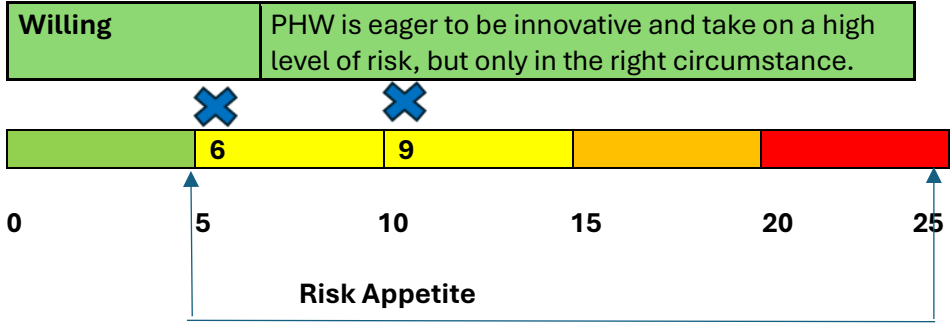


Risk Reference and Link to Strategic Priority	Risk Description	
<p>SRR 5</p> <p>Strategic Priority</p> <p><i>“Enabler Risk and incorporates all Strategic Priorities.”</i></p>	<p>There is a risk that: we fail to fully exploit digital and data fully to improve public health in Wales.</p> <p>Caused by:</p> <ol style="list-style-type: none"> 1. capacity and capability within PHW and external partners. 2. lack of digital and data literacy within PHW as a whole 3. lack of business change capability across Public Health Wales <p>Resulting in:</p> <p>Poorer public health outcomes for the people of Wales</p>	
<p>Executive Director Sponsor</p>	<p>Director of Knowledge and Research</p>	
<p>Assuring Committee</p>	<p>Knowledge, Research and Information Committee</p>	
<p>Trend</p>	<p>Current Position of Risk Including Risk Appetite and Risk Decision</p>	<p>Position Statement – Executive Director Update</p>
<p><i>*to be confirmed via a run chart after monitoring for 3 months, will be produced via excel/pivot table to visualise risk score trend over time*</i></p>	 <p>Willing PHW is eager to be innovative and take on a high level of risk, but only in the right circumstance.</p> <p>0 5 10 15 20 25</p> <p>Risk Appetite</p>	<p>This is a new Strategic risk, elevated from the Corporate Risk Register. The nature of this risk has recently changed from reluctance to put forward digital initiatives to an appetite within the organisation for more in this area as reflected in the IMTP. This has moved our mitigations into having the right resources, skills and ways of working to deliver the prioritised changes agreed.</p> <p>There is also links to the workforce risk in that the people elements of change are as significant if not more so than the technical</p>

Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance			
C1: capacity and capability within PHW and external partners.			
Control Reference	Internal Control	Internal Sources of Assurance	How/When is it monitored?
C1.1	Digital and Data Strategy and Routemap implemented.	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	DDDA Digital & Data Portfolio AIDA Change Board BET Board
C1.2	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

Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance ¹			
C2: lack of digital and data literacy within PHW as a whole			
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 December 2026	Assurance and Progress reporting	DARC Programme Board Analysis 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

Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance ¹			
C2: lack of digital and data literacy within PHW as a whole			
Control Reference	Internal Control	Source of Assurance	How/When is it monitored?
C2.3	R, Python and Power BI established as tools of choice for most new analysis	Assurance reporting	DARC Programme Board DSAB
C2.4	Strategic Workforce Plan agreed	Assurance reporting	BET

Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance ¹			
C3: lack of business change capability across Public Health Wales			
Control Reference	Internal Control	Source of Assurance	How/When is it monitored?
C3.1	Aligning Digital and Data Portfolio with Strategic Change Portfolio reporting to ensure: One version of the Truth Confirmation of change required Capacity for change identified at an earlier point.	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	DDDA Digital & Data Portfolio AIDA Change Board BET Board

Gaps in Assurance / Action Plans for the cause C1 capacity and capability within PHW and external partners.						
Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
AP1.1	Create DDaT Job Families and roll out across PHW.	Recruiting the right level of skill to the right roles.	Will bring in a greater talent pool to improve the capability of the existing workforce.	Louisa Nolan, Dafydd James, Fliss Bennee	30/06/2027	

