

Strategic Risk Register

Risk 3 There is a risk that people in Wales are insufficiently engaged and enabled on action they can take to improve their health and wellbeing. *Caused by* failure to provide people with sufficient quality information, motivation, choice and access to timely advice and services. *Resulting in* people feeling they are limited in exercising control over their health and wellbeing and avoidable poor health outcomes.

Risk Owner's Overview Assessment Status

Engaging with our population is central to better understanding health needs and empowering people to co-design public health solutions and become partners in their health and well-being. However, with significant impacts on the conditions for health resulting from the pandemic and more recently, the cost of living crisis, empowering our population becomes even more challenging and there is a risk of widening health inequalities unless actions taken involves working with our communities and using a proportionate universalism approach.

Actions are underway across organisational programmes, and all organisational strategic priority areas, to understand the views of our population (including young people) around factors that determine their health, and obtain proactive feedback from people we work with and for.

Whilst existing controls are progressing and further actions are being taken to enable PHW to better engage with our population, there has been no change in the likelihood of the risk (and therefore the risk scoring), due to the scale of change required (which will also need to be with and through our communities and stakeholders).

The DCA has been changed to green to reflect the ongoing positive progress on our actions.

There is currently an opportunity to ensure that addressing this risk fully informs our IMTP planning for 2024-27, so that our organisational actions have a demonstrable impact – whether it is through informing, advocating, mobilising or delivering services. For example, evaluating 'Our Approach to Engagement' provides an opportunity to identify impact to date and identify actions that will effect change.

The risk descriptor will be reviewed to focus on areas that we can influence and demonstrate impact. Alongside this, there will be a review of the target risk, to account for how much of the risk can be mitigated by PHW alone.

Cross reference to Risk 6

Sponsor and Assurance Group

Executive Sponsor	Sumina Azam, Director of Policy and International Health / WHOCC Contributors: Jim McManus, National Director Health and Wellbeing Meng Khaw, National Director, Health Protection and Screening Services Huw George, Deputy Chief Executive and Exec Director of Operations and Finance Claire Birchall, Interim Exec Director of Quality, Nursing and Allied Health Professionals
Assurance Group	Quality, Safety and Improvement Committee

Inherent Risk

Date	10/05/23	Likelihood:	4	Impact:	5	Score:	20
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Risk Score					Risk Decision	Delivery Confidence Assessment
Current Risk			Target Risk		Treat	GREEN
Likelihood	Impact		Likelihood	Impact		
3	4	12	2	3		

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EXISTING CONTROLS			SOURCES OF ASSURANCE	Level at which the Assurance is provided to				
No.	Control	Exec Owner		Team / Division / Project / Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board
SR 3.1	Behavioural Science Unit to provide specialist expertise on behavioural insights integration into the programmes of work, and develop the application of it, to improve and protect health & wellbeing in Wales	Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team KRIC meeting notes	X	X	X	X	
SR 3.2	Time to Talk Public Health Survey to enable regular public engagement to inform public health policy and practice	Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 3.3	Behavioural insights integration into the work of population health programmes and public communications	National Director of Health and Well-being	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 3.4	Robust communications plans underpinned by evidence-based methodologies in place for planned campaigns	Deputy Chief Executive and Director of Operations and Finance	Annual plan of communications campaigns Evaluation of public campaigns and sharing of learnings	X	X			
SR 3.5	Provision of timely, accurate and relevant risk communications in response to emerging public health issues.	Deputy Chief Executive and Director of Operations and Finance	Incident Management Team or Outbreak Control Team notes Significant issues are discussed with Executive and at Board	X		X		X
SR 3.6	The Public Health Young Ambassadors group as a conduit to enable conversations to take place with young people	Director of Quality, Nursing and Allied Health Professionals	Briefing notes following Residential Board minutes			X		X
SR 3.7	Active engagement with service users and the public with respect to public health services, such as for our population screening programmes, vaccine programmes, blood-borne virus	National Director of Health Protection and Screening Services	Implementation of LTS priority on Excellent PH services Performance monitoring of IMTP PHW contribution to National Immunisation Framework Vaccine equity surveillance reporting	X	X	X	X	

