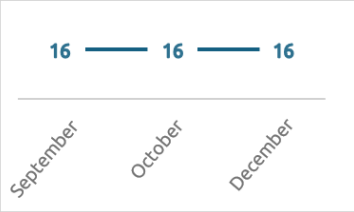


Risk Reference and Link to Strategic Priority	Risk Description			
<p><b>SRR 5</b></p> <p><b>Strategic Priority</b></p> <p><i>“Enabler Risk and incorporates all Strategic Priorities.”</i></p>	<p><b>There is a risk that:</b> we fail to fully exploit digital and data fully to improve public health in Wales.</p> <p><b>Caused by:</b></p> <ol style="list-style-type: none"> <li>1. capacity and capability within PHW and external partners.</li> <li>2. lack of digital and data literacy within PHW as a whole</li> <li>3. lack of business change capability across Public Health Wales</li> <li>4. dependency on other organisations</li> </ol> <p><b>Resulting in:</b></p> <p>Poorer public health outcomes for the people of Wales</p>			
<p><b>Executive Director Sponsor</b></p>	<p><b>Director of Knowledge and Research</b></p>			
<p><b>Assuring Committee</b></p>	<p><b>Knowledge, Research and Information Committee</b></p>			
Trend	Current Position of Risk Including Risk Appetite and Risk Decision	Position Statement – Executive Director Update		
 <p>16 — 16 — 16</p> <p>September      October      December</p>	<table border="1" data-bbox="465 884 1368 962"> <tr> <td style="background-color: #92d050;"><b>Willing</b></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> <p><b>Current Score</b> = 16  <b>Target Score</b> = 6  <b>Risk Appetite Level Applied</b> = Willing, therefore, within tolerance level.</p>	<b>Willing</b>	PHW is eager to be innovative and take on a high level of risk, but only in the right circumstance.	<p>The current digital and data portfolio is deliverable within our existing capability and capacity although this is a stretch given the level of change maturity within business areas.</p> <p>There is concern that additional demands risk destabilising delivery and could render the portfolio undeliverable. Managing the scale of change is difficult due to constraints in technical expertise, limited availability of senior management, and inconsistent levels of change management maturity across different business areas. These factors collectively increase the complexity and vulnerabilities of delivering initiatives.</p>
<b>Willing</b>	PHW is eager to be innovative and take on a high level of risk, but only in the right circumstance.			

		Many aspects of the portfolio are dependent on DHCW and active management of the relationship is required for successful delivery
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<b>Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance</b>			
<b>C1: capacity and capability within PHW and external partners.</b>			
<b>Control Reference</b>	<b>Internal Control</b>	<b>Internal Sources of Assurance</b>	<b>How/When is it monitored?</b>
<b>C1.1</b>	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
<b>C1.2</b>	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

<b>Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance <sup>1</sup></b>			
<b>C2: lack of digital and data literacy within PHW as a whole</b>			
<b>Control Reference</b>	<b>Internal Control</b>	<b>Source of Assurance</b>	<b>How/When is it monitored?</b>
<b>C2.1</b>	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 Data project board

<b>Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance <sup>1</sup></b>			
<b>C2: lack of digital and data literacy within PHW as a whole</b>			
<b>Control Reference</b>	<b>Internal Control</b>	<b>Source of Assurance</b>	<b>How/When is it monitored?</b>
<b>C2.2</b>	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
<b>C2.3</b>	R, Python and Power BI established as tools of choice for most new analysis	Assurance reporting	DARC Programme Board DSAB
<b>C2.4</b>	Strategic Workforce Plan agreed	Assurance reporting	BET

<b>Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance <sup>1</sup></b>			
<b>C3: lack of business change capability across Public Health Wales</b>			
<b>Control Reference</b>	<b>Internal Control</b>	<b>Source of Assurance</b>	<b>How/When is it monitored?</b>
<b>C3.1</b>	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