Gaps in Assurance / Action Plans for the cause C1 capacity and capability within PHW and external partners.						
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 technical skill capability into PHW as a result of additional investment.	Successful recruitment of Cloud Engineers, Data Engineers, Developers, Cyber Specialists, Technical Project Managers funded by PHW investment.	Create capacity and depth of skill to meet deliverables of IMTP/BAU requirements.	Hilary Parsons	31/12/2025	
AP1.3	Engage technical agency resource to bridge the gap between recurrent resource commencing in post. This is funded using slippage from investment funding only.	Deliverable are progressing using agency provision. Pay budget balances	Use of agency resource will enable key programmes of work to commence/continue whilst recruitment is ongoing.	Hilary Parsons	31/08/2025	
AP1.3	To develop a strategic platform for analytical data processing and a strategic toolset for analysing our data and commenced the training of staff to utilise the strategic toolset.	New platform is in use and staff can utilise the full toolkit.	This will enable more efficient working, and staff will have the fundamental skills to use tools that are available.	Louisa Nolan	30/06/2026	
AP1.4	Enhance our capability in creating projections for diseases and conditions, whilst ensuring that the limitations of projections are understood by users.	NHS planning processes are informed, and policies are developed to allow for changes as identified in outputs.	This will both assist with NHS planning and make the case for system and policy interventions to change course where appropriate.	Louisa Nolan	31/03/2027	
AP1.5	Establish a Digital, Data and Technology Profession Capability Framework.	Successful recruitment and development	This will encourage and embed the technical specialities within both	Louisa Nolan / Fliss Bennee / Dafydd James	30/06/2027	

Gaps in Assurance / Action Plans for the cause C1 capacity and capability within PHW and external partners.						
Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
		pathways for DDaT professions is in place.	PHW and the NHS and bring talent / skills into the organisation.			
AP1.6	Deliver the automation roadmap.	Roadmap developed and shared with the organisation so there are clear expectations known.	This will provide the organisation with clarity on what can be expected, by when and by whom.	Fliss Bennee	30/09/2025	
AP1.7	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.	Louisa Nolan	31/03/2027	
AP1.8	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.	Louisa Nolan	31/12/2026	

Gaps in Assurance / Action Plans for the cause C2 lack of digital and data literacy within PHW as a whole						
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.	Louisa Nolan	Check IMTP deliverable	
AP2.2	See AP1.2					
AP2.3	Digital & Data processes are documented in line with standards.	New processes will be documented at the point of release as a reference tool for the organisation. This will drive consistency of process and maintain compliance.	There is a formal standard process to follow. This will build confidence and skill for users to be able to follow an approved organisational approach.	Fliss Bennee	30/09/2026	
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.	Hilary Parsons	31/12/2026	
AP2.5	To develop and deliver more modelling tools including scenario modelling, screening demand, modelling impact of interventions.	Outputs will be shared with stakeholders to develop policies and plans will reflect the modelling outputs.	Improved decision making and policy development that will benefit stakeholders/users and the population of Wales.	Serenay Ozalp	31/03/2027	

Gaps in Assurance / Action Plans for the cause C3 lack of business change capability across Public Health Wales						
Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
AP3.1	Recruit Portfolio Lead (with designated additional investment)	Successful recruitment.	Role will be the interface between innovation, service delivery, and policy, ensuring programmes are aligned with national and organisational priorities, to meet assurance requirements, and deliver value.	Hilary Parsons	31/12/2025	
AP3.2	Manage the change to new supporting digital systems for new cancer data sources.	Successfully managing the change to new digital systems, bringing access to new cancer data sources.	Improve the efficiency and timeliness of receiving and processing cancer data. Improve the timeliness of sharing our data outputs with our partners.	Dyfed Huws	31/03/2027	
AP3.3	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.	Llion Davies / Dafydd James	31/03/2027	
AP3.4	Implement the required actions as detailed under SRR2 There is a risk that: The organisation could					

Gaps in Assurance / Action Plans for the cause C3 lack of business change capability across Public Health Wales

Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
	<p>experience poor organisational health.</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Failure to develop our people • Ineffective organisational leadership • Poor governance, lack of strategic workforce planning to achieve the required capability and capacity of our people • Lack of a clear and consistent vision of our inclusive organisational culture • Capability and complexity in relation to significant programmes of change to meet IMTP deliverables. <p>Resulting in: a poor organisational culture with insufficient capability and</p>					

Gaps in Assurance / Action Plans for the cause C3 lack of business change capability across Public Health Wales						
Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
	capacity to perform and deliver.					
AP3.5	Each programme to ensure change management had specific and designated funding to meet the requirements.	The programme will be implemented. The changes will have been managed well to ensure that staff, processes, resources are embedded and aligned to organisational deliverables.	Recognition that each programme changes are funded to support staff to embed the new way/different ways of working.	Programme / Change Manager - DARC	31/03/2026	
AP3.6	Recruit a Programme/Change Manager for the DARC programme.	All programmes will have a change plan that considers the impacts of change and associated risks are mitigated. Programmes are implemented on budget and on time.	This will provide dedicated resource to ensure that change is recognised, financed and planned for which will help Staff embed any changes needed.	Tim Hooper	30/09/2025	