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	prevention, as part of our work to deliver excellent public health services.		Screening inequity strategy and associated reporting Screening engagement reports					
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Action plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 3.1	Ongoing engagement with the public, our service users and stakeholders to ensure we understand needs and priorities, and obtain feedback on the impact of our work	Further development of public and service user engagement through Civica system	Director of Quality, Nursing and Allied Health Professionals	March 2024	<p>October 2023 – work is progressing as per September 2023, no new update.</p> <p>December 2023: - Briefing paper due to be presented at BET in Q4 outlining a refreshed approach. In addition we are working with Procurement, with survey specification out on Multiquote project (for approved bank of questions)</p>
AP 3.2 (see AP1.5)	Co-ordination of activity to understand the needs of underserved populations	Establish an Inclusion Health programme in PHW	National Director of Health Protection and Screening Services	December 2023	<p>October 2023- Group still to be formally established with dedicated capacity available from December to take forward this work. Meeting on 13 Nov to discuss and a session with Execs being scheduled to discuss way forward. Informal engagement on the Inclusion Health agenda has taken place cross Directorate with some useful liaison and information sharing.</p> <p>December 2023 Ongoing discussion with Director of Health and Wellbeing on establishing a cross-organisational programme of work for</p>

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					inclusion health. Resource identified in HPSS and HWB directorate to take forward.
AP 3.3	Engagement of our population to actively manage our own health and well-being and associated risks	Work with Welsh Government and Health Boards to engage the population and subsets of the population to fully engage in and control risks to their own health and well-being, including understanding resources required to achieve this.	Director of Policy and International Health, National Director of Health and Well-being, National Director of Health Protection and Screening Services	March 2024	<p>October 2023 – Ongoing support by the Behavioural Science Unit to optimise engagement in PHW services, and work underway to develop a strategic plan to prioritise and maximise impact of the Unit’s work. Behavioural science continues to inform the work of the Health Improvement Division – no changes since September, this is now part of business as usual.</p> <p>December 2023 The Behavioural Science Unit is developing its strategic plan so that behavioural science is embedded across the organisation and the wider public health system.</p> <p>HPSS identified members of the health protection and screening teams to become Behavioural Science champions as part of the Behavioural Science Unit.</p>
AP 3.4	See actions for risk 6				

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Risk 5	There is a risk that we insufficiently prevent, plan for and respond to emerging external threats to public health. <i>Caused by</i> insufficient horizon scanning, forecasting, use of data/digital tools and planning/training/exercising for response. <i>Resulting in</i> suboptimal responses to near-term incidents (including but not limited to infectious disease) and longer-term emerging risks to public health.
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Risk Owner's Overview Assessment Status

The current risk score is at the inherent risk level.

There are existing controls relating to: Emergency planning and learning from incidents and outbreaks, including the COVID pandemic; workforce planning and development for response; training and exercising; and horizon-scanning activities.

However, there is more action required to reduce the impact of external threats, through developing an understanding of roles and responsibilities of each component of the response architecture and the health protection competencies that need to be held in reserve for surge response. The learning from COVID response is not yet complete and the Public Inquiry is underway. These will provide more information to improve response to external threats. Action is also required to join up the horizon-scanning efforts across the organisation.

Good progress has been made on clarifying roles and responsibilities for health protection in Wales, through the publication of the All Wales Communicable Disease Outbreak Plan and in PHW, with the approval of the PHW Emergency Response Plan. In conjunction with the learning from the COVID Inquiry on Emergency Planning and the planned conclusion of the PHW debrief on operational readiness, the impact is very likely to reduce over the coming months. Additional action is still required to reduce the impact of external threats, through developing an understanding the demands on and the roles and responsibilities of each component of the response architecture and the health protection competencies that need to be held in reserve for surge response. Further Learning Events for the Early Phases of COVID-19 Response are being arranged and evidence from the Public Inquiry continues to emerge. More specific actions will be determined as recommendations emerge from the COVID Public Inquiry. There will be a focus on addressing health inequalities through emergency planning and response.

Action is also required to join up the horizon-scanning efforts across the organisation.

