

Risk ID	Domain	Date	Lead Executive	Directorate (if applicable)	Risk Description (There is a risk that...)	Cause (This will be caused by...)	Effect (The impact will be...)	Likelihood	Impact	Risk level	Key Controls	Likelihood	Impact	Risk level	Trend	Risk Decision	Action Plan	Due date	Status of Action	Likelihood	Impact	Risk level	Progress
001	Business Objectives	15/01/2021	Executive Director for Health Protection and Screening Services	Corporate	There is a risk that one or more of the screening programmes will again have to be paused or slowed down during the second wave of the Covid19 pandemic.	This will be caused by screening is not possible to be offered because one or more of the six criteria identified as been necessary to offer screening is not met. For example screening positive participants are not able to be referred for ongoing diagnosis or treatment to the health boards as their referral services have been stopped	The impacts upon PHW would be that the organisation cannot offer the population based screening programme which is included in its statutory regulations and it not able to offer interventions that are known to reduce avoidable mortality and morbidity in the eligible population. As five of the screening programmes were paused in the first wave all of the eligible population in those cohorts were delayed their offer and it is important that this delay is not increased further as this will have clinical impact.	3	5	15	1. Agreed clear criteria to review continuation of programme against which have been agreed by Gold. 2. Established screening workforce required to continue to offer screening safely and in line with recovery plan. 3. Screening pathways are Covid secure. This includes checks the participants that should not be self isolating; social distancing between participants; infection protection control measures in place; participant wearing face covering and staff wearing PPE.	3	5	15		Tolerate	1. Continued close working with Health Boards at all levels – strategic lead identified for Health Boards and also close operational links with programmes to ensure we work together to ensure that significant bottlenecks and constraints are not created in the pathway. 2. Front line staff across Wales offered and encouraged to uptake vaccination in line with Welsh Government targets. 3. Sustainable supply of PPE to be made available to staff for service provision. 4. The situation across all services and Health Boards is reviewed weekly by the Screening SMT, and an update is reported fortnightly to BET.		Continual	3	5	15	<b>Update 11/1/2021</b> reviewed the criteria at SMT meeting on 5/1/21 and all remain met. Constraints around staffing due to staff off with covid, self isolating or child care issues but this being dynamically managed. Constraints in timeliness in Health Boards but all accepting referrals and clinically risk assessing if delays, in close contact with Health Boards to keep situation under review. Have made some changes where possible to reduce the impact on number of referrals to support Health Boards. <b>Update 2/3/21</b> - still maintaining services and regular contact with Health Boards. <b>Update 12/3/21</b> - all screening programmes continue to be delivered, situation improving in health boards due to reduced pressure from covid cases. Bowel Screening invitations numbers increased from 12/3 to work to reduce backlog; discussions underway with GPC Wales to plan cervical screening recovery. Staffing resilience improved with school openings and vaccination uptake excellent in front line staff. <b>Update 07/05/2021</b> - Screening SMT continue to routinely assess the 6 criteria for continuing services, all of which remain met. Service capacity/throughput issues remain due to continuing covid safe clinic arrangements resulting in fewer participants in each clinic. Screening Covid Recovery Action plan is being developed and implemented with specific action plans addressing the backlog in each screening programme.
002	Patients & Clients	08/04/2020	Executive Director for Health Protection and Screening Services	Corporate	There is a risk of unrecognised non-Covid infections threat to the population	This is caused by the organisational attention focussed on Covid response	Avoidable infections	3	5	15	Maintenance of non Covid general health protection services. Regular situation update reports to the Gold Meeting and also separately to BET. Mobilisation of staff to the Covid response Oversight is also provided by senior management from the Integrated Health Protection SMT as part of the enhanced governance arrangements implemented and led by IMT to ensure that a focused response on non Covid activities is maintained	3	5	15		Treat	Separate Health Protection Leadership arrangements in place that is separate from Covid. The Business Case submitted to WG on 13th November remains key to a sustainable solution for the senior Health Protection team	30/10/2020	Completed	2	5	10	<b>Update 07/10/2020</b> - The Health Protection response in the new operational plan confirms the essential requirement for maintaining non-Covid health protection services. In addition, a business case is being prepared for submission to Welsh Government for additional health protection resources. <b>Update 11/1/2021</b> - The Business Case was submitted to Welsh Government and the requested follow up responses were provided to them on 7/1/21. Approval of the business case will enable the organisation to address this risk. <b>Update 28/1/21</b> - The Directorate is compiling the additional information requested by WG & a final decision is awaited, as funding of the Business Case remains key for a sustainable service. <b>Update 2/3/21</b> - Approval for the Business Case was received 10/2/21 and will be implemented <b>Update 6/4/21</b> - Good progress has been made with the project arrangements. A recruitment group has been established with many posts approved and recruitment now underway. Progress is monitored through an oversight steering group. <b>Update 5/5/21</b> - Recruitment continues to progress well. A separate report will be submitted to BET outlining detailed progress. The engagement and communications process has now been developed ahead of the discussions around the development of the enhanced operating model.
