

Strategic Risk Register

Risk 1	<p>There is a risk of worsening health in the population of Wales, particularly among vulnerable populations</p> <p><i>Caused by</i> the cumulative effects of current socio-economic, environmental and wider public health challenges and failure to influence the embedding of health in all policies <i>Resulting in</i> a widening gap in healthy life expectancy</p>
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Risk Owner's Overview Assessment Status	
<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 style="color: red;">This will need long and short term actions, as well as cross-organisational and cross system actions to achieve change. 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>	

Sponsor and Assurance Group	
Executive Sponsor	<p>Jim McManus, National Directorate of Health and Well-Being 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</p>
Assurance Group	Quality, Safety and Improvement Committee

Inherent Risk							
Date	11/05/23	Likelihood:	5	Impact:	5	Score:	25

Risk Score					Risk Decision	Delivery Confidence Assessment
Current Risk			Target Risk		Treat	AMBER
Likelihood	Impact		Likelihood	Impact		
4	5	20	3	3		

Strategic Risk Register

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 1.1	Providing leadership for health in all policies through maximising opportunities through Welsh legislation including Public Health Act (Health Impact Assessment), the Well-being of Future Generations Act and the Socio-economic Duty	Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 1.2	Implementing the WHO Collaborating Centre on Investment for Health and Wellbeing workplan, such as establishing a health equity solutions platform, to identify causes and solutions for tackling the health gap in Wales	Director of Policy and International Health	KRIC minutes Annual return to WHO of delivery of workplan Performance monitoring of IMTP delivery through Leadership Team	X	X	X	X	
SR 1.3	Identifying and translating international learning on tackling health inequity, for example through International Horizon Scanning and strengthened international partnerships with WHO, IANPHI, EuroHealthNet	Director of Policy and International Health, National Director of Health Protection and Screening Services	Board minutes KRIC minutes Performance monitoring of IMTP delivery through Leadership Team	X	X	X	X	X
SR 1.4	Influencing and informing policy to reduce health inequity through research and advocacy on the wider determinants of health such as fair work, housing, spatial planning	National Director of Health and Well-being, Director of Policy and International Health	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 1.5	Tackling the public health effects of climate change agreed as an organisational strategic priority	Deputy CEO/Director of Ops and Finance, National Director of Health Protection and Screening Services, Director of Policy and International Health	Climate Change Programme Board minutes		X	X		
SR 1.6	Systems leadership and partial delivery of improvement programmes for primary and secondary prevention	National Director of Health and Well-being	Performance monitoring of IMTP delivery through Leadership Team		X	X		

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National Director of Health Protection and Screening Services

Action plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 1.1	No agreed organisational narrative of tackling health inequalities	Workshop planned with Executive Team to explore organisational understanding and agree next steps	National Director of Health and Well-being/ National Director of Policy	March 2024	<p>October 2023 Steering Group met in September and monthly meetings established until March 2024. Secretariat established to move the work forward so the Steering Group can provide guidance and feedback.</p> <p>January 2023 We have been developing a shared understanding of what our approach and role is as an organisation on health inequalities through a collaborative approach. At the same time we have also been developing our narrative on what a public health approach is and how we make clear the timescales of action and outcome. We have a Board Development Session in Q4 and we will complete our draft narrative for review across the organisation by 31 March 2024.</p> <p>Linked to this our work on Strategic Priority 4 and our work on wider determinants is progressing in parallel so that these programmes inform each other.</p>
AP 1.2	A comprehensive three year IMTP with action based on proportionate universalism and targets, where appropriate	Organisational Inclusion Health Group to develop an action plan, informed by behavioural insights, to guide all programmes delivered by Public Health Wales	National Director of Screening and Health Protection Services and Medical Director	March 2024	<p>October 2023 Group still to be formally established. Meeting to be held on 13 Nov to discuss and a session with SBET session being scheduled to discuss way forward. Informal engagement on the Inclusion Health agenda has taken place cross</p>