Sponsor and Assurance Group

Executive Sponsor	Meng Khaw, National Director of Health Protection and Screening Services Contributors: Iain Bell, Director of Knowledge and Research Sumina Azam, Director of Policy and International Health / WHOCC
Assurance Group	Quality, Safety and Improvement Committee

Inherent Risk

Date	15 May 2023	Likelihood:	3	Impact:	4	Score:	12
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Risk Score					Risk Decision	Delivery Confidence Assessment
Current Risk			Target Risk		Treat	AMBER
Likelihood	Impact					
3	4	12	3	2		

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EXISTING CONTROLS			SOURCES OF ASSURANCE	Level at which the Assurance is provided to				
No.	Control	Exec Owner		Team / Division / Project / Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board
SR 5.1	Horizon Scanning	National Director of Health Protection and Screening Services	IHR reports	X	X			
			UKHSA sources	X	X			
			PHW horizon scans (<i>incl EPRR Work with National Security Risk Assessment (NSRA)</i>)	X	X			
			Genomics	X	X			
			Links with APHA and other agencies	X	X			
			Weekly meetings with HPT	X	X			
			UKHSA daily emerging infections horizon scanning results	X	X			
			GEZI Wales horizon scans every 2 weeks	X	X			
SR 5.2	Forecasting and use of data/digital tools	National Director of Health Protection and Screening Services	Exceedance algorithms	X	X			
			Reports including exposures, climate and environmental determinants.	X	X			
			Short/medium term models working with academic partners.	X	X			
SR 5.3	Planning/training/exercising for response	National Director of Health Protection and Screening Services	PHW Emergency Response Plan	X	X	X	X	X
			Communicable Disease Plan for Wales	X	X	X	X	X
			Multi-Agency Plans for Emergencies (Contributor)	X	X			
			Emergency Planning & Business Continuity Group Meetings (Quarterly)	X	X			
			Local Resilience Fora (LRF) Meetings	X	X	X		
			Wales Resilience Partnership Team Meetings (Quarterly)	X	X			
			Wales Resilience Forum Meetings (Quarterly)	X	X			
			4 Nations Public Health (PH) Emergency Preparedness, Resilience & Response (EPRR) Meetings (Quarterly)	X	X			
			PHW EPRR Training Prospectus	X	X			
			LRF Training Prospectus	X	X			
			Wales Learning & Development Group (Exercises)	X	X			
			PHW Annual Assurance Return to Welsh Government on EPRR	X	X	X	X	X
			SR 5.4	Debrief and learning from incidents and outbreaks	National Director of Health Protection	Organisational debrief and learning from the response to the COVID pandemic and other incidents and outbreaks	x	x

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		and Screening Services	EPRR Lessons Identified Register for Major Incidents & Emergencies	x	x			
			Covid 19 Public Inquiry Steering Group	x	x	x		
SR 5.5	Health Impact Assessments to understand potential threats and opportunities to health from policies and programmes, as well as external events.	Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team		X	X		
SR 5.6	Development of tools and products to implement Futures approaches	Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team		X	X		
SR 5.7	Operational application of corporate systems and policies relating to procurement and financial planning	National Director of Health Protection and Screening Services	Monthly financial reporting	X	X	X		

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Action plan No.	Gaps in controls		Action Plan	Exec Director	Due Date	Progress
AP 5.1	Enhancement of current genomics work required	CW	Expand the range of genomics horizon scanning.	National Director of Health Protection and Screening Services	March 2024 Complete	October 2023 collaborating with partners and exploring opportunities
		HW	Assess risk, vulnerability, capacity, exposure, hazard characteristics and their possible sequential effects on PHW. Consider the organisations capability and capacity to respond to, and mitigate, identified risks detailed within the NSRA. PHW will continue to engage and work with the Wales Risk Group and contribute to the development of LRF Community Risk Registers.	National Director of Health Protection and Screening Services	March 2024	November 2023 Complete December 2023 EPRR represented PHW at Wales Resilience Partnership Team, Wales Resilience Forum, provided formal feedback on Wales Risk Management Framework, Pan Wales Response Plan, Wales Resilience Outlook and Wales Resilience Framework
AP 5.2	Enhancement of exceedance algorithms required	CW	Further development and Operationalisation.	National Director of Health Protection and Screening Services	March 2024	October 2023: no update, work in progress December 2023 Work in progress to develop the enhancement of exceedance algorithms is on track
AP 5.3	Work required to enhance planning activity	HW	Review and update supporting documentation for the PHW Emergency Response Plan (V.3)	National Director of Health Protection and Screening Services	March 2024	October 2023 EPRR Team priorities and 'My Contribution' objectives set to deliver on action. Revised 'Due Date' December 2023 Work progressing on update of Emergency

