year reviews was recently communicated via internal communications channels. My Contribution E-Learning is available on ESR; My Contribution toolkit is available on Sharepoint.
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#### 5.4. Risk 301

This risk is new, following the refresh of the Corporate Risk Register and activities have already progressed in order to reduce the risk. A tender processed for EVP work has already been completed.

Risk Description						
There is a risk that we will not deliver our IMTP (Integrated Medium Term Plan) due to challenges involved in securing resources at the right time, at the right cost, with the right skills						
Risk Appetite				Proposal for de-escalation or removal*		
Willing				Not applicable		
Risk Scoring	Score at last Board			Present Score		
Inherent				4	4	16
Current				3	4	12
Target				2	4	8
Overview of changes to controls/actions (text marked in red in full risk which can be found in Appendix 3.						
<b>Controls</b>	This is a new risk and as such all control are new.					
<b>Actions</b>	This is a new risk and as such all actions are new.					
<b>Opportunities</b>	None identified.					

#### 5.5. Risk 208

The risk has a number of controls in place however they do not appear to be reducing the risk (score). Many of the actions have been progressing for over a year with one action paused (single on-call for Microbiology). The action relating to the provision of funding for Agency Consultants has been resolved for the next financial year but beyond this period funding remains uncertain and therefore does not reduce the risk.

Risk Description						
There is a risk that Health Protection and Screening Services will not be able to deliver high quality services in North Wales Infection division as they are struggling to recruit and retain sufficient medical and clinical staff.						
Risk Appetite			Proposal for de-escalation or removal*			
Cautious			Not applicable			
Risk Scoring	Score at last Board			Present Score		
Inherent	4	4	16	4	4	16
Current	4	4	16	4	4	16
Target	2	2	4	2	2	4
Overview of changes to controls/actions						
(text marked in red in full risk which can be found in Appendix 3.						
Controls	No change in controls					
Actions	Progress against action plan continues with some filled recruitment noted. Strategy paper has been developed and is currently working through divisional and directorate governance for scrutiny, discussion and decision.					
Opportunities	Taking the opportunity to revisit approach and agree the strategic direction.					

## 5.6. Risk 302

This risk is new following the re-refresh of the Corporate Risk Register and as such has not been submitted to the Board previously. However, a number of controls have been identified and the one action is completed. It is proposed that this risk will be considered by BET in December for closure.

Risk Description						
There is a risk that PHW will be unable to deliver key capital projects detailed within our IMTP, deliver our planned capital replacement programme or undertake remedial works for our services and estate.						
Risk Appetite			Proposal for de-escalation or removal*			
Tolerate			Proposal for removal of risk to be considered at December's BET			
Risk Scoring	Score at last Board			Present Score		
Inherent				4	4	16
Current				4	2	8
Target				4	2	8
Overview of changes to controls/actions						
(text marked in red in full risk, which can be found in Appendix 3.						

<b>Controls</b>	Capital Monitoring Group oversees deliver of agreed Capital programme.
<b>Actions</b>	Capital plan for remainder of 22/23 has been finalised. Directorates/ Divisions were asked to prioritise their statements of need for consideration by Capital Planning Group. Directorates/ Divisions have been informed of the outcome of this exercise and are progressing the agreed procurements as required. Our Capital forecast for 22/23 has also been submitted to Welsh Government on 31/10/22. Proposal for removal of risk to be considered at December's BET.
<b>Opportunities</b>	Not applicable.

## 6. Additional Considerations

The following section details any additional considerations for this Board.

### 6.1. New Risks

The following risks have been removed from the Register since it was last considered at the Committee:-

- Risk 301 - There is a risk that we will not deliver our IMTP due to challenges involved in securing resources at the right time, at the right cost, with the right skills
- Risk 302 - There is a risk that PHW will be unable to deliver key capital projects detailed within our IMTP, deliver our planned capital replacement programme or undertake remedial works for our services and estate.

### 6.2. Risks escalated or de-escalated

The following risks have been removed from the Register since it was last considered at the Board:-

- Risk 201 - There is a risk that we will fail to make necessary organisational changes required to achieve public health impact and organisational objectives. This is due to the risk being superseded by a strategic risk.
- Risk 202 - There is a risk that that we will fail to be sufficiently prepared to meet the requirements of a public inquiry. Whilst components of the risk remain, actions have now been completed and the management of the risks have matured. There is an internal Programme Board for Public Inquiry preparedness, chaired by the CEO, which has its own risk register.

- Risk 204 - There is a risk that we will fail to exploit data to inform and direct public health action and interventions. This is due to the risk being superseded by a strategic risk.
- Risk 205 – There is a risk that we won't recruit, develop and retain a diverse workforce that is representative of the communities we serve, with the right skills, in the right numbers, deployed in the right place at the right time. This is due to the risk being superseded by a strategic risk.

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

No decision required.

## **8. Recommendation**

The Board is asked to:

- **Receive** the Strategic and Corporate Risk Registers for the purposes of scrutiny and assurance.