

Appendix D – Outstanding Strategic Risk Actions

Action outstanding	Owner	A - Action is subsumed into a new action on the new ISRR B - Action has been transferred to another location (e.g. Directorate SMT). C - Action completed D - Action no longer relevant
Strategic Risk 1		
There is a risk that Public Health Wales will be unable to fulfil its strategic objectives because it does not have the correct numbers of people with the right skills, attitudes and behaviour (<i>Director of People and Organisational Development</i>)		
1	Consultation with key stakeholders. People Strategy linked to IMTP.	NL A – any refresh/review of People Strategy aligned to corporate strategy should remain at SRR level
1	Deliverables incorporated into People and OD departmental plan and linked to team objectives	NL A
1	New People and OD team structure to be developed in consultation with the organisation to ensure alignment with people strategy	NL B
1	Consultation with key stakeholders and workforce planning sessions facilitated.	NL B
1	Workforce plans returned to People and OD to review Trends and themes identified.	NL B
1	Draft to be quality assured by Skills for Health to ensure a coherent narrative.	NL C
1	Draft to be submitted to Execs on 27 November.	NL C
1	Establish a regular process going forward into 2021/22	NL B
1	In the process of finding a date for these wider/ moderation discussions.	NL B
1	Finalised talent and succession map to be completed.	NL A - Paper originally to BET 20/09, now moved to 05/10
1	Continue work as part of business process improvement activity in this area.	NL B
1	Development of a structured approach to funding learning and development -	NL B
1	Pilot management induction following consultation with key stakeholders	NL C - done
1	Undertake Quality audits (planned)	NL B – relates to MYC, needs to be corporate risk level
1	Draft approach to be developed making links to Well-being of Future Generations Act by improving social, economic, environmental and cultural wellbeing	NL A
1	Joined up approach to collaboration with schools, colleges and universities;	NL A - Work in progress

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1 Please refer to the relevant (old) strategic risk for further detail if required.		
1 Young Ambassador Programme; Careers Networks; Work-placements scheme; Internships; Apprentices; Graduate Schemes	NL	A - Work in progress
1 Discussions to be taken forward by Deputy Director of People and OD with directorates	NL	B – this should sit with workforce planning/directorate plans
1 Determine appropriate way forward with collaborative partners with clear outcomes and evaluation	NL	B – this should sit with workforce planning/directorate plans
1 Deliver regular management induction sessions Evaluation	NL	D – done and not at this level
Strategic Risk 2		
There is a risk that Public Health Wales will cause significant harm to patients, service users or staff members. This will be caused by misdiagnosis or incorrect identification of serious health conditions, timeliness of service provision, the provision of inappropriate clinical advice or the failure of staff to follow correct procedures. (Executive Director Quality, Nursing and Allied Health Professionals)		
2 Develop a Quality assurance dashboard	RBW	B – Progressed into the development of the performance and assurance dashboard
2 Ensure the Quality Assurance Dashboard includes measures / indicators to include the IPC and safeguarding indicators	RBW	B - Progressed into the development of the performance and assurance dashboard
2 Develop an Integrated Governance Model	RBW	C
2 Implement Integrated Governance Model	RBW	A
2 Develop and approve Quality and Improvement Strategy	RBW	C
2 QNHAPS working in conjunction with planning team, to develop quality indicators with the Stage 2 workstreams in order to be able to measure and monitor outcomes and improvements.	RBW	B - Progressed into the development of the performance and assurance dashboard
2 Support ownership in Directorates and Divisions in identifying improvements and enacting action plans	RBW	B – Included in the approach to Health and Care standards
2 Develop Quality Management Dashboard to include assurance for IPC and Safeguarding to provide regular reporting to QSIC	RBW	D - Duplicate

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2	Further develop Quality and Clinical Audit Plan to ensure alignment with adherence to SOPs and improvement activity for next audit planning cycle	RBW	A – Subsumed into implementation of the integrated governance model
2	Implement an organisational approach to disseminating and raising awareness of the 'Raising Concerns' (whistleblowing) policy	HB	B – Transferred to Team Register
2	Strengthen organisational governance of medical devices (including registers)	RBW	C – Medical registers now transferred to MK
2	Review the Medical Devices Policy and Procedure (due to Medical Devices and IVD Regulations)	RBW	B – Transferred to MK
2	Scope non-clinical areas to ensure that no devices remain unaccounted for in the governance arrangements	RBW	B – Transferred to MK
2	Development of existing procedure to ensure a consistent approach to policy development, approval and communication that is timely and effective.	RBW	To be confirmed
2	Develop a comprehensive overview that collates and summarises all audit activity planned for April 2021 onwards – repeat on an annual basis	RBW	C
2	Conduct Audit of what Standard Operating Procedures (SOPs) processes are in place in each directorate that meets a required standard.	RBW	B – Transferred to the Quality and Clinical Audit Plan
2	Test compliance and adherence with SOPs	RBW	A – Implementation of integrated governance model
2	Once for Wales Datix system to be implemented by March 2021	RBW	B – Transferred to QNAHPs directorate risk register
Strategic Risk 3			
<p>There is a risk that Public Health Wales will fail to deliver a sustainable, high quality and effective infection and screening services. This will be caused by a lack of sufficient workforce capacity; over-reliance on existing systems/procedures, lack of sufficient change capacity and an estate and infrastructure which is not fit for purpose. (Executive Director Public Health Services / Medical Director)</p>			
3	Delivery of Estates Action Plan and Health / Safety Action Plan	MK	A
3	Strengthen arrangements for approval of Business Continuity Plans and assurance reporting	MK	A
3	Public Health Services Directorate Governance Review: Action Plan	MK	A
3	Delivery of the National Health Protection Service Transformation Programme	MK	A

