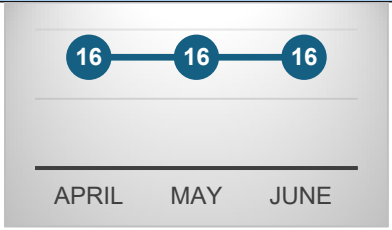
<table>
<tr><td>Risk Reference and Link to Strategic Priority</td><td colspan="2">Risk Description</td></tr>
<tr><td>SRR 5

Strategic Priority

“Enabler Risk and incorporates all Strategic Priorities.”</td><td colspan="2">There is a risk that:
Failure to modernise and transform how we provide and deliver our services

Caused by:
• Lack of capability and capacity in leading, managing, delivering and communicating transformational change
• Failure to fully exploit digital and data
• Lack of maturity in benefits realisation from change delivery
• Lack of ability to deliver improvement at pace

Resulting in poorer quality services, outcomes, value and organisational effectiveness</td></tr>
<tr><td>Executive Director Sponsor</td><td colspan="2">Research, Data and Digital</td></tr>
<tr><td>Assuring Committee</td><td colspan="2">Knowledge, Research and Information Committee</td></tr>
<tr><td>Trend</td><td>Current Position of Risk Including Risk Appetite and Risk Decision</td><td>Position Statement – Executive Director Update</td></tr>
<tr><td> 
</td><td><table><tr><td>Willing</td><td>PHW is eager to be innovative and take on a high level of risk, but only in the right circumstance.</td></tr></table>Current Score = 16
Target Score = 6
Risk Appetite Level Applied = Willing, therefore, within tolerance level.</td><td>It will be a challenge to deliver the current change portfolio given the level of change maturity across the organisation.

We need a clear narrative for strategic and transformational change that helps our staff and stakeholders to understand what we are trying to achieve through our change portfolio, how it will affect them, the overarching benefits we are looking to deliver.

There is currently limited visibility of the cumulative impact of change across the organisation, making it difficult to assess overall change capacity and the impact on staff and services. There is therefore a</td></tr>
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		risk that additional demands could destabilise the existing change portfolio. Managing the scale of change is difficult due to the insufficient leadership capability and capacity for transformation and inconsistent levels of change management experience across the directorates. There is a desire to simply replace what already is in place rather than look at most efficient ways of delivering our services and meeting user needs. There have been some examples of inconsistent adherence to governance processes which compromises appropriate standards being followed. These factors collectively increase the complexity and vulnerabilities of delivering initiatives. Many aspects of the portfolio are dependent on external stakeholders, including DHCW and third-party suppliers. Active management of these relationships is required for successful delivery.

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance **C1: Lack of capability and capacity in leading, managing and delivering transformational change**			
Control Reference	**Internal Control**	**Internal Sources of Assurance**	**How/When is it monitored?**
C1.1	Annual Planning Process, including assessment of IMTP feasibility, to include a	Strategic planning process (including formal approval and change control) covering:	Portfolio review Change Board

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance **C1: Lack of capability and capacity in leading, managing and delivering transformational change**			
Control Reference	**Internal Control**	**Internal Sources of Assurance**	**How/When is it monitored?**
	high level 3–5-year road map for expected delivery	• Long Term Strategy • Strategic Priority Routemaps • IMTP, inc assessment of IMTP feasibility • Digital and Data Strategy and Route Map IMTP • Directorate and Divisional level planning • Programme Plans	BET Board DDDA AIDA
C1.2	Annual planning process including BAU Planning from all directorates to assess delivery feasibility, to include a high-level 3–5-year road map for expected delivery	Directorate Business Leads • Directorate planning of BAU requirements • Directorate procurement forward look • Organisational plan • Digital assurance reporting and Delivery Confidence Assessments • Programme reporting and Delivery Confidence Assessments	• Directorate • DDDA • AIDA • Change Board • BET • Board
C1.3	**Organisational Change Capacity and Demand Management** • Establish and maintain a single organisational view of all change activity (operate, improve and transform), including assessment of	• Integrated portfolio dashboard (change demand vs capacity) • Directorate validation of impact on BAU and workforce	• Change Board • BET • Board

