 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p> Name of Meeting Board </p> <p> Date of Meeting 28 March 2024 </p> <p> Agenda item: 4.3 </p>
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Public Health Wales Strategic Risk Register	
National Director of Health and Well-being	SR 1
	SR 2
National Director Policy and International Health	SR 3
Director of People and Organisational Development	SR 4
National Director Health Protection and Screening Services	SR 5 SR 6
Deputy Chief Executive and Exec Director of Operations and Finance	SR 7(Private Session)
Purpose	
Receive the Strategic Risk Register for the purpose of scrutiny and challenge	

Recommendation:				
APPROVE <input checked="" type="checkbox"/>	CONSIDER <input checked="" type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
The Board is asked to: <ul style="list-style-type: none"> Consider and approve the change requests to the Strategic Risks. 				
Link to Public Health Wales Strategic Plan				
Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.				
This report contributes to the following:				
Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives			

Summary impact analysis	
Equality and Health Impact Assessment	No decision is required.
Risk and Assurance	This submission is the Strategic Risk Register.



Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Governance, Leadership and Accountability
Financial implications	The financial implications of failing to manage risk effectively are significant, both in terms of the potential for loss and also the failure to capitalise on opportunities.
People implications	There is a both a Corporate and Strategic Risk relating to the workforce.

1. Purpose / situation

This paper summarises the organisational Strategic Risk Register, highlighting any areas of concern that may require further discussion. This paper must be read in conjunction with the Strategic Risk Register (Appendix 1).

The Strategic Risk Register (SRR) is the mechanism through which the Board demonstrates that it has a clear understanding of the strategic risks facing the organisation in the delivery of its strategic objectives. Together with an understanding of the likelihood and the impacts if the risks are realised. In addition, it provides assurance that any necessary actions required to mitigate those risks have been identified and are being managed. A narrative Delivery Confidence Assessment is allocated to each risk, along with an overview assessment from the risk owner which provides a progress narrative update for each iteration of the strategic risk register.

The Strategic Risk Register details the seven current Strategic Risks that were approved by the Board in March 2023. These are the most significant risks that could prevent the organisation from delivering on its strategic priorities. The Board last received the Strategic Risk Register for assurance in January 2024.

Building on the development work that took place at the Executive Team IMTP workshop session on 15th February 2024, this paper presents a refocused organisational Strategic Risk Register for the Board to consider approve and endorse.

The next iteration of this report at the Board in May 2024 will encompass trend analysis and further recommendations to refine the strategic risks to include the amalgamation of Strategic Risks 5 and 6, and updated delivery assessments. We also anticipate further high-level analysis of strategic and corporate risks against approved risk appetite levels to discuss if risks are being managed outside of agreed thresholds.

It is important to note that risk reporting continues to be an iterative process going forward, particularly as the organisation develops both its reporting and measurement, but also as it matures its conversations around risk, mitigation, and impact of actions.





We will continue to work through the Risk Management Development Plan to achieve consensus regarding the reporting metrics, and presentation and challenge of reporting. Board members are encouraged to provide feedback and comment on any areas they think would be beneficial and provide further clarity in relation to how strategic risks are being managed.

2. Delivery Confidence Assessment

All strategic risks carry a delivery confidence assessment assigned by the Executive Sponsor. This was previously assessed in a subjective way, allocating a RAG status.

After feedback from Board members, this has now been incorporated into a broader Risk Owner's Delivery Confidence assessment, which is a more detailed narrative assessment update.

A high-level update of all Strategic Risks with current trajectories is depicted below:

Risk Reference	Executive Sponsor	Inherent Score ¹	Current Score ²	Trend Status	Progress
SRR1	Jim Mcmanus	25	20		A substantial number of programmes are underway on this programme of work. A key starting point will be a clear, shared and owned assessment of what the organisation's role in reducing health inequalities is, and how we work with other systems. The current IMTP refresh is an opportunity to conduct that assessment in part.
SRR2	Jim Mcmanus	16	16		Work is underway to develop a Memorandum of Understanding with Welsh Government, Public Health Wales, Health Boards and Local Authorities to agree the principles and mechanisms of effective systems and an agreed system population health work plan however, there is not yet sufficient strategic agreement to align collective efforts between the third sector and Public Health Wales. Discussion has commenced with WCVA which needs to translate into a meaningful collaboration with an underpinning MOU to reflect the intention of better alignment and partnership working.
SRR3	Sumina Azam	20	16		<p>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.</p> <p>Following the Board meeting in January 2024, the risk score has been reviewed and calibrated with other strategic risks. The risk descriptor has also changed, and actions will need to be reviewed for 2024-25 to reflect this.</p> <p>Whilst existing controls are progressing and further actions are being taken to enable PHW to better engage with our population, the scale of change required is significant.</p>
SRR4	Neil Lewis	25	16		<p>The organisation is implementing QOS incorporating governance system mapping and controls and has actions in place to mitigate the risk and close the gaps in assurance.</p> <p>POD have clear actions in the 2023-2024 IMTP which relate directly to this</p>