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						Telephone Contacts Directory. On track
		AJ	Review and update the Communicable Disease Plan for Wales	National Director of Health Protection and Screening Services	November 2023 Completed	<p>October 2023 FINAL consultation with Partners and Welsh Government complete. Document nearing completion. Project on track.</p> <p>December 2023 Submission approved by Welsh Government HPAG. (05/12/23). Process recognised as 'best practice example'. Action complete.</p>
		HW	Work with partners to review and update multi-agency plans for emergencies.	National Director of Health Protection and Screening Services	March 2024	<p>November 2023 Providing feedback to South Wales and Gwent LRFs on MAIC and Command and Control arrangements respectively.</p> <p>December 2023 Providing feedback to Dwr Cymru on Water Distribution Plans for Wales, Gwent LRF on Reservoir Inundation Plans, 3no. LRFs on Pandemic Plans respectively.</p>
AP 5.4	Ensure PHW engages with and participates in all appropriate EPRR training & exercise opportunities	HW	Identify opportunities to participate in Exercise Doll House & Exercise Astral Bend. <i>(Exercising PHW staff in multi-agency command and control environment)</i>	National Director of Health Protection and Screening Services	July 2023 & September 2023 Complete	<p>November 2023 Debrief report complete and out for consultation with participants.</p>

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						<p>December 2023 Debrief report agreed, to be presented at EPBC and recommendations added to the PHW EPRR Lessons Management System. Action Complete.</p>
			Review and update PHW EPRR Training Prospectus to reflect the updated PHW Emergency Response Plan (V.3).	National Director of Health Protection and Screening Services	<p>October 2023 February 2024</p>	<p>November 2023 Initial training on Emergency Response Plan complete. Prospectus for 2024 under development.</p> <p>December 2023 Competing priorities/revision to 'Due Date' requested to February 2024.</p>
			Plan and deliver an exercise for the updated PHW Emergency Response Plan (V.3)	National Director of Health Protection and Screening Services	<p>November 2023 March 2024</p>	<p>November 2023 Preparation ongoing, project on track.</p> <p>December 2023 Exercise rescheduled at request of Exec Director until 06/03/24. Request change of due date to March 2024</p>
		HW AJ	Support the planning and delivery of an exercise for the updated Communicable Disease Plan for Wales.	National Director of Health Protection and Screening Services	March 2024	<p>November 2023 FINAL DRAFT complete, document due to be submitted to Welsh Government (17/11/23). PROVISIONAL Exercise date set as 19/03/24, initial planning group meeting to</p>

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						<p>be scheduled for 12/23. Project on track</p> <p>December 2023 Submission approved by Welsh Government HPAG. (05/12/23). Process recognised as 'best practice example'. PROVISIONAL Exercise date set as 19/03/24, initial planning group meeting to be scheduled for 12/23. Project on track.</p>
AP 5.5	Ensure PHW has a sustainable mechanism for receipt of Major Incident notifications.	HW AJ	Identify and implement a sustainable mechanism for receipt of Major Incident notifications	National Director of Health Protection and Screening Services	March 2024	<p>November 2023 REQUEST DATE CHANGE to March 2024 Finalising report for wider HPSS DMT after providing a verbal update to internal HPSS DMT (08.11.23)</p> <p>December 2023 Report with recommendations complete for submission to HPSS DMT.</p>
AP 5.6	Ensure lessons are identified from incidents and outbreaks, including the COVID pandemic	HW AJ	Carry out debrief sessions to identify lessons from the COVID pandemic, including horizon scanning, surge response and implementation at scale.	National Director of Health Protection and Screening Services	December 2023 March 2024	<p>November 2023 Competing priorities/revision to 'Due Date'. Multi-Directorate Planning Group meeting to be scheduled for 12/23 to scope delivery</p>

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						<p>December 2023 Multi-Directorate Planning Group meeting scheduled for December to scope delivery. Due date change to March 2024 requested</p>
		HW AJ	Maintain the EPRR Lessons Identified Register for Major Incidents & Exercises and monitor progress on identified learning from approved debrief/inquiry reports.	National Director of Health Protection and Screening Services	March 2024	<p>November 2023 Monitored via EPBC Group scheduled for Spring 24.</p> <p>December 2023 No update this is being monitored via EPBC Group which is scheduled for spring 24</p>
		TH	Ensure the wider organisational learning (lessons identified) arising from the COVID-19 Inquiry are identified and distilled for BET at key points. NB. Likely to be when each set of interim findings are published.	Covid 19 Public Inquiry Steering Group	March 2024	<p>October 2023 New action</p> <p>December 2023 Process in development for the organization to receive, consider and respond to findings issued by the Covid-19 inquiry (and other Inquiries)</p>
AP 5.7	Systematic organisational approach to embedding Horizon Scanning		Strategic BET development session to explore mechanisms and processes for embedding horizon scanning	Director of Policy and International Health	July 2023	<p>October 2023 update: BET development session held with School of International Futures. Follow up being planned to embed use of Futures tools.</p> <p>December 2023 Further external support being procured to develop an organisational systematic approach to</p>