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					<p>Directorate with some useful. Liaison and information sharing.</p> <p>January 2024 Resource has been identified in HPSS and HWB directorate to take forward a cross-organisational programme of work for inclusion health. However, development is at an early stage and objectives for 2024/25 and not likely to be defined for year 1 of the IMTP for 2024/25</p>
AP 1.3	A Framework for Healthcare Public Health to influence the NHS to shift systematically towards prevention and Early Intervention	Develop a framework to influence and facilitate the NHS to shift systematically towards prevention and early intervention	National Director of Health and Well-being	December 2023	<p>October 2023 This will be incorporated as part of the work on our Strategic Priority to support the development of a sustainable health and care system focused on prevention and early intervention. Further discussions to take place during Q3 to agree revised timescales. Revised implementation date to be agreed.</p> <p>January 2024 Work is progressing well on this. Short-term resource to enable development of the priority has been obtained but as yet longer-term resource is subject to budget and finance discussions when we know our allocations. A collaborative workshop was convened and this has produced an initial draft for the IMTP and milestones, and the initial work programme on this. In parallel, the developing national diabetes programme as one programme designed to deliver a shift to prevention has now established the priority workstreams and has achieved sign off from NHS Leadership Board.</p>

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AP 1.4	Systematic collection of equalities data across all protected characteristics for the NHS in Wales to enable monitoring of public health	Work with Welsh Government and DHCW to prioritise and implement better collection of equalities data	Director for Data, Knowledge and Research	April 2024	November 2023 Engagement with DHCW continues to establish what data on equalities is available for collection. December 2023 Engagement with DHCW continues but progress is taking longer than anticipated. Escalation in progress to reach a resolution.
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Risk 2 There is a risk of ineffective system-wide efforts to improve health and wellbeing by organisations across public, private and third sectors.
Caused by misaligned system-wide efforts and leadership, and weaknesses in partnership working.
Resulting in worsening health outcomes and suboptimal use of limited public resources.

Risk Owner's Overview Assessment Status

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.

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.

Cross reference with risk 6

Sponsor and Assurance Group

Executive Sponsor	Jim McManus, National Director of Health and Well-Being Contributors: 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	Quality, Safety and Improvement Committee

Inherent Risk

Date	11/05/23	Likelihood:	4	Impact:	4	Score:	16
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Risk Score					Risk Decision	Delivery Confidence Assessment	
Current Risk			Target Risk			Treat	AMBER
Likelihood	Impact		Likelihood	Impact			
4	4	16	3	2	6		

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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 2.1	CMO's Monthly meeting with the Public Health Leadership Group and Directors of Public Protection for Wales	National Director of Health and Well-being	Minutes presented in the Forum		X			
SR 2.2	Monthly meeting with the Public Health Leadership Group and bi-weekly informal Public Health Wales/DsPH group	National Director of Health and Well-being	Minutes of PHDLG		X			
SR 2.3	Whole system approach to healthy weight	National Director of Health and Well-being	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 2.4	System leadership working groups on priority topics and outcomes	National Director of Health and Well-being	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		
SR 2.5	Wider determinants of health and well-being unit leadership for improving systems working in Public Services Boards.	National Director of Health and Well-being	Performance monitoring of IMTP delivery through Leadership Team	X	X	X		

Strategic Risk Register

Action plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 2.1	Clear working arrangements with Public Health Wales, WCVA and other identified third sector organisations on shared objectives	Agree how PHW will work with WCVA and other identified third sector organisations to collaborate on shared public health objectives.	Exec Dir Quality, Nursing and Allied Health Professionals	March 2024	<p>November 2023: Awaiting revised meeting date from WCVA. Progression requires input from WCVA.</p> <p>December 2023 No further dates received following contact. To review the next steps in partnership with WCVA.</p> <p>Contact made with Llais and arrangements for future engagement with the Board Business Unit</p>
		Complete a base line assessment of which current third sector organisations are engaging regularly with Public Health Wales with a view to having a more joined up approach to third sector stakeholder engagement which is captured and can be evidenced to inform better planning and coordination.	Exec Dir Quality, Nursing and Allied Health Professionals	March 2024	<p>November 2023: Stakeholder mapping exercise completed which provides a baseline assessment and understanding of regular engagement with third sector organisations. Next step to pursue a more joined up approach is dependent on further engagement with WCVA as outlined in action above.</p> <p>December 2023: Digital User Experience Team are revising the approach using stakeholder interviews planned for January 2024.</p>

