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# **Protocol for the reporting and oversight of Risk within Public Health Wales**

**October 2022**  
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DRAFT

## Introduction

The purpose of this document is to outline the governance arrangements relating to the management and oversight of Risk within Public Health Wales at Board, Committee and Executive level.

This will cover:

- ❖ The management of the Corporate Risk Register (CRR) and Strategic Risk Register (SRR), including frequency of updates and reporting.
- ❖ The Executive role in managing the risks within the organisation, and the role of the Executive leads / Risk sponsors.
- ❖ Role of the Business Executive Team in manage risk within the organisation, including overseeing the implementation of mitigating actions within the Strategic Risk Register and the Corporate Risk Register
- ❖ Oversight by the Board via the Audit and Corporate Governance Committee of the overall system for risk management (system for internal control) and assurance on the management of Strategic and Corporate risks within the organisation;
- ❖ Role of the other Board Committees in providing assurance to the Board and, where appropriate, the Audit and Corporate Governance Committee that the risks are being managed appropriately.

## Business Executive Team

The Business Executive Team (BET) manage risk within the organisation, including overseeing the implementation of mitigating actions within the Strategic Risk Register and the Corporate Risk Register.

BET will achieve this through:

- ❖ Reviewing the Corporate Risk Register (CRR) and the Strategic Risk Register (SRR) at a Business Executive Team meeting on a monthly basis.
- ❖ Approving any changes to the implementation dates for actions within the CRR and SRR.
- ❖ Approving any escalation/ de-escalation of risks on the Corporate Risk Register.
- ❖ Making a recommendation to the Board on the escalation/ de-escalation of risks on the Strategic Risk Register.
- ❖ Reviewing the progress in implementing the Risk Development on a quarterly basis quarterly basis.

## Role of Executive leads / Risk Sponsor

Each Lead Executive / Risk sponsor is responsible for the implementation of the mitigation actions outlined for their risk, and will ensure that the CRR and SRR are updated on at least a monthly basis.

The updates to the CRR and SRR will include:

- ❖ Progress on the implementation of each mitigating action.
- ❖ Requests for changes to any timescales for the mitigating actions, for BET approval.

- ❖ An outline of any requests to escalate / de-escalate a risk from the register, using the appropriate form, for BET approval.
- ❖ A delivery confidence assessment (DCA) for the Strategic Risks.
- ❖ The provision of an Executive Insight to provide an up to date assessment as to whether the actions will sufficiently address the gaps in controls to effectively manage the risk.

The cycle for these updates will be to completed by the **1st of the month**, with a report to BET at the second BET meeting in the month. The Risk team will send reminders two weeks prior to this deadline.

### **Consideration by the Board**

The Board approves the Strategic Risk for the Organisation, and sets the risk appetite. This will usually be reviewed on an Annual basis.

The Strategic Risk Register in its entirety will be presented to the Board for assurance three times a year.

The Corporate Risk Register in its entirety will be presented to the Board for assurance twice a year.

Both registers shall be available on request at any time to the Board.

The Board delegates seeking assurance on the system of risk management to the Audit and Corporate Governance Committee (ACGC), and received assurance from ACGC as part of the Committee Chairs report to Board, the Annual Report of the ACGC and within the Annual Governance Statement.

### **Role of Audit and Corporate Governance Committee**

The Audit and Corporate Governance Committee (ACGC) role is to seek assurance on the overall system for risk management (system for internal control) and seek assurance as to the effective management of Strategic and Corporate risks within the organisation.

ACGC will achieve this through:

- ❖ Considering a report outlining the overall system for risk management, for assurance on an annual basis.
- ❖ Consider the progress with the implementation of the Risk Development Plan on a bi-annual basis.
- ❖ The Committee will seek assurance on behalf of the Board that Corporate and Strategic risks within the remit of the Committee are being managed effectively.
- ❖ Receive the Corporate Risk Register and the Strategic Risk Register at each regular meeting, for information.

## Role of Other Committees

The role of the other Board Committees is to consider the Corporate and Strategic Risks within their remit, seeking and providing assurance to the Board and, where appropriate, the Audit and Corporate Governance Committee that the risks within their remit are being managed appropriately.

The Committees will achieve this through:

- ❖ Considering an extract of the Corporate Risk Register containing only relevant risks within the Committee's remit, bi-annually.
- ❖ Considering the Strategic Risks relevant within the Committee's remit, at each meeting.

## Summary of reporting schedule

Summary of Scheduling of updates and consideration of CRR / SRR		
Executive updates	Monthly (1 <sup>st</sup> of Month)	
BET	Monthly (third week of month)	
ACGC	At each meeting - For information	
All Committees	SRR	Quarterly (at each meeting)
	CRR	Bi Annually (Q1 and Q3)
Board	SRR	Three times a year (Q1, Q3 and Q4)
	CRR	Bi Annually (Q1 and Q3)

## Review of this protocol and Feedback

This protocol will be reviewed at least annually to ensure it continues to meet the needs of the organisation.

We welcome any feedback about this protocol and are happy to respond to any queries in relation to it. Please email the Board Secretary and Head of Board Business Unit at [PHW.CorporateGovernance@wales.nhs.uk](mailto:PHW.CorporateGovernance@wales.nhs.uk)

## Strategic and Corporate Monthly Risk Cycle :