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						horizon scanning / use of Futures tools.
AP 5.8	Update prevalence of disease and projections of future disease levels in Wales		To systematically analyse the prevalence of disease, project these levels into the future and assess our current interventions and what more needs to be done	Director of Knowledge and Research	Dec 2023	August 2023 – on track December 2023 analysis completed and considering publication path
AP 5.9	Relating to control 5.7 ensure consistent and effective operational application of corporate systems and processes relating to financial planning	MB	Taking an “excellent operations” approach, work to ensure optimal use of financial resource to support the mitigation of the risk. This will include an annual revive of resource allocation and an agile in year approach.	National Director of Health Protection and Screening Services	March 2024	December 2023 update: new action. This is likely to be an ongoing action. There has been additional resource allocated in year 2023/4 via financial realignment processes. Through the use of the financial “Management of in year variance” process there are planned actions relating to the purchase of equipment and cross organisation specialist training to support emergency planning and preparedness in PHW.

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Risk 6 There is a risk that we fail to deliver excellent public health services, including on screening, infection and health protection.
Caused by weakness in clinical and health protection processes, specialist workforce capacity and capabilities, innovation and/or capital investment.
Resulting in inadequate provision, responsiveness or uptake of services, poor individual patient and population outcomes and failure to meet quality standards.

Risk Owner's Overview Assessment Status

The current risk score is at the inherent risk level. There are existing controls relating to: workforce planning and development; mitigation of impacts of unexpected health threats through the establishment of effective systems and processes; and strengthening governance arrangements to ensure excellent service delivery in HPSS through implementation of the long-term strategy. Each of the three divisions in HPSS directorate are likely to score differently if reviewed independently and this will be reflected in divisional and directorate risk registers. The number of ongoing health protection threats remain stable, enabling health protection services to return to focus on pro-active work, such as for Blood-borne viruses, sexually transmitted infections and Tuberculosis. Diagnostic testing for COVID continues to be reduced in intensity as a result of the changes to the testing strategy implemented in 2023. Work is ongoing to build excellent services for infection through workforce planning and development. Screening recovery is progressing well for Breast Test Wales, but the risk around the clinical workforce capacity remains. Confirmation from WG that funding for screening recovery is approved for the year 2023/24. A transformation programme has been agreed to improve the Diabetic Eye Screening programme. Although there are specific aspects where the risk is higher, such as for Diabetic eye and Breast screening, overall, across the Directorate, the current risk is at the inherent risk. There is an opportunity to review the inherent risk score as the context has changed since the Strategic risk was conceived.

Sponsor and Assurance Group

Executive Sponsor	Meng Khaw, National Director of Health Protection and Screening Services Contributors: Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals
Assurance Group	Quality, Safety and Improvement Committee

Inherent Risk

Date	15 May 2023	Likelihood:	3	Impact:	3	Score:	9
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Risk Score					Risk Decision	Delivery Confidence Assessment
Current Risk			Target Risk		Treat	GREEN
Likelihood	Impact		Likelihood	Impact		
3	3	9	3	2		

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EXISTING CONTROLS			SOURCES OF ASSURANCE	Level at which the Assurance is provided to				
No.	Control	Exec Owner		Team / Division / Project / Programme	Directorate Team / Exec Lead	Business Exec Team / Sub Groups	Committee / Sub group	Board
SR 6.1	Overview and scrutiny of workforce capacity and capability is provided through clear governance arrangements with divisional SMTs and DLT	National Director of Health Protection and Screening Services	Divisional SMT meeting and minutes	X	X			
			DLT meetings and minutes		X			
			Escalation to BET with meetings and minutes		X	X		
			Divisional, Directorate and Corporate Risk Registers actively updated and risks escalated as appropriate	X	X	X	X	X
SR 6.2	Implementation of Business Continuity Arrangements where required and where appropriate	National Director of Health Protection and Screening Services	Business Continuity Action Plans for HPSS divisions	X	X	X		
			Emergency Planning and Business Continuity Group Meeting minutes		X			
			Training and Exercise reports to Emergency Planning and Business Continuity Group	X	X			
			Emergency Planning and Business Continuity Documentation (regular review and update)	X	X		X	
			Ability to sustain response to health threats		X			
SR 6.3	Utilisation and development of Policies and Procedures to enable effective and efficient service delivery, including Standard Operating Procedures and Protocols.	National Director of Health Protection and Screening Services	Corporate Policy and Control Document Reviews – corporate register update reports	X	X	X	X	X
			Health Protection Division – Standard Operating Procedures (document development, review and approval)	X	X			
			Infection Division – Standard Operating Procedures (document development, review and approval), alignment to UKAS accreditation requirements.	X	X	X	X	