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance **C1: Lack of capability and capacity in leading, managing and delivering transformational change**			
Control Reference	**Internal Control**	**Internal Sources of Assurance**	**How/When is it monitored?**
	cumulative impact on services, teams and workforce capacity • Formal prioritisation and sequencing of change activity aligned to organisational strategy and available capacity		
C1.4	Communication of change Develop a clear and compelling narrative that helps staff and stakeholders understand our overarching strategic vision for transformation, how it will support our organisational strategy and what it will mean for staff and stakeholders.	Creation of an organisation strategic objective that aligns with the business need	All enabling functions Change Board BET
C1.5	Digital and Data Strategy and Routemap implemented.	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	Change Board BET Board
C1.6	Include resource provision for programme enabling functions as part of the discovery phase of a programme. Enabling functions offer to be developed to provide a more equitable proposition across the portfolio.	Plan to be created Strategic Risk 2 Strategic Risk 2.docx	• Directorate management • Programme Management • Change Management across the whole organisation
C1.7	**Organisation-wide Change Capability Framework** • Development and implementation of a consistent organisational approach to	• Creation of a change capability framework • Leadership development participation and feedback	Change Board BET Board

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance **C1: Lack of capability and capacity in leading, managing and delivering transformational change**			
Control Reference	**Internal Control**	**Internal Sources of Assurance**	**How/When is it monitored?**
	building change capability across leaders, managers and staff • Defined expectations for leadership behaviours in leading and sustaining change	• Staff engagement and change readiness indicators • Change management processes implemented across the organisation successfully	
C1.8	Establishment of centralised Business Change expertise in The Research, Digital and Business Transformation Directorate	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	Change Board BET Board
C1.9	Commissioning of change: All proposed business change discussed and planned as early as possible with all relevant parts of the organisation through the planning process	• Commissioning of all significant business change (defined as Tier 1 or 2) through Change Board including: ○ Identification and review of pipeline change proposals at Change Board ○ Use of prioritisation criteria to identify the programme tier (1, 2 or 3) ○ Approval of Programme Brief at Change Board required for a new change programme to be mobilised. ○ Review of monthly Delivery Confidence Assessments by all programmes/ projects on the Change and Digital Portfolios	Change Board BET Board DDDA / AIDA, where required

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance **C1: Lack of capability and capacity in leading, managing and delivering transformational change**			
Control Reference	**Internal Control**	**Internal Sources of Assurance**	**How/When is it monitored?**
		• Assessment of digital feasibility by DDDA required for all programmes that involve digital • Assessment of feasibility by specific Directorates and Divisions, including enabling functions such as Communications, Finance, Digital, Estates and People and OD.	

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance [1] **C2: Failure to fully exploit digital and data**			
Control Reference	**Internal Control**	**Source of Assurance**	**How/When is it monitored?**
C2.1	Migration of our data and analysis to the Cloud is being piloted with a view to a full migration of all our analytical resource to the NDR by March 2027	Assurance and Progress reporting	DARC Programme Board Analysis Project Board Data project board
C2.2	Small data science team created and beginning to increase the analytical capability with work now carried out on new tools.	Assurance and Progress reporting	AIDA DARC Programme Board Analysis Project Board
C2.3	Ensure agile User Centred Design approach is used in the planning and discovery phase of a digital change programme	User Needs Log User Requirements linked to user needs Programme Specification	Service Users/Owners Programme Board DDDA AIDA