¹ This score represents the **severity of risks** before you implement controls to reduce or mitigate the risk

² This score represents the **severity of risks** after controls to mitigate the risk have been applied.



					<p>risk, i.e. work to understand current vs desired culture and close the gap between the two, embed our behavioural framework, 'Being Our Best', and increase employee engagement. Workforce planning is also part of the IMTP deliverables and a critical component in addressing this risk. IMTP actions have been developed which will take this work forward in 2024-25. Collaborative working between Planning, POD and Communication functions are contributing to improved methods to launch, land and embed related products/messaging. A Leadership Forum has been established and met for the first time in January 2024.</p>
SRR5	Meng Khaw	12	12	↔	<p>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. Finally, PHW are contributing to the development of a health protection framework that defines the agreed roles and responsibilities of the health protection system in Wales.</p>
SRR6	Meng Khaw	9	9	↔	<p>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. 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.</p>

The trend status indicates if the risk has remained stagnant at the inherent risk score and **Red**, **Amber**, **Green** demonstrates where improvements are in place and progressing well or complete, actions in place and being progressed currently or actions and controls have been identified but there has been limited progress in implementation.

3. Risk Appetite, Descriptors and links to Strategic Priorities

The Strategic Themes have been assessed with a risk appetite being approved for each. All strategic and corporate risks have been assessed against the risk appetite. The table below demonstrates the risk appetite by strategic theme. These have not been changed since the previous Board approval although they were revisited as part of the development of the IMTP 2024/27.

Strategic Theme		Appetite Descriptor
1	Influencing the wider determinants of health	Keen
2	Promoting Mental and Social Wellbeing	Willing
3	Promoting Healthy Behaviours	Willing
4	Supporting the development of a sustainable health and care system focused on prevention and early intervention	Willing
5	Delivering excellent public health services to protect the public and maximise population health outcomes	Accepting
6	Tackling the public health effects of climate change	Keen

4. Risk Tolerance Decision

For each Strategic Risk a decision has been taken for how the organisation will respond to the risk. The four tolerance categories of risk management are shown below. This update does not recommend any changes to tolerance of our existing Strategic Risks at this review.

Risk Tolerance Decision	Descriptor
Terminate	Risk is unacceptable and decision taken to not proceed with whatever it is that may lead to the risk.
Treat	Risk is greater than wanted, and actions can be taken to reduce it. A decision to treat a risk, must always be accompanied by an action plan.
Tolerate	Risk has been managed down to an acceptable level and can be accepted with whatever controls are in place. This may be because it is either impractical or too expensive to do anything further about it. Would be accompanied by a contingency plan.
Transfer	The most common form of risk transfer is insurance. For example, a fire risk may be managed down as far as possible and then the financial risk is transferred out to an insurance company. It is important to remember however that reputational risks can never be transferred; they will always remain with the organisation. It is unlikely that the organisation will have risks which can be transferred.

5. Strategic Risks

Seven strategic risks are listed below, with an executive overview of each risk. A full assessment is provided in the attached Strategic Risk Register. The full register can be viewed at **Appendix 1**.