<b>Internal System of Controls – Linked to ‘Caused By’ section of Risk Description and Source of Assurance <sup>1</sup></b>			
<b>C4: Dependency on external organisations</b>			
<b>Control Reference</b>	<b>Internal Control</b>	<b>Source of Assurance</b>	<b>How/When is it monitored?</b>
<b>C3.1</b>	Earlier identification of dependencies on DHCW Active management of DHCW delivery for specific programmes eg LIMS.	D&D Portfolio – Monthly Delivery Confidence Assessment. Quarterly Assurance papers to BET/KRIC	DDDA

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.	Head of Data Science & Analysis Head of Digital Services	30/06/2027	<p><b>December 2025</b> Competency framework for data analysis and data science ready for DDDA approval. Delay on data engineering until Principal Data Engineer is in post, 5 Jan 2026. People &amp; OD workstream learning and development matrix will be aligned with the competency frameworks and support the L&amp;D pathways. Cloud professions L&amp;D pathways have been identified to support PHW staff in migration to the cloud. POD job families steering group has been set up.</p> <p><b>October 2025</b> Validation of data job family competency framework due to be complete by end October. Competency framework will then go to DDDA for approval.</p>
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	Create capacity and depth of skill to meet deliverables of IMTP/BAU requirements.	Governance & General Manager - RDDD	31/12/2025	<p><b>December 2025</b> Unsuccessful recruitment for Data Engineers. To meet the shortfall, 2</p>

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
		Project Managers funded by PHW investment.				<p>agency staff have been approved to meet the gap with 1 to be engaged.</p> <p><b>October 2025</b></p> <p>Recruitment continues. Successfully appointed Lead Cloud Architect, Principal Data Engineer, Business Analyst, Senior Cyber Security Engineer, Delivery Manager/Scrum Master. Further work continues with workforce planning and apprenticeship opportunities</p>
<b>AP1.3</b>	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.	Governance & General Manager – RDDD	31/08/2025	<p><b>December 2025</b></p> <p>Unsuccessful recruitment for Data Engineers. To meet the shortfall, 2 agency staff have been approved to meet the gap with 1 to be engaged.</p> <p><b>October 2025</b></p> <p>Successfully recruited to Lead Cloud Architect and Principal Data Engineer. Agency support continues until roles start in PHW to avoid disruption in service delivery. However, the agency data engineer has had to leave suddenly, and the permanent recruit will not be in post until January. We will explore agency support to bridge this additional gap.</p> <p><b>August 2025</b></p>

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
						Technical resource has bridged the gap, however with the exception of 2 roles will all end on 31/08/2025. Exceptions are Lead Cloud Architect and Principal Data Engineer.
AP1.4	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.	Head of Data Science & Analysis	30/06/2026	<p><b>December 2025</b> DARC Programme remains at amber-red, with the expectation to return to amber at the next programme board, 18 December. Good progress has been made in identifying and planning the areas to migrate to the Google Cloud Platform (NDAP first: RDD, CDSC and medusa. Planning has started to address disaster recovery needs for genomics data. L&amp;D pathways being identified and shared as part of the DARC Programme, to support staff in the migration.</p> <p><b>October 2025</b> The tier 1 Data, Analysis, Registers and Cloud (DARC) Programme, of which a significant part is the migration of our analysis into the Google Cloud Platform (GCP) was assigned a RAG status amber-red at the Programme Board in September. This was due to the lack of a written overall plan for DARC, and</p>

Gaps in Assurance / Action Plans for the cause C1 capacity and capability within PHW and external partners.						
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						unknown dependencies on the Digital health Protection Programme (DHPP). Good progress has been made of both of these, and we expect to return to amber at the October Board. The first bulk migration of data into the GCP should take place in this quarter. The DARC Programme includes a people workstream, who's role is to understand changing roles and responsibilities in the Programme, and when it becomes BAU, and to ensure sufficient, appropriate training and guidance for staff moving into the new environment.
<b>AP1.5</b>	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.	Head of Data Science & Analysis	31/03/2027	<p><b>December 2025</b>  An emerging plan has been developed for modelling to support the PHW measurement system / IMTP &amp; strategic priority delivery.  Automating updates of existing work to be explored as part of the migration of analysis to the cloud.  Analysis of BMI, weight-loss drugs and comorbidities in SAIL underway, comms plan under development.</p> <p><b>October 2025</b></p>