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance [1] **C2: Failure to fully exploit digital and data**			
Control Reference	**Internal Control**	**Source of Assurance**	**How/When is it monitored?**
C2.4	R, Python and Power BI established as tools of choice for most new analysis	Assurance reporting	DARC Programme Board DSAB
C2.5	Integration of genomics into our digital and data strategy and delivery routemap has begun.	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	DDDA AIDA Digital & Data Portfolio Change Board BET Board
C2.6	**Digital and Data Workforce Capability** -Strategic Workforce Plan in place, aligned to digital and data transformation priorities -Clear identification of current and future digital, data and analytical skills requirements -Defined workforce pipelines including recruitment, apprenticeships and upskilling pathways -Ongoing development of digital and data literacy across all staff, including leadership	**Assurance:** -Workforce metrics (vacancies, time to recruit, retention in key roles) -Skills gap analysis and workforce capability assessments -Uptake and completion of digital and data training programmes -Evidence of increased use of digital tools and data in decision-making	BET Workforce / People & OD governance DDDA / AIDA (for alignment to digital strategy) Strategic Risk 2

Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance [1] **C3: Lack of maturity in benefits realisation from change delivery**			
Control Reference	**Internal Control**	**Source of Assurance**	**How/When is it monitored?**
C3.1	A clear Benefits Realisation Framework is designed, implemented and applied consistently across all change programmes, including: • Defined benefits, baselines and metrics • Named benefit owners within business areas • Tracking of benefits during delivery and post-implementation into BAU	Benefits Framework to include the organisation benefit acceptance rules, named benefit owners, calculation metrics and baseline requirements which must be used by all programmes **Benefits Realisation into BAU** Benefits must be tracked and reported beyond programme closure to demonstrate sustained value **Source of Assurance:** Portfolio reporting of planned vs realised benefits Post-implementation reviews (6–12 months post-delivery)	Programme Boards Benefit Owners Change Board DDDA
C3.2	All change programmes must ensure clinical approval is sought and obtained for any changes that impact clinical systems and / or services, where required	Clinical Governance Group Service Owner Programme Managers	Clinical Governance Group BET Board
C3.3	Discovery of benefits and delivery requirements for each proposed change to be completed prior to the creation of the Business Case	Discovery reports to be submitted to change board. These will identify and quantify key financial benefits of the proposed change and the estimated resource requirement to allow for effective decision making	Programme Lead DDDA/AIDA if digital proposal Change Board BET
Internal System of Controls – Linked to 'Caused By' section of Risk Description and Source of Assurance [1] **C4: Lack of ability to deliver improvement at pace**			

Control Reference	Internal Control	Source of Assurance	How/When is it monitored?
C4.1	Identification of the internal resource that is required to complete a programme of change successfully with active collaboration to meet the programme requirements together	Defined change management process Appropriate programme initiation reviews ensuring the right experts are in the room Resource requirements for change programmes to be defined	TBD – Check with all directorates on their current processes
C4.2	Earlier identification of dependencies on DHCW Active management of DHCW delivery for specific programmes eg LIMS.	IMTP Feasibility Assessment Change Portfolio and D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC Monthly planning meetings between PHW DHCW Change Board Assurance report including DCA Reporting against change portfolio programmes	Programme Board Change Board DDDA Dependency identification, mapping and agreement undertaken as part of planning process for internal agreement
C4.3	Earlier and more precise identification of supplier dependencies at programme and portfolio levels	Change Board – analysis of dependencies at portfolio level DDDA – analysis of dependencies at portfolio level Tier 1 and 2 programme plans Digital delivery plans	Programme Board Change Board DDDA Dependency identification, mapping and agreement undertaken as part of planning process for internal agreement
C4.4	Earlier and more precise identification of Local Health Board dependencies at programme and portfolio levels	Change Board – analysis of dependencies at portfolio level DDDA – analysis of dependencies at portfolio level	Programme Board Change Board DDDA