Risk 1	<p>Risk of: Widening gap in healthy life expectancy of population of Wales Due to: Cumulative effects of socio-economic, environmental and wider public health challenges</p> <p>Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 1) Influencing the wider determinants of health [Keen] 3) Promoting Healthy Behaviours [Willing] 5) Delivering excellent public health services to protect the public and maximise population health outcomes. [Accepting]</p>				
Risk Owner's Delivery Confidence assessment	<p>Prior to the pandemic the gap in healthy life expectancy between the most and least deprived populations of Wales was widening. The consequences of the pandemic in terms of access to preventative and healthcare services and the impact on mental and emotional well-being is likely to have exacerbated this. Together with the health impacts of the ongoing Cost of Living Crisis there is a high risk that the health of the population will worsen, particularly for vulnerable populations. This is likely to increase the gap in healthy life expectancy among our vulnerable, more deprived populations compared to more affluent populations in Wales.</p> <p>This will need long and short-term actions, as well as cross-organisational and cross system actions to achieve change.</p> <p>A substantial number of programmes are underway on this programme of work, but an overarching assessment of where we are on healthy life expectancy is needed. A key starting point will be a clear, shared and owned assessment of what the organisation's role in reducing health inequalities is, and how we work with other systems. The current IMTP refresh is an opportunity to conduct that assessment in part.</p>				
Exec Sponsor	Jim McManus, National Directorate of Health and Well-Being	Exec Contributors	Sumina Azam, Director of Policy and International Health / WHOCC Meng Khaw, National Director Health Protection and Screening Services Huw George, Deputy Chief Executive and Exec Director of Operations and Finance		
Assurance Group	Knowledge Research and Information Committee (remitted from QSIC Dec 2023)				
Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk	Because of the time taken to shift healthy life expectancy, the timescale is the same as the long-
Inherent	5	5	25		

Current	4	5	20	score (likelihood and/or impact)	term strategy timescale – 10 yrs with dependencies on government action
Target	3	3	9	Risk Decision	Treat
Key changes from last report	<ol style="list-style-type: none"> 1. The Health Foundation has provided funding for the Shaping Places approach which will enable Public Service Boards to address health inequalities through addressing the wider determinants of health 2. Work is underway on a cross-organisational approach to inclusion health. 3. The Prevalence of Disease programme has resulted in the development of the Diabetes Programme which will address some of the common risk factors for a difference in life expectancy 4. Strategic Priority 4 on the development of a sustainable health and care system is being refreshed with an emphasis on prevention-based health and care 5. Initial discussions have taken place on refreshing our organisational approach to health inequalities and being clear what our role is in short, medium and long-term action needed to improve healthy life expectancy 				
Link to Strategic Priorities and relevant strategic programmes	<p>SP 2 Promoting mental and social well-being SP 4 Supporting the development of a sustainable health and care system focused on prevention and early intervention</p> <p>The Diabetes programme is also important.</p>				
Corporate Risks relating to this Strategic Risk	<p>There is a risk that the organisation may not have the capacity or resources necessary to effectively deliver the long-term strategic plan. This risk arises from a challenging political and financial landscape, which includes staff time being redirected to contribute to the (Covid) public enquiry and an unstable industrial relations climate. Resulting in the inability to deliver the long term strategy due to absence of strategic workforce planning.</p> <p>There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020).</p>				

Risk 2	<p>Risk of: Worsening health outcomes for the population of Wales Due to: misaligned system-wide efforts and leadership and weaknesses in partnership working</p> <p>Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 1)Influencing the wider determinants of health [keen] 2)Promoting Mental and Social Well-being [willing] 3)Promoting Healthy Behaviours [willing] 4)Supporting the development of a sustainable health and care system focused on prevention and early intervention [Willing]</p>				
Risk Owner's Delivery Confidence assessment	<p>There is a risk that the specialist public health system in Wales will fragment further following the transfer of the Local Public Health Teams to the Health Boards. Work is underway to develop a Memorandum of Understanding with Welsh Government, Public Health Wales, Health Boards and Local Authorities to agree the principles and mechanisms of effective systems and an agreed system population health work plan.</p> <p>There is not yet sufficient strategic agreement to align collective efforts between the third sector and Public Health Wales. Discussion has commenced with WCVA which needs to translate into a meaningful collaboration with an underpinning MOU to reflect the intention of better alignment and partnership working.</p> <p>This risk needs a clear cross-organisational approach as well as engagement with key system players.</p>				
Exec Sponsor	Jim McManus, National Directorate of Health and Well-Being	Exec Contributors	Sumina Azam, National Director Policy and International Health Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals Huw George, Deputy Chief Executive and Executive Director of Operations and Finance John Boulton, Director for NHS Quality Improvement and Patient Safety		
Assurance Group	Knowledge Research and Information Committee (remitted from QSIC Dec 2023)				
Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk	This risk score has not changed and will need some concerted action before it can be lowered. It is
Inherent	4	4	16		