Gaps in Assurance / Action Plans for the cause C1 capacity and capability within PHW and external partners.						
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						October 2025: scoping work for MSK paper has been initiated. This is the last paper in our current series of projections papers.
AP1.6	Establish a Digital, Data and Technology Profession Capability Framework.	Successful recruitment and development pathways for DDaT professions is in place.	This will encourage and embed the technical specialities within both PHW and the NHS and bring talent / skills into the organisation.	Head of Data Science & Analysis Head of Digital Services	30/06/2027	<p><b>December 2025</b> Competency framework for data analysis and data science ready for DDDA approval. Delay on data engineering until Principal Data Engineer is in post, 5 Jan 2026. People &amp; OD workstream learning and development matrix will be aligned with the competency frameworks and support the L&amp;D pathways. Cloud professions L&amp;D pathways have been identified to support PHW staff in migration to the cloud.</p> <p><b>October 2025</b> Validation of data job family competency framework due to be complete by end October. Competency framework will then go to DDDA for approval.</p> <p><b>August 2025</b> Commenced validation of data job family competency framework.</p>

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
						POD have supported the descriptions for DDaT professions and wish to have similar competency sets for other areas such as research and evaluation before formalising. In the meantime, more roles are using the SFIA competencies or the Welsh interpretation of those. PHW is working with DHCW and other NHS Wales bodies to develop approved job descriptions for many areas. As an example, the Advanced Data Engineer role currently being recruited uses the working/practitioner/advanced/expert classifications for all base skills needed.
AP1.7	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.	Head of Data	01/02/2026	<p><b>December 2025</b> Automation is an important component of the DARC programme. Work with the priority areas – CDSC, RDD, Medusa, has already identified areas for reducing risk and manual labour through automation, and these will be implemented as part of the DARC Programme.</p> <p><b>October 2025</b> We have successfully appointed a new principal data engineer who will begin the role on 5 Jan 2026. We are currently in a second round of hiring</p>

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Reference	What Action?	How will we measure efficacy?	How will this action impact/mitigate the risk?	Who is Responsible?	By When?	Progress
						for 2 further data engineers. Until these roles are filled, the remaining data engineer is focussed on delivering the data documentation for the DARC programme. Target date changed due to delay in recruitment.
<b>AP1.8</b>	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	<p><b>December 2025</b> Workshop is paused whilst the guidance and good practice is developed. Guidance on generative AI and AI in Research and Development is at the review stage. AI guidance for procurement, and for behavioural science are next to be addressed. An AI Register has been created, which is an important part of our AI assurance. A number of AI tools: including tools for smoking cessation, lung cancer screening, radiology training have been presented at AIDA for approval.</p> <p><b>October 2025</b> A workshop on AI opportunities is planned for the autumn. An AI register proposal is being developed, which will record AI activity in PHW.</p>

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
AP1.9	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 DHCW 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	<p><b>December 2025</b> Quarterly Service Level Agreement meeting and Planning meeting held with DHCW to discuss support response and delivery and to align digital programme routemaps. Ongoing attendance in national programme meetings such as LIMS and National Target Architecture.</p> <p><b>October 2025</b> Ongoing meetings between DHCW and PHW teams to ensure national programmes are on track – key areas of focus have included Cloud, Data and LIMS2.</p> <p><b>August 2025</b> No further update this month</p> <p><b>July 2025</b> Welsh Government have now shared the governance of DDaT, providing a level of clarity. Communication with our partners to further establish their position in terms of prioritisation / resource/agenda/governance. Escalation process in place within the partner organisations and digital directors. Strengthened our representation at National Programme</p>

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
						boards - includes PHW representation at NDR prioritisation board. Early identification has been completed to identify dependencies on DHCW and WG.
<b>AP1.10</b>	Realise opportunities to create more senior management bandwidth.	Specified programmes of work are delivered in line with expectation.	Identifying, sourcing & maximising additional funding where possible will build both capacity and capability to meet demands. Sufficient senior management available and utilised to meet organisational change / programme demand capacity.	Governance & General Manager RDDD / Head of Operations & General Manager HWB	March 2027	<b>December 2025</b> Following successful procurement process additional senior support has been commissioned to commence in January 2026.  <b>October 2025</b> New action added to build senior management capacity and capability within funding/investment opportunities. Working with Health & Well Being Directorate to understand potential opportunities.