		Tier 1 and 2 programme plans Digital delivery plans	Dependency identification, mapping and agreement undertaken as part of planning process for internal agreement
C4.5	Regular portfolio reviews to be undertaken at an organisation level (every 6 months) to assess the viability of the change portfolio and to ensure all programmes still align with the organisation's strategic goals	Programme delivery timelines Decision turnaround times IMTP Delivery Assessment (6-Monthly) All directorates to review and update plan based on current and planned priorities Change Board – analysis of dependencies at portfolio level DDDA – analysis of dependencies at portfolio level Tier 1 and 2 programme plans Digital delivery plans	Portfolio Review Change Board DDDA Dependency identification, mapping and agreement undertaken as part of IMTP planning process for internal agreement

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
AP1.2 & AP2.2	Increase Digital, Cloud, Cyber and Data management technical skills capability into PHW as a result of additional investment.	Successful recruitment of Cloud Engineers, Data Engineers, Developers, Cyber Specialists, Technical	Create capacity and depth of skill to meet deliverables of IMTP/BAU requirements.	Governance & General Manager – RDDD / Director of PoD	31/12/2025	**June 2026** Multiple roles are currently being progressed to support delivery

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
		Project Managers funded by PHW investment.				requirements across Lung, DHP and OPIP. However, all posts are being offered as fixed-term contracts and, due to current recruitment restrictions, this is creating operational challenges. There is a significant risk that programme delivery will be affected, as the limited duration and constraints attached to these roles make them less attractive to candidates who have alternative employment options. **April 2026** Recruitment activity is underway to fill the Cloud Engineer

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						vacancy following a resignation. The Systems Architect is scheduled to commence in May 2026. NDR funding from DHCW has been paused pending review. This is anticipated to impact Cloud and Data Engineer posts funded through this source, including agency-funded technical specialist roles. Completion date changed due to this update.
AP1.3	Engage technical agency resource to bridge the gap between recurrent resource commencing in post. This is funded using	Deliverable are progressing using agency provision. Pay budget balances	Use of agency resource will enable key programmes of work to commence/continue	Governance & General Manager – RDDD	31/08/2025	**June 2026** Due to pause in NDR funding agency support for Data Engineers

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
	slippage from investment funding only.		whilst recruitment is ongoing.			roles are required to avoid non delivery digital programmes including DARC. Recruitment is ongoing but this is a significant RDDD cost pressure that could impact break even position. The risk of not doing so impacts deliverables. **April 2026** As per 1.2. Pausing of NDR funding has created a funding gap. One agency Cloud/Data Engineer terminated as a result. There will be impacts to delivery dates due to reduced capacity.
AP1.4	Ensure there is sufficient resource available to	All organisation programmes	Provide assurance that change	All enabling functions leads	30-Jun-27	Jun-26: Action expanded to include

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
	support the organisations change portfolio	resourced with the required team for delivering the change	programmes implemented across PHW are being delivered to a high standard.			all change programmes across the organisation.
AP1.5	Ensure there are sufficient programme resource available to support the change	Ensure the programme team has the appropriate team resource available to deliver the programme of change	Ensure the programme team has the appropriate expertise required to deliver the programme	Strategic Programme Lead, RDD Portfolio Lead	30/05/27	May-26: Action Added
AP1.6	Continuing development of and compliance with PHW PPM Standards	Improving compliance with the PPM standards as measured through programme self-assessment.	Provide assurance that change is being delivered well	Standards and Assurance Lead	30/9/26	May 26 – Action added to risk - reported to Change Board that compliance scores are similar to Oct 25.
AP1.7	There is a clear process for appointing SROs to programmes	Relevant SRO candidates for programmes are identified systematically at programme initiation.	SROs are identified with sufficient experience and skills to deliver programmes effectively. Consideration will also be given to leaders across the organisation who	Standards and Assurance Lead	31/3/27	May-26: Action Added