004	Service Interruption	17/03/2020	Director of People and Organisational Development	Corporate	There will be insufficient staff to deliver the Operational Plan including prioritisation of the Health Protection Response	Inability to recruit and retain staff with the necessary skills. Staff unable to work due to sudden, prolonged and widespread sickness absence. Staff unable to work due to shielding or caring responsibilities. Staff taking annual leave and/or using TOIL	PHW will not be able to carry out its legal obligations as a Category one responder. It will not be possible to deliver the Operational Plan. It will not be possible to adequately staff/resource the Health Protection response.	5	4	20	New Operational Plan with clear priorities. Workforce analysis data and Information. Dashboards. Staff Wellbeing and Engagement Surveys and Action Plans (local and organisational). Staff flu vaccine programme	4	4	16		Treat	Development and implementation of workforce plans to support priorities in new Operational Plan: • Health Protection Response • Population Health Outcomes • Essential Services • Recovery • Enablers	30/11/2020		3	4	12	<b>Update: 12/04/2021</b> - There is a dedicated team in place to support resourcing and recruitment, plus People and OD Business Partner support to the Health Protection Response and similar support to each of the other priority areas to enable delivery of the refreshed Operational Plan (including implementation of the Health Protection business case). Regards staff absences and other types of leave, the People and OD operations team continue to support line managers to effectively manage sickness absence and this remains a priority. As of 1 April shielding measures have paused and staff who were clinically extremely vulnerable and not able to work from home can discuss how best to facilitate their return to the workplace - utilising the updated risk assessment tool. Finally, as of 12 April all school age children are able to return to classroom settings, thereby reducing the dependence on staff with caring responsibilities for children. <b>Update 26/10/20</b> Workforce plans being developed for the three key priorities: Health Protection Response, Reactivation of Essential Services and Population Health Outcomes in the new Operating Plan, following which the Enabling function resource requirement will be assessed People Strategy first year actions in process of being reviewed and implementation plans developed. <b>Update 15/01/20</b> Plans developed and currently being reviewed, work to be joined up with finance and other enabling functions to ensure this is taken forward holistically.
											Provide P&OD recruitment resource to manage large scale recruitment						31/10/2020					<b>Update: 12/04/2021</b> - There is a dedicated team in place to support resourcing and recruitment <b>Update 15.1.21:</b> interim structure in place including dedicated recruitment resource <b>Update 26/10/20</b> new interim structure for the P&OD Directorate in the process of being implemented.	
005	Human Resources	17/03/2020	Director of People and Organisational Development	Corporate	Adverse impact of new working arrangements on staff health, well-being and resilience	Continued uncertainty and anxiety around working arrangements. Insufficient communication and engagement. Reluctance to take annual leave or TOIL	Staff disengagement resulting in a number of negative consequences, such as increased sickness absence, reduction in productivity and quality of work, increased turnover				Absence and annual leave reports and ongoing monitoring Clear communication across the organisation. Wellbeing and Engagement Surveys, results and action plans (local and organisation-wide). Managers' weekly briefing and guidance. Staff flu vaccine programme Regular meetings with recognised trade unions, both informally and formally Wellbeing and Engagement Partnership Group established Repatriation toolkit being developed (as per revised Operational Plan) Our Conversation (new ways of working) discussions commencing 15.4.21						Continue to monitor staff absence data to identify any potential issues or hotspots	31/10/2020					<b>13/8/21</b> All staff absence data is monitored and reported to BET and P&OD Committee. In addition the P&OD Operations Team hold fortnightly case management meetings for all long term sickness cases. 8.4.21: Supporting resources being developed for staff returning from redeployments <b>Update 15/01/21</b> data continues to be monitored on a monthly basis at BET and LPF, HR support ongoing in specific areas and continued focus on wellbeing and resilience. <b>Update 26/10/20</b> staff absence data monitored on a monthly basis by the People and OD team and reported to BET and Board. Any local issues highlighted are taken up with service area concerned. <b>Update 9/4/21</b> staff absence data monitored on a monthly basis by the People and OD team and reported to BET and Board. Any local issues highlighted are taken up with service area concerned.