Current	4	4	16	score (likelihood and/or impact)	anticipated this will take at least twelve months from January 2024.
Target	3	2	6	Risk Decision	Treat
Key changes from last report	<ol style="list-style-type: none"> 1. Initial discussions on a cross-organisational group, working with system leaders, to address this risk, have taken place 2. Initial discussions have taken place with Directors of Public Health on a systems approach and these discussions continue 3. Work continues on establishing the cross system diabetes programme board with specific roles for Directors of Public Health 4. Health Foundation Funding has been received for the Shaping Places programme, and every Director of Public Health has signed up to work on this. Building system leadership through this will be important. 				
Link to Strategic Priorities and relevant strategic programmes	<p>SP 1 Influencing the wider determinants of health SP 2 Promoting mental and social well-being SP 3 Promoting healthy behaviours (systems leadership) SP 4 Supporting the development of a sustainable health and care system focused on prevention and early intervention</p> <p>In addition there are links to</p> <ul style="list-style-type: none"> • Influencing wider determinants of health – the context of people’s lives (their community, work, experiences of deprivation, the homes they live in) affects their ability to engage in health promoting behaviours. • Promoting healthy behaviours • Promoting mental and social wellbeing • Supporting a sustainable health and care system – the health and care system cannot be sustainable unless there is population-wide engagement in health. • The Diabetes programme includes engaging with key system players so we build an effective and cohesive cross organisational system 				

Corporate Risks relating to this Strategic Risk

There is a risk that the organisation may not have the capacity or resources necessary to effectively deliver the long-term strategic plan. This risk arises from a challenging political and financial landscape, which includes staff time being redirected to contribute to the (Covid) public enquiry and an unstable industrial relations climate. Resulting in the inability to deliver the long term strategy due to absence of strategic workforce planning.

There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020).

Risk 3	<p>Risk of: The organisation failing to effectively engage with the public in relation to their health and wellbeing. Due to: Failure to build relationships with stakeholders, communities and our service users; not having or utilising tools and resources to support engagement; a lack of workforce commitment, skills and capacity; and failure to monitor and evaluate the impact of engagement.</p> <p>Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level:</p> <ol style="list-style-type: none"> 1) Influencing the wider determinants of health (Keen) 2) Promoting mental and social well-being (Willing) 3) Promoting healthy behaviours (Willing) 4) Supporting the development of a sustainable health and care system focused on prevention and early intervention (willing) 5) Delivering excellent public health services to protect the public and maximise population health outcomes (accepting) 		
Risk Owner's Delivery Confidence assessment	<p>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.</p> <p>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.</p> <p>Following the Board meeting in January 2024, the risk score has been reviewed and calibrated with other strategic risks. The risk descriptor has also changed, and actions will need to be reviewed for 2024-25 to reflect this.</p> <p>Whilst existing controls are progressing and further actions are being taken to enable PHW to better engage with our population, the scale of change required is significant.</p> <p>Strategic opportunities to strengthen our response include ensuring this risk informs our IMTP planning for 2024-27; the refresh of 'Our Approach to Engagement'; and our organisational approach to strategic partnerships (discussed at Board on 29/2/24).</p>		
Exec Sponsor	Sumina Azam, National Director Policy and International Health	Exec Contributors	Iain Bell, Director of Knowledge and Research Meng Khaw, National Director of Health Protection and Screening Services Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals Huw George, Deputy Chief Executive and Executive Director of Operations and Finance
Assurance Group	Quality, Safety and Improvement Committee		

Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk score (likelihood and/or impact)	Further work is underway to refine the risk descriptor to clarify and articulate the role of Public Health Wales and the mitigating actions required.
Inherent	5	4	20		
Current	4	4	16		
Target	2	3	6	Risk Decision	Treat
Key changes from last report	<p>Actions are being progressed to mitigate this risk. Specific areas for note:</p> <ul style="list-style-type: none"> • A number of actions are being considered in the IMTP 2024-27, which provide opportunity to accelerate progress. • <i>Our Approach to Engagement</i> is due to be refreshed and there have been discussions with the Executive Team in Q4. • Progress is being made on our organisational approach to Strategic Partnerships; this was discussed with Board in February 2024. 				
Link to Strategic Priorities and relevant strategic programmes	<ul style="list-style-type: none"> • Influencing wider determinants of health – the context of people’s lives (their community, work, experiences of deprivation, the homes they live in) affects their ability to engage in health promoting behaviours. • Promoting healthy behaviours • Promoting mental and social wellbeing • Delivering excellent public health services – actions people can take to support their health includes taking up the offer of vaccination and screening. • Supporting a sustainable health and care system – the health and care system cannot be sustainable unless there is population-wide engagement in health. • Tackling the public health effects of climate change – actions to improve health will also benefit the climate <p>The Diabetes programme includes engaging with our population so that they adopt behaviours to prevent diabetes or prevent its complications</p>				
Corporate Risks relating to this Strategic Risk	<p>There is a risk that the organisation may not have the capacity or resources necessary to effectively deliver the long-term strategic plan. This risk arises from a challenging political and financial landscape, which</p>				

includes staff time being redirected to contribute to the (Covid) public enquiry and an unstable industrial relations climate. Resulting in the inability to deliver the long term strategy due to absence of strategic workforce planning.

There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020).

Risk 4	<p>Risk of: Worsening organisational health leading to an inability to recruit and retain high calibre staff, performance manage accountable officers in pursuit of strategic priorities, low staff morale and wellbeing.</p> <p>Due to: Lack of effective organisational leadership and governance, progress towards ideal culture, ability to engage employees.</p> <p>Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level: 3) Promoting healthy behaviours [willing]</p>				
Risk Owner's Delivery Confidence assessment	<p>The organisation is implementing QOS incorporating governance system mapping and controls and has actions in place to mitigate the risk and close the gaps in assurance.</p> <p>POD have clear actions in the 2023-2024 IMTP which relate directly to this risk, i.e. work to understand current v desired culture and close the gap between the two, embed our behavioural framework, 'Being Our Best', and increase employee engagement. Workforce planning is also part of the IMTP deliverables and a critical component in addressing this risk. IMTP actions have been developed which will take this work forward in 2024-25.</p> <p>Collaborative working between Planning, POD and Communication functions are contributing to improved methods to launch, land and embed related products/messaging. A Leadership Forum has been established and met for the first time in January 2024. Meetings will be held quarterly in future. A quarterly update on Organisation and People Development and Engagement has been scheduled at Leadership Team.</p> <p>Two cohorts have now completed the a (pilot) Leadership and Management Development Academy and Leading with Impact workshops are taking place, which together with other actions outlined in this plan, will support improved leadership, management and engagement.</p> <p>Our Board and Committees are constituted in accordance with our Standing Orders and Scheme of Delegations. The functions of the Board are delivered in line with the Board Etiquette Protocol with external assurance from Audit Wales on performance. There is a robust and dynamic wellbeing provision in place designed to respond to the needs of all staff including those impacted by the Covid-19 Public Inquiry.</p>				
Exec Sponsor	Neil Lewis, Director of People and OD	Exec Contributors		Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals Huw George, Deputy Chief Executive and Exec Dir of Ops & Finance John Boulton, Director for NHS Quality Improvement and Patient Safety Paul Vasey, Board Secretary and Head of Board Business Unit	
Assurance Group	People and Organisational Development Committee				
Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk	Our work in relation to culture, ways of working and leadership will take time to embed, the specific element of the Covid-19

Inherent	5	5	25	score (likelihood and/or impact)	Public Inquiry element will be removed from the risk descriptor shortly, however, we are not expecting any significant movement in this risk score in the short term.
Current	4	4	16		
Target	3	2	6	Risk Decision	Treat
Key changes from last report	<p>No change to the risk score.</p> <p>Workforce Planning Manager commenced in post January 2024, the establishment of the Leadership Forum and the work of the People and OD Committee have been referenced. Risk scores will be reviewed in conjunction with our IMTP refresh.</p> <p>Request to amend due date of AP 4.1 to March 2024.</p> <p>Request to move 2nd action associated with AP4.5, due to successive delays to the receipt of the 2023 staff survey data which is a key input.</p>				
Link to Strategic Priorities and relevant strategic programmes	<p>Long Term Strategy</p> <p>People Strategy</p> <p>Strategic Equality Plan</p> <p>Organisational Culture</p> <p>Organisational Change</p>				
Corporate Risks relating to this Strategic Risk	<p>There is a risk that the organisation may not have the capacity or resources necessary to effectively deliver the long-term strategic plan. This risk arises from a challenging political and financial landscape, which includes staff time being redirected to contribute to the (Covid) public enquiry and an unstable industrial relations climate. Resulting in the inability to deliver the long term strategy due to absence of strategic workforce planning.</p> <p>There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020).</p> <p>There is a safeguarding risk that organizational DBS checks do not prevent unsuitable people from working with vulnerable groups, including children, therefore placing them at risk of harm, abuse and neglect.</p>				