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
			may bring transferrable skills, or SRO skills across organisational boundaries			
AP1.8	Create and manage a delivery plan for IMTP Milestones – plan over three years considering resource availability and business impact	Review of the delivery plan against organisation priorities to be held regularly (minimum every 6 months)	This will allow successful delivery of change programme without impacting BAU Operations	Strategic Programme Lead, RDD Portfolio Lead		Jun-26: Action Added
AP1.9	Define an appropriate Programme to BAU handover process to embed the change across the intended area of the organisation	Programme Closure Documentation Training Plans Update PPM Standards User /employee feedback Process improvements	Ensure the change programmes are embedded successfully, once complete	Portfolio Lead RDD Service owners/ Service Users, Programme Manager / SRO	31/12/2026	Jun-26 Action added
AP1.10	Develop a change pre-discovery and discovery process that all programmes must complete to assess viability and estimated delivery requirements and benefits of the change	Develop a pre-discovery and discovery approach that all programmes complete to explore the problem space, understand user and business needs, and	Ensure the organisation understands the needs of the users and the change before initiation	Portfolio Lead RDD Service owners/ Service Users, Programme Manager / SRO	31-Mar-27	Jun-26: Action added

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
		assess the viability and value of proposed changes. Build a shared understanding of user and organisational needs to inform how change should be shaped and delivered. Ensure the organisation has a clear understanding of the problem, users, and intended outcomes before initiating delivery.				
AP1.11	Ensure the change portfolio refresh for 27/28 arrives at a feasible portfolio, taking full account of operate, improve and change activity, in line with good portfolio management practice.	Reviewing the planning process for the change portfolio and providing the approved process to the organisation to allow for effective change management and understanding Defining and implementing the	This will allow successful delivery of change programme without impacting BAU Operations	Strategic Programme Lead	31/3/28	Proposed new action for SR5

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
		development of portfolio analysis tools, such as a dashboard to understand change feasibility, in conjunction with the wider planning community				
AP1.12	Develop a business case framework for the organisation.	Programmes resourced and delivering successfully	Business case led change	Strategic Programme Lead	9/9/26 (Change Board)	Proposed new action for SR5
AP1.13	Develop and implement a consistent organisational approach to building change capability across leaders, managers and staff	Agreed change management approach for the organisation, Understanding of existing change capability. Learning and development offer defined and implemented	Having change capability in place across the organisation and across all staff grades will increase the likelihood of successful change.	Strategy and Planning, People and OD, Communications, Digital	Date tbd	**Jun 2026** No change from last update. **February 2026** Programmes managed by RDD are defining their resources and cost requirements and have appropriate governance measures in place to review any

Gaps in Assurance / Action Plans for the cause C1 Lack of capability and capacity in leading, managing and delivering transformational change						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						change of scope that may arise within the programme. Any changes of scope are managed through appropriate change management processes within the programme.

Gaps in Assurance / Action Plans for the cause C2 Failure to fully exploit digital and data						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
AP2.1	To establish parameters for the efficient and safe use of AI tools across PHW. Providing 'How to' guidance for staff to follow to ensure best practice compliance.	Lack of data breaches reported using approved AI Tools. Efficiencies in time and quality being realised.	PHW will have clear parameters to work to, which should reduce the poor compliance/use of AI capability.	Head of Data Science & Analysis	March 2026 (Check IMTP deliverable)	**June 2026** A plan to mitigate the risks of shadow AI has been approved by the AI Design Authority. This includes training and comms. An AI policy is in the draft stages.

Gaps in Assurance / Action Plans for the cause C2 Failure to fully exploit digital and data						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						The consultation period for generative AI guidance has been completed. **April 2026** Work to create a user guide for guidance, assurance and approval of AI use in PHW has been commissioned by AIDA Guidance on the use pf Generative AI has been completed and is being translated.
AP2.4	Build a Digital and Data Apprenticeship pathway from entry level to degree level	An established career pathway within PHW and partners to 'build and develop' technical capability.	Bring opportunities to school leavers that are non-traditional NHS roles. Established pathways for PHW to be an employer of choice for technical specialities.	Governance & General Manager - RDDD	31/12/2027	**June 2026** There is no additional funding available for apprenticeships currently. It remains an ambition to develop the pathways, but a funding stream needs to be identified to realise this. Delivery date changed to next financial year. **April 2026** No further apprentices added. Work is ongoing