											Continue to provide P&OD support for line managers in managing sickness absence and other employment related issues						31/10/2020					<b>13/8/21</b> All staff absence data is monitored and reported to BET and P&OD Committee. In addition the P&OD Operations Team hold fortnightly case management meetings for all long term sickness cases. <b>Update 15/01/21</b> support for line managers and staff continues to be in place via People Support +, work ongoing to make further improvements. <b>Update 26/10/20</b> People Support Plus+ Helpline available for staff and line manager queries. Weekly line manager briefing issued.	

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006	Human Resources	17/03/2020	Director of People and Organisational Development	Corporate	Our ability to continue to respond to the pandemic could be adversely affected by high and sustained levels of sickness absence due to a second or subsequent wave(s) of Covid 19.	Confirmed and suspected COVID19 cases across the workforce	Sub optimal staffing levels due to high levels of Covid 19 related sickness absence resulting in inability to deliver priority work, quality of service decreases, decrease in staff engagement					3	4	12	Tolerate	Continue to monitor staff absence data to identify any potential issues or hotspots at an early stage		Monthly				13/8/21 All staff absence data is monitored and reported to BET and P&OD Committee. In addition the P&OD Operations Team hold fortnightly case management meetings for all long term sickness cases. Update 9/4/21 staff absence data monitored on a monthly basis by the People and OD team and reported to BET and Board. Any local issues highlighted are taken up with service area concerned. Annual Leave carry over managed and monitored at year end. Wellbeing Workshops being held for Line Manager to enable support for themselves and staff Care Space and Facilitated Listening sessions being undertaken for NHPR and redeployed staff Project to focus on staff aged 20-34 starting in May in response to poor wellbeing scores in previous Staff Survey <b>Update 15/01/21 Staff Wellbeing and Engagement Group continues to meet on a monthly basis, action plans in place across directorates. NHS staff survey results to BET on 18/01/21. Update 7/10/2020</b> - reminder comms going out w/c 12 October and further actions will be developed following second survey results <b>Update 15/01/21 Plans developed and being merged with other enabling functions to ensure the required 'join up' on outcomes - work ongoing and priority areas being reviewed. Update 6/10/20</b> Workforce plans being developed for the three key priorities: Health Protection Response, Reactivation of Essential Services and Population Health Outcomes in the new Operational Plan which will include any necessary contingencies required.
007		16/04/2020	Executive Director Quality, Nursing and Allied Health Professionals	Corporate	There is a risk that we won't deliver services that are of a high quality, effective and safe in the context of Covid 19 response	This will be caused by rapid policy change, and outbreak and reactivation management in an unpredictable environment	The impact will be an inability to mitigate and avoid harm to service users or staff					5	5	25	Treat	In conjunction with Board Business Unit, review the work programme to ensure QSIC receives assurance that controls are operating effectively	Completed					<b>Update 13/08/21 - Action Completed. Committee receives comprehensive assurance at each meeting. AD Integrated Governance and Board Secretary meet regularly to ensure ongoing relevance for the workplan.</b> <b>Update 13/08/21 - Initial scoping work suggests that this work needs to be done through the Datix system but it is not clear at the moment whether this will be available in the new OFWCMS. Work is ongoing to establish the requirements for the process and the functionality required. Further discussions around document control are required with the BBU to establish clear responsibilities and this will resume when the Board Secretary returns from leave in October. New target date proposed of 31st October</b>
008	Business Objectives	06/04/2021	Board Secretary and Head of Board Business Unit	Corporate	There is a risk that the organisation may not comply with legislative or Welsh Government reporting requirements	This will be caused by the demands on the organisation in responding to the pandemic and specifically where staff have been redeployed into other roles or where capacity is reduced for other reasons	The impact will be non compliance with legislative or Welsh Government reporting requirements which could impact on our reputation, our standing as a well governed organisation or potentially funding flows					3	4	12	Treat	1. Effective use of the internal Welsh Health Circulars database and follow up system 2. Board, Committee and Executive meeting forward plans	30/04/2021					<b>Update: 23/04/2021</b> - The actions identified are all on track for completion and implementation. <b>Update: 25/05/21</b> - action complete, database in place <b>Update: 23/04/2021</b> - The actions identified are all on track for completion and implementation. <b>Update: 25/05/21</b> - action complete, database in place <b>Update: 23/04/2021</b> - The actions identified are all on track for completion and implementation. <b>Update: 25/05/21</b> - action on track and will be ongoing. Frequency changed to bi-monthly as monthly determined to be too frequent. <b>Update 9/7/21</b> - action remains ongoing.