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5	Revised Terms of reference and work plan for CWW	SA	C
5	Successful recruitment to Programme Director Post	SA	C
5	Grants/contracts awarded	SA	D
5	Update MOUs with Health Boards	SA	B
5	Update honorary contracts with DPHS	SA	B
5	Utilise the WHO CC to act as a policy think tank for WG and other Public Health stakeholders. Deliver the work plan of the WHO CC.	SA	C
5	Continue the periodic meetings with Cabinet Secretaries, Ministers and their officials across Government as appropriate in order to inform them on the work of Public Health Wales and support the application of health in all polices in their respective areas.	SA	A
Strategic Risk 6			
There is a risk that Public Health Wales will fail to secure and align resources to deliver its statutory functions including its response to the COVID-19 pandemic. This will be caused by funding cuts or inability to make required savings, secure funding (replaced generate income) or move resources within the organisation (<i>Deputy Chief Executive / Director of Finance and Operations</i>)			
6	Finalise outcome measures for our strategic priorities and organisation	HG	A
6	Monitor savings from organisational efficiency work streams	HG	D
6	Review organisational plans to enable resources to be redirected as required	HG	C
6	Incorporate wider approach to value and impact into the organisations 12 month operating Plan	HG	C
6	Secure funding from WG for COVID costs	HG	C
6	Work up and submit BC's for new developments as a result of COVID (eg 24/7 working)	HG	C
Strategic Risk 7			
There is a risk that Public Health Wales will fail to deliver and effectively present accurate, relevant data/ statistics and/ or evidence based research/ evaluation to dynamically and actively inform and maximise the impact of public health action especially relating to our response to COVID-19. This will be caused by a lack of workforce capacity with the relevant skills and knowledge to rapidly respond to changing and increasing demands of COVID-19 and technological advances in data science; staff having an over-reliance on existing systems/procedures and a lack of sufficient change capacity. (<i>Transition Director – Knowledge</i>)			

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7	Undertake base line of current SOPs in place within the Knowledge Directorate	IB	D – Undertaking full review to modernise ways of working
7	Identify gaps in relation to SOPs	IB	D – Undertaking full review to modernise ways of working
7	Develop SOPs that are required and a consistent approach for approval/ logging	IB	D – Undertaking full review to modernise ways of working
7	Disseminate to all Knowledge Directorate staff	IB	D – Undertaking full review to modernise ways of working
7	Review SOPs annual (ensure process in place to undertake review and log review)	IB	D – Undertaking full review to modernise ways of working
7	Undertake an audit of a sample of Official Statistics produced, across the organization to confirm adherence to Official Statistics Processes	IB	A – Needs to be subsumed over to KD risks
7	Collate baseline information and present data quality management report to KRI Committee.	IB	D
7	Identify gaps in relation to SOPs across the organisation relation to Data Quality Management	IB	D
7	Work with the relevant Directorates to ensure required SOPs are developed and disseminated as appropriate	IB	D
7	Create central register of assurances from external data owners	IB	D
7	Skills requirement for Data Science Team determined	IB	D – IB review identifying this
7	Recruitment of data scientists with identified skills	IB	D – IB review identifying this
7	Data Science Strategy developed	IB	D – IB review identifying this
7	Capturing of minimal skills required at each level within the directorate for specialist roles (e.g. analysts and evidence reviewers)	IB	D – Irrelevant to new strategy
7	Implement recruitment plan identified by Workforce Work stream in Phase 2 Implementation Plan	IB	D – IB review identifying this
7	Identify a rolling programme of audit to be completed internally for the Knowledge Directorate. This will then inform the organisational Clinical and Quality Audit Plan	IB	A – Needs to be developed against new strategy once agreed by the board
Strategic Risk 8			

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<p>There is a risk that Public Health Wales will fail to effectively discharge its statutory responsibilities in protecting the public during the COVID-19 pandemic and ensure the organisation has an effective plan for recovery as the pandemic recedes (Chief Executive)</p>		
8	Regular review of Board and Committee arrangements – reinstating key governance arrangements proportionate to the demands of the response	MK D
8	Periodically review the Gold group terms of reference to ensure relevance to the changing environment.	MK D
8	Review the terms of reference and operating arrangements for the Incident Management Team	MK D
8	Incorporate key measures to monitor the effectiveness of our work across the workstreams in the Implementation Plan for Test Trace Protect	MK A
8	Develop and agree action plan to ensure PHE led activities that impact on Wales can continue to be delivered.	MK (TC) A
8	Undertake serial evaluation of the effectiveness of our communications	HG (TC) C
8	Source additional capacity to support the Communications Team including additional media management and strategic communications expertise	HG (TC) C
Strategic Risk 9		
<p>There is a risk that Public Health Wales will fail to sufficiently consider, exploit and adopt new and existing technologies. This will be caused by the inability to keep up to date with relevant new and emergent technologies, their potential application and having insufficient skills to develop the case for investment. (Director for NHS Quality Improvement and Patient Safety)</p>		
9	Ensure that key operational aspects of the work are evaluated through the pandemic and learning applied	IB (TC) B – Transferred to the work of the Knowledge directorate
9	Ensure that we use best available evidence to inform public health interventions through surveillance activity and international learning	IB (TC) B – Transferred to the work of the Knowledge directorate
9	Establishment of a New Technology and Innovation Advisory Forum to advise the Board	JB C
9	Development of a formal working relationship with the Life Sciences hub	JB C
9	Embedding a culture of innovation through a series of ‘firestarter events’ and dedicated presence at annual Public Health Conference	JB C
9	Creation of innovation fund to support internal innovation programme	JB D (with paper going to BET)
9	Develop dedicated internal communications plans to support innovation work	JB C

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9	National and International horizon scanning to be embedded into the strategic planning process	JB	C