Gaps in Assurance / Action Plans for the cause C2 Failure to fully exploit digital and data						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						subject to funding. Delivery date changed to funding availability.
AP2.5	Maximise the use of M365 tools and/or automation to support internal efficiencies, process improvements and data capture.	DDDA and AIDA sighted on new software being proposed for purchase and assess against current in house paid tools. AIDA will be sighted on AI and Automative tools. Both will be able to drive embed controls. Training for staff on using M365 products from DHCW being promoted.	Utilising and realising the use of M365 suite of tools that are available as part of the tenancy, to drive efficiency and collaboration across the organisation without incurring additional expense.	Head of Digital Services / Head of Data	31/03/2027	**Jul-26** Microsoft Fabric was implemented on 2-Jul-26 which is one of the core M365 Platform upgrades supporting the Power BI platform among other Power Automate tools. **April 2026** Microsoft have introduced a change to the M365 Tools which will be implemented in Jul-26. PHW are working with NHS partners and Microsoft to deliver the change.
AP2.6	Deliver Phase 1 of the AI Programme.	PHW staff know which products to use follow guidance to ensure compliance with good practice for safe, legal and ethical adoption of AI	This will provide clear guidance and safe use of PHW approved AI products.	Head of Data Science & Analysis	31/03/2027	**Jun 26** **This action will be closed as it is now complete.** **April 2026** AI is no longer classified as a programme. Assurance

Gaps in Assurance / Action Plans for the cause C2 Failure to fully exploit digital and data						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						is provided to DDDA and BET via updates on approvals granted. These are documented in the PHW AI Register. Datix incidents are being updated to include AI as a cause.
AP2.7	Treat Corporate Risk 1780 There is a risk that PHW are unable to deliver our digital agenda due to dependencies on national programmes, DHCW and Welsh Government.	Programmes/activities that have a significant dependency on DHCW remain on track, or early warning if breaches are identified.	Clarity is needed on the role of WG and DCHW and that to be cleared documented. Representation has been strengthened and there is commitment to be more aligned, however it remains a gap which may result in under delivery.	Head of Digital Services	31/12/2026	**Jun-26** Decisions made in DHCW over recent months which include decisions on tolls implemented and the pause on review of key national programmes implemented by WG have had an impact on PHW Key programmes, impacting timelines and requiring workarounds to be implemented to maintain delivery. **April 2026** Monthly planning meetings between DHCW and PHW have been established for planning and escalation

Gaps in Assurance / Action Plans for the cause C2 Failure to fully exploit digital and data						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						purposes. PHW have been working with DHCW on a number of escalations regarding DHCW Delays that are impacting the delivery of PHW Programmes and are working through the mitigations together.

Gaps in Assurance / Action Plans for the cause C3 • Lack of maturity in benefits realisation from change delivery						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
AP3.1	Commence the implementation of Clinical and Digital Safety Standards.	No harm caused as an outcome of new processes being implemented.	All new processes will have been assessed against clinical and digital safety standards to avoid harm as part of the change process. Gaps in assurance will be identified early and mitigations implemented.	Public Health Consultants / Head of service/Head of Digital Services / Digital Clinical Safety Officer	31/03/2027	**June 2026** DCSO work embedded within Digital Health Protection programme with requirement to establish a within programme clinical governance group to provide assurance. DCS training for relevant staff within PHW scheduled for 10 & 11 June 2026. Plans to establish a PHW Clinical Safety Group (we believe to be hosted by