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			Screening Division –For each of the screening programmes - Standard Operating Procedures (document development, review and approval)	X	X			
			Reports to Quality, Safety and Improvement Committee		X	X	X	
			Action Plan and Reports – Divisional Senior Management Teams	X				
SR 6.4	Uphold high professional standards: Professional Regulation – Medical, Nursing and Multi-Disciplinary Staff	Executive Medical Director Executive Director of Quality and Nursing and Allied Health Professionals	Medical, Nursing and Multi-Disciplinary Staff Revalidation - Annual Report to People and Organisational Development Committee / Quality, Safety and Improvement Committee				X	
			Quality review visit by Medical and Multi-Disciplinary Revalidation support unit			X	X	
			Quality Indicators Performance Monitoring	X	X	X	X	
			Monitor Specialist Registration and Revalidation		X	X	X	X
			Medical, Nursing and Multi-Disciplinary Appraisal Process – Quality Indicator		X	X	X	X
			Medical Job Planning Process – Quality Indicator			X		X
SR 6.5	Established Directorate Financial Management Systems and Processes	National Director of Health Protection and Screening Services	Directorate Finance reports to Directorate Management Team meeting (monthly). Supported by the Business Operations Meeting (BOM)	X	X			
			Divisional Finance reports to SMT	X				
			Executive Director Reports (to Executive and Board)			X		X
			Mid and End of Year Review Reports (Executive scrutiny)			X		X
SR 6.6	Implementation of learning from incidents		Datix reporting at programme and divisional level	X	X	X		

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		National Director of Health Protection and Screening Services	Putting Things Right - Quarterly Alert Exception Report (Quality, Safety and Improvement Committee)				X	
			National Reportable Incident Reporting (Quarterly) to Quality, Safety and Improvement Committee			X	X	
SR 6.7	Surveillance of health threats to inform timely and effective response	National Director of Health Protection and Screening Services	Communicable disease surveillance reports	X	X			
			Exceedance reports and protocols for escalation and response	X	X	X	X	
			Agreed criteria for escalation (reviewed on an annual basis)	X	X			
			Health Protection Situational Awareness Reports – (monthly report to Executive)	X	X	X		X
SR 6.8	Development of Workforce Plans for each Division and established processes to enable effective Recruitment	National Director of Health Protection and Screening Services	Reports of progress against developed Workforce Plans	X	X			
			Reports to the People and Organisational Development Committee				X	
			Directorate and Divisional-level workforce plans		X			
SR 6.9	Compliance with Infection control policies, procedures and related statutory and mandatory training	Executive Director of Quality and Nursing and Allied Health Professionals	IPC Audit plan and Environmental Audit Programme				X	
	Compliance with National Guidelines and Standard Operating procedures in place for IPC		IPC group assurance reports to QSIC				X	
			IPC Risk Register			X		
			Annual Clinical Audit Plan				X	
SR 6.10	Putting Things Right Policies and Procedures	Executive Director of Quality and Nursing and Allied Health Professionals	Monthly Reporting of patient service user experience including incidents, complaints and claims				X	
	Regular monitoring of incidents to identify immediate action required		Quality Reviews of Incidents and associated action plans		X			
			Thematic reviews on areas of concern				X	