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
<b>AP2.1</b>	To establish parameters for the efficient and safe use of AI tools across PHW. Providing 'How to' guidance	Lack of data breaches reported using approved AI Tools.	PHW will have clear parameters to work to, which should reduce the	Head of Data Science & Analysis	March 2026	<b>December 2025</b> On track. Guidance on generative AI and AI in Research and Development is

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
	for staff to follow to ensure best practice compliance.	Efficiencies in time and quality being realised.	poor compliance/use of AI capability.			<p>at the review stage. AI guidance for procurement, and for behavioural science are next to be addressed. An AI Register has been created, which is an important part of our AI assurance.</p> <p><b>October 2025</b> Generative AI guidance to be circulated for internal consultation in October. Further work on other guidance is progressing through the AI Design Authority. Proof of concept for an AI register to be presented at October's AI Design Authority.</p>
<b>AP2.2</b>	See AP1.2					
<b>AP2.3</b>	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.	Head of Data	30/09/2026	<p><b>December 2025</b> Data documentation – this is complete for CDSC, Medusa and RDD data science and analysis, using the approved template. Purview (automated data cataloguing) has been</p>

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
						<p>approved for use by DHCW, and implementation will commence in February.</p> <p><b>October 2025</b>            Formal documentation now nearly completed for data science and analysis team. CDSC should complete documentation by the end of October. We are iterating the documentation as necessary to ensure that we capture all of the relevant information about each data set. The DDDA has approved our acquisition of Microsoft Purview as a data catalogue, and we are collaborating with DHCW to get access to it as soon as possible.</p>
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	31/12/2026	<p><b>December 2025</b>            Interviewing process in progress for L3 apprentice. Workforce plan updated and when approved completion dates may be amended.</p> <p><b>October 2025</b></p>

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
						Successful in achieving funding for a Level 3 Apprentice in User Centred Design commencing in November 2025. Development of a more established pathway remains in scoping/design.
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.	Principal Data Scientist	31/03/2027	<p><b>December 2025</b> <b>ON TRACK</b></p> <p><b>October 2025</b> The project is close to delivering its final MVP, with clinically reviewed data and a refined, reusable code pipeline. Next steps include completing documentation, sharing code on GitHub, and beginning analysis once NSW data is available.</p> <p><b>August 2025</b> A cohort within SAIL has been identified and BMI records analysed. Work on identifying comorbidities is progressing, alongside ongoing assessment of data</p>