Gaps in Assurance / Action Plans for the cause C3 • Lack of maturity in benefits realisation from change delivery						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
						the Office of the Medical Director) progressed to draft TORs, however, timelines remain unconfirmed. The DCSO remains a single point of failure within PHW and is working at capacity, currently prioritising two high profile programmes (Digital Health Protection and Lung Cancer Screening). It is anticipated that asks to support Sexual Health Wales programme will emerge soon. Asks to support other screening programmes have been turned down by the DCSO as no current capacity to do so. If resource capacity is not increased there will be a need for a transparent mechanism to prioritise the work of the DCSO.
AP3.2	Implement the required actions as detailed under **SRR2**					See SRR2 Updates.
AP3.3	Establish the clinical Governance Group	Clinical Governance Group established Define the clinical governance	Provide clinical assurance for all change requirements	Executive Director of Nursing Quality and Integrated	June 2026	**June 2026**

Gaps in Assurance / Action Plans for the cause C3 • Lack of maturity in benefits realisation from change delivery						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
		requirements and metrics.	where clinical approval would be required. Define the ownership and formal acceptance process of any residual clinical risk for the management of services.	Governance and Medical Director.		First meeting took place early June 2026. An update will be provided at the next meeting.
AP3.4	Create and manage a benefits framework for the organisation that all change programmes must adhere too	Tangible benefits identified for proposed change programmes and key measures and baselines identified that can clearly assess the impact of the change Benefits will be reported on through Change Board. Benefits tracker to manage benefit realisation through programme implementation and BAU	Ensure the proposed change will provide adequate tangible benefits for the organisation Implementing a benefits tracking process to ensure benefits are tracked through to completion whether that happens during the programme or in BAU	Head of Planning, Strategy & Corporate affairs. Strategic Programme Lead, Senior Programme Manager, Programme Design Lead, RDD Portfolio Lead	9/9/26 (Change Board)	Jun-26: Action Added

Gaps in Assurance / Action Plans for the cause C4 • Lack of ability to deliver improvement at pace						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
AP4.1	Identification of the internal resource that is required to complete a programme of change successfully with active collaboration to meet the programme requirements together	Ensure the programme is resourced effectively to increase the ability to implement the change successfully	Support the successful delivery of change programmes	All enabling function leads; Comms, RDD, PoD, S&P		**April 2026** Management capacity is being assessed regularly. It remains challenging across the D&D portfolio with the competing demands having to be balanced.
AP4.2	Earlier identification of dependencies on DHCW Active management of DHCW delivery for specific programmes eg LIMS.	Support the mitigation of delays when change programmes include external stakeholders	Support the successful delivery of change programmes	RDD Portfolio Lead,		Jun-26 – Action added
AP4.3	Earlier and more precise identification of supplier dependencies at programme and portfolio levels	Ensure the programme is resourced effectively to increase the ability to implement the change successfully	Support the successful delivery of change programmes	RDD Portfolio Lead, Strategic Programme Lead		Jun-26 – Action added
AP4.4	Earlier and more precise identification of Local Health Board dependencies at programme and portfolio levels	Support the mitigation of delays when change programmes include external stakeholders	Support the successful delivery of change programmes	RDD Portfolio Lead, Strategic Programme Lead		Jun-26 – Action added

Gaps in Assurance / Action Plans for the cause C4 • Lack of ability to deliver improvement at pace						
Reference	**What Action?**	**How will we measure efficacy?**	**How will this action impact/mitigate the risk?**	**Who is Responsible?**	**By When?**	**Progress**
AP4.5	Regular portfolio reviews to be undertaken at an organisation level (every 6 months) to assess the viability of the change portfolio and to ensure all programmes still align with the organisation's strategic goals	Ensure the change portfolio continues to align with the organisation's strategic objectives, the delivery of change is still on track and has sufficient resource. Provide the appropriate evidence to the executive team to make informed decisions on the prioritisation of the change portfolio on a frequent basis	Support the successful delivery of change programmes	RDD Portfolio Lead, Strategic Programme Lead		Jun-26 – Action added