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Action plan No.	Gaps in controls		Action Plan	Exec Director	Due Date	Progress
AP 6.1	NHAIS is being decommissioned by England and we currently rely on NHAIS to select breast screening cohort. Reliant on one member of staff who has detailed knowledge of NHAIS.	SH	Implementation of BSS select for Breast Screening Programme to maintain cohort selection for breast screening. Working group with NHS England colleagues to progress this change	Deputy Chief Executive / Executive Director of Finance and Operations National Director of Health Protection and Screening Services	March 2024	<p>November 2023: Work progressing to plan, with weekly sprint reports and show and tell updates. Currently agreeing minimal viable product.</p> <p>December 2023: Work continues to progress to plan. Minimal Viable product work should be completed in Jan 2024. Dates for UAT to be agreed early Q4. No new risks identified.</p>
AP 6.2	Recovery of the Breast Screening Programme is impacted by difficulty in recruiting specialist clinical staff to undertake reading of mammograms and assessment clinics.	SH	Recruitment processes underway for breast clinician role in North Wales. Planned recruitment in Southeast Wales for radiologist working closely with Health Boards. Planned retirement in 2023 will increase issue in North Wales and working with HB to explore potential ways forward.	National Director of Health Protection and Screening Services	March 2024	<p>November 2023: Works continues to explore options to fill a joint post in Llandudno with BCU. Recent new interest from a consultant, also exploring publication of an advert in BMJ</p> <p>December 2023: A Locum Consultant Radiologist has been employed, takes up post in Feb 2024: A further joint post with BCU will go out to advert in February 2024. A possible candidate for this post has been identified.</p>
AP 6.3	Sustainable provision of clinical infection services	RH DH	Continue to recruit to consultant posts; Deliver changes that will make the service more attractive including recruitment of Specialty and Specialist Doctors as well as Physician Associates, Clinical Scientists and Specialist Nurses.	National Director of Health Protection and Screening Services	Ongoing	<p>October 2023: - Six PAs have passed exams and have confirmed start dates for mid-November 2023</p> <p>December 2023: Six Physician Associates have started to work for PHW, two each for BCUHB, HDUHB and SBUHB services.</p>

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		<p>Set out service requirements in a business case and single establishment control submission as contribution towards the Directorate budget realignment work.</p>	<p>National Director of Health Protection and Screening Services</p>	<p>May 2023 March 2024</p>	<p>October 2023: - Approval halted and subject to further scrutiny.</p> <p>December 2023: Paper relating to Excellent Infection Services has been submitted and executive discussions relating to resource have been held. Part of the funding request to support implementation has been agreed and the division has prioritised accordingly.</p> <p>There is an ECP submission in preparation for role re-evaluations. A review of hot lab model and WSVC service model initiated.</p> <p>Request of date change to March 2024</p>
		<p>Complete training competencies for all staff who are able/required to deliver OOH services</p>	<p>National Director of Health Protection and Screening Services</p>	<p>September 2023 March 2024</p>	<p>October 2023: OOH services are being delivered through on-call arrangements across network apart from Rhyl that uses a shift pattern. This is being reviewed with intention to move to on-call.</p> <p>December 2023: Ongoing maintenance of OOH competencies of trainees. Quarterly oversight on Specialist Diplomas reporting at trainee level to Infection SMT to maintain momentum. Is now normal business activity now baseline has been established. COMPLETED</p>

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			<p>Complete Syndromic Molecular Procurement project to include:</p> <ul style="list-style-type: none"> • Respiratory • GI • AMR • Bone and joints • BBV • Sexual Health 	National Director of Health Protection and Screening Services	<p>October 2023 March 2024</p>	<p>October 2023: Slow and deliberate roll-out is planned as part of financial management of budgets.</p> <p>December 2023: Ongoing delays with procurement processes. Escalated to dDoF and Head of Procurement to expedite. Request change of Due date to March 24</p>
AP 6.4	Resilient Out of Hours Acute Health Protection Service	GS EM	Reviewing the model of service delivery to test resilience and sustainability	National Director of Health Protection and Screening Services	<p>July 2023 March 2024</p>	<p>November 2023: OCP concluded in March 23 with a delayed implementation date to August 2023 to facilitate collaborative implementation planning. POD colleagues currently overseeing formal process relating to the PHW respect and resolution process. Service is closely monitoring all operational aspects of the out of hours service delivery.</p> <p>December 2023: work in progress and status is as August to November update: OCP concluded in March 23 with a delayed implementation date to August 2023 to facilitate collaborative implementation planning. POD colleagues currently overseeing formal process relating to the PHW respect and resolution process. Service is closely monitoring all operational aspects of the out of hours service delivery.</p>
AP 6.5	Surge Plan for Acute Health Protection	GS EM	Agreed oversight and surge plan for Acute Health Protection	National Director of Health Protection and Screening Services	<p>September 2023 March 2024</p>	<p>November 2023: meetings set up and underway and is organised by EPRR to develop coordinated</p>