Risk 5	<p>Risk of: A sub-optimal organisational response to a public health emergency or incident and longer-term risks to public health Due to: insufficient horizon scanning, forecasting, use of data/digital tools and planning/training/exercising for response Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level:</p> <p>4) Supporting the development of a sustainable health and care system focused on prevention and early intervention (willing) 5) Delivering excellent public health services to protect the public and maximise population health outcomes (accepting)</p>		
Risk Owner's Delivery Confidence assessment	<p>Update 010324 The current risk score is at the inherent risk level.</p> <p>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.</p> <p>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 Control Plan and in PHW, the approval of the PHW Emergency Response Plan. An exercise is planned for the Communicable disease outbreak control plan with participation from key stakeholders across Wales. And in PHW, a well-attended exercise took place to test arrangements in the revised Emergency Response Plan. These, combined 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.</p> <p>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.</p> <p>Finally, PHW are contributing to the development of a health protection framework that defines the agreed roles and responsibilities of the health protection system in Wales.</p>		
Exec Sponsor	Meng Khaw, National Director of Health Protection and Screening Services	Exec Contributors	Sumina Azam, Director of Policy and International Health / WHOCC

Assurance Group	Quality, Safety and Improvement Committee				
Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk score (likelihood and/or impact)	No update required 010324 Although the current risk score remains unchanged, progress continues as planned to mitigate the likelihood and impact of this strategic risk. Additional sources of assurance have been identified against control 5.4. There is progress made on clarifying roles and responsibilities for key actors in the health protection system and over the coming months there will be opportunities for exercising the new arrangements and response plans, as well as learning from the COVID response. The impact score is expected to reduce by Q2 of 2024/25.
Inherent	3	4	12		
Current	3	4	12		
Target	3	2	6	Risk Decision	Treat
Key changes from last report	<p>No update required 010324</p> <p>Additional sources of assurance and activity relating to EPRR lessons identified from major incidents and specifically from C19 detailed in the Strategic Risk Register</p> <p>Additions made to Control 5.4.</p> <p>An additional control 5.7 relating to operational financial planning added.</p> <p>Additional actions included relating to ensuring lessons are identified and shared from incidents and outbreaks.</p> <p>New actions added to AP 5.6.</p> <p>New action 5.9 added to mitigate gaps in control 5.7 – operational financial planning.</p> <p>Elements of the actions have requests for due date changes (AP 5.4, 5.6)</p> <p>Elements of actions have request to complete (AP5.1, AP5.3, 5.4)</p>				
Link to Strategic Priorities and relevant strategic programmes	<p>None required 010324</p> <p>SP3</p> <p>SP4</p>				

Corporate Risks relating to this Strategic Risk

Updated 010324

There is a risk arising from an ISSUE that changes to alerting processes will mean that PHW stop receiving alerts for emergencies and major incidents (E or MI). **Implementation has begun to establish a robust internal mechanism to receive major incident notifications and when established, this will no longer be an issue.**

Risk 6	<p>Risk of: Failure to deliver excellent public health services on screening, infection and health protection and compliance with the Duty of Quality</p> <p>Due to: Weakness in systems and processes, specialist workforce capacity and capabilities, and lack of innovation.</p> <p>Key Strategic Objectives contributing to mitigating the risk and agreed risk appetite level:</p> <p>4) Supporting the development of a sustainable health and care system focused on prevention and early intervention (willing)</p> <p>5) Delivering excellent public health services to protect the public and maximise population health outcomes (accepting)</p>		
Risk Owner's Delivery Confidence assessment	<p>Updated 010324</p> <p>The current risk score is at the inherent risk level.</p> <p>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.</p> <p>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.</p> <p>The number of ongoing health protection threats remain stable, enabling health protection services to return to focus on proactive work, such as for Blood-borne viruses, sexually transmitted infections and Tuberculosis.</p> <p>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.</p> <p>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.</p> <p>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.</p>		
Exec Sponsor	Meng Khaw, National Director of Health Protection and Screening Services	Exec Contributors	Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals

Assurance Group	Quality, Safety and Improvement Committee				
Risk Score	Likelihood	Impact	Total risk score	Expected timescale for movement in risk score (likelihood and/or impact)	During the first six months of 2024/25, there will be more clarity around the implementation of diabetic eye transformation and progress with Breast Test Wales. Also, further stabilisation of the workforce in Infection division will help with service delivery for microbiology labs. Impact reduced by workforce planning and development.
Inherent	3	3	9		
Current	3	3	9		
Target	3	2	6	Risk Decision	Treat
Key changes from last report	<p>Updated 010324 Following confirmation of funding to sustain our response to COVID and other emerging health protection threats, PHW is able to continue to provide COVID testing, including sentinel surveillance, genomic sequencing and support vaccination and immunisation programmes.</p> <p>Funding has been confirmed for replacement cameras for the diabetic eye screening programme so this is no longer a risk.</p> <p>Discussions with Health Boards have helped to unblock the screening pathway in the South East region and the recovery position for breast test Wales continues to improve.</p>				
Link to Strategic Priorities and relevant strategic programmes	<p>No update required</p> <p>SP 4</p> <p>SP 5</p>				
Corporate Risks relating to this Strategic Risk	<p>The corporate risk in relation to compliance and evidence of the Duty of Quality and associated standards remains extant since the last reporting period.</p>				

6. Risk ownership and accountability

Each Strategic Risk has an Accountable Executive Sponsor, with nominated Executive Contributors. Each Lead Executive / Risk sponsor is responsible for the implementation of the mitigation actions outlined for their risk, within their relevant Executive portfolio. They are responsible for obtaining regular updates from the Risk Contributors identified within the risks for which they are risk sponsor. Risk Sponsors will ensure that the Strategic Risk Register is updated at least every two months, in line with the bi-monthly rhythm of Board meetings.

The Business Executive Team recently discussed and agree the need for the construct of infrastructure across the Executive Team to ensure there is relevant ownership and input in from all Risk Contributors for each risk. The Head of Risk will become the conduit for sharing of information between Executive Directors and support the interdependencies of mitigation and progress updates between Strategic risks and the interface with the Corporate Risk Register (where appropriate). This will be facilitated regularly with Executive Directors when risks are updated on a monthly basis, as is current custom and practice. Business Executive Team will also consider Strategic risk on a quarterly basis as a dedicated agenda item to further underpin this cross-organisational approach.

7. Changes Since Last Reporting Period

Since the January 2024 Board meeting, development in relation to risk descriptors on the Strategic Risk Register has been taken forward at pace. This was predicated on revision of the organisational IMTP, feedback received from members of the Board and Executive Team and discussions with colleagues from Grant Thornton. Based on evidence based best practice, it was proposed to the Executive Team on 15th February 2024 that the Strategic Risks be re-focussed to demonstrate further alignment with the strategic objectives outlined within the IMTP submission (2024-2027) and to narrow the risk descriptor to accurately reflect the risk through a Public Health Wales perspective.

Significant work has taken place with consultants from Grant Thornton in respect of an organisational risk appetite framework; the framework proposes that risk appetite is applied to categories or areas of risk rather than strategic objectives. This change will allow for risk appetite to be applied to all levels of risk throughout the organisation and therefore will enable the Executive Team and the Board to scrutinise themes and trends derived from information captured on Datix, the organisational risk management tool. In turn, this will be used to inform aspects of the Board Assurance Framework (BAF) and ensure that Board and Committee business can be risk based, focussing of areas that represent the most significant risk to Public Health Wales delivery.



8. Well Being of Future Generations Act

No decision required.

9. Recommendation

The Board is asked to:

- **Consider** and **approve** the change requests to the Strategic Risks.
- **Note** and **endorse** the approach outlined in respect of the developing risk appetite framework and revised approach to the report which will be taken to the Board and Committees.