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
						<p>quality and recording patterns in GP records.</p> <p><b>July 2025</b> The obesity drug modelling project is about to begin on the SAIL database, focusing on primary care data analysis, comparison with surveys, and modelling of care and rollout scenarios with the working group. A potential project on smoking scenarios is also under consideration following a request from CMO</p>
<b>AP2.6</b>	Maximise the use of M365 tools and/or automation to support internal efficiencies, process improvements and data capture.	<p>DDDA and AIDA sighted on new software being proposed for purchase and assess against current in house paid tools.</p> <p>AIDA will be sighted on AI and Automative tools. Both will be able to drive embed controls.</p> <p>Training for staff on using M365 products from DHCW being promoted.</p>	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	<p><b>December 2025</b> Group formed to discuss support models for automations in PowerApps. Meetings held with NHS P&amp;I developers to understand their mechanisms for support and development.</p> <p><b>October 2025</b> Added as a new action</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
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.	Governance & General Manager - RDDD	31/12/2025 <b>Completed.</b>	<p><b>October 2025</b> Portfolio Lead for Digital &amp; Data and Portfolio Lead for DHPP started in PHW. Action can be closed.</p> <p><b>August 2025</b> Portfolio Lead appointed with an expected start date of end September 2025.</p> <p><b>July 2025</b> Interviews set for July 2025.</p>
AP3.2	Manage the 1) transition to using a new national cancer patient data form (WCDS) as a main data source into the existing WCISU cancer registration system (CATRIN), through CATRIN developments with NHS England, and input to the governance processes of WCDS implementation.	WCISU cancer registration quality and timeliness do not appreciably deteriorate in terms of time to complete a single calendar year of registrations. There is no deterioration of UK and Ireland Association of Quality Indicators for the WCISU cancer registry as WCDS is introduced	Minimise or eradicate the risk of worsening timeliness and quality of WCISU population-based cancer registration.	Director of WCISU/Public Health Consultant WCISU	31/03/2027	<p><b>December 2025</b> Early indications that the 2023 registrations partially derived coming from WCDS are of better quality than anticipated, although concerns remain.</p> <p>WCISU and Pan-Registries Collaborative are now engaged in early stages of scoping for 2026/27 onward DARC Programme</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
	2) Risk of worsening data quality as a result of new WCDS use and the consequent impact on WCISU cancer registration					<p>Board and IMTP registry developments that will contribute to improving registry timeliness whilst maintaining adequate data quality and standards.</p> <p>WCISU are represented at strategic and operational level at further improvements in phase 2 of WCDS development. In part, this is aimed at improving the MVP's issues contributing to poor functionality, and poor data quality, completeness and inefficiencies.</p> <p><b>August 2025</b> No further action to date, WCDS and automation efficiencies under review until we start to see and process more of the data.</p> <p><b>July 2025</b></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
						Development of new WCDS data flows into new CATRIN uploading portals complete after collaboration between PHW WCISU and Digital, DHCW and NHS England NDRS (includes English cancer registry). New data source recently partially introduced across NHS Wales – the t WCDS - Canisc replacement). Further rolling programme of implementation on-going. Increased automated processes used within this data flow for new registrations.
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.	Public Health Consultant / Head of Digital Services / Digital Clinical Safety Officer	31/03/2027	<b>December 2025</b> Clinical Risk Management Plans have commenced for top-tier programmes to ensure compliance with Digital Clinical Safety standards. The CDSO remains focused

Gaps in Assurance / Action Plans for the cause C3 lack of business change capability across Public Health Wales						
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						<p>on the agreed priority programmes while offering responsive support to other areas as capacity allows. Work is ongoing with RDDD and NQIG to develop strengthened governance arrangements for digital clinical safety across the organisation.</p> <p><b>October 2025</b>  CDSO has prepared documents and has presented on her role at several forums within PHW. CDSO is inputting to new digital programmes, with focus on highest profile programmes as per prioritisation by digital and executive director. CDSO providing responsive advice to other areas according to capacity. Current progress being made around governance</p>

Gaps in Assurance / Action Plans for the cause C3 lack of business change capability across Public Health Wales						
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						with discussion involving executive director of RDDD and colleagues in NQIG.
<b>AP3.4</b>	Implement the required actions as detailed under <b>SRR2</b>					See SRR2 Updates.
<b>AP3.5</b>	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.	Portfolio/ Change Managers	31/03/2026	<p><b>December 2025</b> DHPP – A Senior Change Lead was included in the resource profile and Full Business Case for the programme. That resource is now in place.</p> <p><b>August 2025 – No update provided.</b></p> <p><b>July 2025</b> Strategy &amp; Planning (PMO) have developed Project and Programme Management standards (will be formally launched in September 2025) and are currently working with the Tier 1 &amp; 2 programme managers to align practices and processes</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
						in each of the programmes to the standards.
<b>AP3.6</b>	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.	Strategic Programme Lead	30/09/2025 Completed & Closed	<b>October 2025</b> Programme Manager for DARC programme recruited and in post. <b>Action Closed.</b> <b>August 2025</b> A PMO Programme Manager is now in post and was assigned to the DARC programme on 01/08/25