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						<p>organisational surge plan to which HP division is contributing</p> <p>December 2023: work in progress and status is as November update – Due date change requested to March 2024</p>
AP 6.6	Clinical Governance Framework		Approved and published Clinical Governance Framework	Executive Director of Quality and Nursing and Allied Health Professionals	July 2023	<p>November 2023: QNAHPs and the Office of the Medical Director have jointly agreed that the Clinical Governance implementation is to be incorporated into an organisational wide Quality oversight/assurance group as part of the wider Duty of Quality approach. This is now within the development phase</p> <p>December 2023- Framework approved and Steering group created to operationalise the framework for clinical services in PHW.</p>
			Progress to approval and implementation of Career Framework for regulated health professionals (non-medical)	Executive Director of Quality and Nursing and Allied Health Professionals	May 2023	<p>October 2023: Approved at QSI 12.10.23. Communication brief drafted with POD and ready to launch once documents are translated and published on the intranet</p> <p>December 2023: Approved and awaiting Welsh Translation of Graphics . Communications piece with POD in place to launch once document ready</p>

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			Progress to approval and implementation of the organisational Clinical Supervision Framework	Executive Director of Quality and Nursing and Allied Health Professionals	May 2023	<p>October 2023: Approved at QSIC 12.10.23 and internal will T&F in place with project plan for implementation an embedding in practice</p> <p>December 2023 Implementation plan created by T&F group. Retention post out to internal advert and postholder will take this work forward. Funding secured for Supervisor training /Professional Nurse Advocate. 11 applicants to start the programme in January 2024</p>
			SEPT 2023: Develop cross-organisational opportunities to bring together teams that are active in-service user experience and patient safety work in order to share best practice and learn lessons as part of the organisation's Clinical Governance arrangements.	National Director of Health Protection and Screening Services & Executive Director of Quality and Nursing and Allied Health Professionals	March 24	<p>November 2023: QNAHPs and the Office of the Medical Director have jointly agreed that the Clinical Governance implementation is to be incorporated into an organisational wide Quality oversight/assurance group as part of the wider Duty of Quality approach. This is now within the development phase. SUE will be a key input to this infrastructure. An SUE briefing paper (as part of a wider Our Approach to Engagement paper) is going to BET in December 2023. This will include recommendations on the approach and next steps</p> <p>December 2023 Clinical Governance/Quality Operational Group being discussed as part of the CG Governance and implementation which will support</p>

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						cross organisational learning and improvement.
AP 6.7	Key lines of enquiry (KLOEs) from Welsh Government to support Quality Standards reporting		Obtain key lines of enquiry from Welsh Government, implement once published, and complete self assessment.	Executive Director of Quality and Nursing and Allied Health Professionals	Sept 23	<p>October 2023: Awaiting further guidance from WG group</p> <p>December 2023 Key questions being developed by the CG steering group as no further guidance from NHS Executive at present.</p>
			Identify improvement plan following self-assessment for 2024/25.	Executive Director of Quality and Nursing and Allied Health Professionals	March 24	<p>August 2023 Pending the actions above. Ongoing work within current quality domains as part of current governance arrangements</p> <p>October 2023 Awaiting KLOEs document to complete self-assessment</p> <p>December 2023 No further self-assessment guidance received and no further updates as to if this will be supplied. Internal Key line of enquiry being developed to support the quality standards self-assessment for 24/25.</p>
			Complete first Annual Quality Report	Executive Director of Quality and Nursing and Allied Health Professionals	March 24	<p>October 2023 Guidance expected for WG on Quality Report Structure</p> <p>December 2023 Draft Template expected form Improvement Cymru on behalf of the NHS Executive in January 2024.</p>

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AP 6.8	Ensure consistent and effective operational systems and processes relating to delivery of excellent public health services	MB	Develop a programmed approach to the assurance of excellent operations across the HPSS directorate. This aspires to be a beacon of efficiency, effectiveness, and innovation, setting the benchmark for excellence in public health operations. The programme will be based on a programme of operational audit and review against existing and developed benchmarked standards. Taking an "excellent operations" approach, work to ensure optimal use of resource to support the delivery of excellent services to the population of Wales.	National Director of Health Protection and Screening Services	March 2024	<p>December 2023 update: new action reflected here. This programme is in its formative stages with an initial test area of focus being the approach to procurement across HPSS.</p> <p>The review phase of this area has concluded and presented to QSIC. Numerous recommendations are in the process of being implemented.</p>
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