100	Safety / Legislative	17/07/2015	Director of People and Organisational Development	Workforce and Organisational Development Directorate Wide	PHW will not develop their staff in line with the strategy and aspirations of the organisation	Insufficient staff receiving proper performance appraisals	PHW will have a sub-optimal workforce, unable to deliver on its strategic priorities					4	4	16	Treat	Appraisal processes for staff, either 'My Contribution' or Consultant Job Plans ESR Records Monthly exec reports are directorate and divisional level Quarterly breakdowns by individual to employing director Exception reporting process in place for directorates with below 90% compliance	31/03/2021	Ongoing				8.4.21: year end figures communicated (below target) and quarterly breakdowns due next week by directorate. No impact on pay - national deferral of Pay Progression policy until September 2021 <b>Update 15.1.21: IA follow up report completed and going to ACGC 19.1.21 - action is ongoing as BAU requirement across the organisation</b> <b>Update 22/5/20</b> - Compliance significantly below internal target of 90% and WG target of 85%. Year end data distributed and individual breakdowns with directors as at 8th May. Confirmed no pause in requirement during COVID-19 response. IA report finalised and management response given - action plan to be agreed by end of May 2020 <b>Update 06/7/20</b> - action plan approved by BET 16.6.20 and actions underway <b>Update 11/8/20</b> - Action Plan on track - compliance increase to 64% (non medical) and further breakdowns provided to PHS and HWB/PHTs. POD assisting with data entry. <b>Update 7/10/20</b> - Update provided to BET 6.10.20 and ACGC 15.10.20, awaiting outcome of IA follow up





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																	Liaising with IT Exploring options to develop a solution for telephone calls to ensure Welsh Speakers have access to a fully bilingual service.	30/04/2021						<p><b>Update: 23/11/2020</b> - We are currently working through the available options with our IT Department. There has been a delay in progressing this as we have been waiting for Legal Advice that the WLC has sought. Update 17/4. Options paper prepared and will be presented for consideration to BET at an appropriate date, but has not been added to the meeting agendas due to urgent priorities related to the pandemic. There has been no further progress since May 2020</p> <p><b>Update: 20/05/2021</b> – Advice from the WLC received. Options paper is being refreshed with assistance from IT to reflect recent technological advances.</p> <p><b>Update - 13/8/21</b> EDI Manager has met with IT and Estates to seek further solutions; risk currently mitigated as most staff still WFH. Work ongoing on options paper to look at solutions.</p>	
																	Developing a library of job description.	31/03/2021						<p><b>Update 22/03/2021</b> - this work is ongoing but on track to be set up by the 31/03/2021 deadline. Progress has been slow due to staff absence and redeployment</p> <p><b>Update 20/05/2021</b> – P&amp;OD have been unable to progress this.</p>	
																	Ongoing proactive support from the Welsh Language Team to respond to queries and advise. To include regular drop in clinics, Induction days and regular attendance in Comms and other business meetings	31/03/2021						<p><b>Update: 22/03/2021</b> - This work is ongoing, with advice and support being provided to staff in all departments. Our Hwb (WL Intranet Pages) have been redesigned to make it easier for staff to navigate and source the support they need, and one of our WL Officers provides support to Comms on a weekly basis. We have also employed a temp WLO to cover staff absence and ensure continuity</p> <p>The team continue to support the Covid response by providing translation and offering 'bilingual telephone answering in the contact centre, and also undertaking "How are you doing?" survey calls in Welsh. They have also taken part in the WEND video for new starters, and held online drop in sessions in September to assist staff in understanding their obligations under the WL Standards.</p> <p><b>Update: 20/05/2021</b> - Following a period with no WLO cover, a temporary part-time WLO has been appointed who has been able to make a start on re-establishing monitoring procedures for the WL Standards Proactive meetings with front-line services have been a priority, and are ongoing, to ensure any slippage is identified and addressed; WLO has been</p>	
106	Safety Continuity Staffing	24/02/2021	Executive Director Quality, Nursing and Allied Health Professionals	Organisation wide	There is a risk that Public Health Wales will be unable to effectively manage Putting Things Right issues, including concerns, claims, incidents and complaints.	This will be caused by the requirement to implement the Once for Wales Concerns Management System, which is acknowledged by the project lead as likely to be not fit for purpose	The impact will be poor management of concerns which will have a potential impact on service user / staff safety, legislative and regulatory compliance, inability to report assurances to the Board and increased claims against the organisation.	5	5	25			5	5	25	Tolerate	Internal Project Delivery team established and Chaired by Exec. Director QNAHPs	Concerns to be raised with the OfWCMS project team	28/02/2021	Completed		2	5	10	<p>Update 25/02/21 - Escalated from Quality, Nursing and Allied Health Professionals Directorate Risk Register</p> <p><b>Update: 17/06/21</b> - Complete. Concerns raised. Situation remains unresolved pending solution to cyber security issues.</p>