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AP 2.2	Agreed system wide approach to maximise the effectiveness of the specialist public health system following the TUPE transfer of LPHTs to Health Boards	Development, approval and implementation of MOU2 for the specialist Public Health System in Wales	National Director of Health and Well-being	March 2024	<p>October 2023- Paper to be taken to the next meeting of the DPH's to formally close down the process linked to the transfer and work towards agreeing a revised approach.</p> <p>January 2024 The discussion with DsPH has been held. An agreement to work together on shared system issues has been reached, which will be undertaken collaboratively with DsPH. The National Director is meeting every DPH individually to discuss ways of working together and we have agreed we will invest time together on shaping the elements of a new approach including shared values.</p>
AP 2.3	System leadership skills of the public health workforce and partnerships.	Training and support for systems leadership for the specialist PH system, PSBs, and Public Health Wales staff	National Director of Health and Well-being/Director of People and Organisational Development	June 2024	<p>October 2023 Linked to revised approach in update for AP 2.2. Gap analysis required to identify skills and training requirements.</p> <p>December 2023 On track. Linked to revised approach in update for AP 2.2. Gap analysis required to identify skills and training requirements.</p>

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AP 2.5	Strengthening systems leadership and engagement of Public Services Boards in the wider determinants of Health and Well-being	Health Foundation bid for 3 year support to strengthen the system with PSBs	National Director of Health and Wellbeing	March 2024	<p>October 2023- On track. Currently signing off contract for 3-year award and initiating set-up phase.</p> <p>January 2024 The Health Foundation funding has been awarded to Public Health Wales and the agreements signed. The programme has been initiated, every Director of Public Health and Public Services Board has agreed to participate.</p>
AP 2.6	See action plan for risk 6				

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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 4 There is a risk of weakness in our organisational health, including our culture, capacity, capabilities and governance. *Caused by* sub-optimal leadership, management and engagement and the impacts of the Covid-19 Public Inquiry. *Resulting in* low staff wellbeing and morale, failure to recruit and retain our staff and ineffective performance across one or more of our strategic priorities.

Risk Owner's Overview Assessment Status

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.

POD have clear actions in the IMTP which relate directly to this risk, i.e., Work to understand current v desired culture, launching and embedding our 'Being Our Best' framework and a road map to deliver the people promise. Workforce planning is also part of the IMTP deliverables and a critical component in addressing this risk.

Collaborative working between Planning, POD and Communication functions will contribute to improved methods to launch, land and embed related products/messaging. A (pilot) Leadership and Management Development Academy has also been launched, which together with the actions outlined in this plan, will support improved leadership, Management and engagement.

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.

Sponsor and Assurance Group

Executive Sponsor	Neil Lewis, Director of People and OD Contributors: John Boulton, Director for NHS Quality Improvement and Patient Safety Claire Birchall, Interim Exec Dir Quality, Nursing and Allied Health Professionals Huw George, Deputy Chief Executive and Exec Dir Ops and Finance Paul Veysey, Board Secretary and Head of Board Business Unit
Assurance Group	People and Organisational Development Committee

Inherent Risk

Date	16/5/23	Likelihood:	5	Impact:	5	Score:	25
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Risk Score			Risk Decision			Delivery Confidence Assessment
Current Risk		16	Target Risk		6	AMBER
Likelihood	Impact		Likelihood	Impact		
4	4	3	2			

Strategic Risk Register

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 4.1	Compliance with Information Governance policy and supporting procedures	Executive Director of Quality and Nursing	IG performance report			X		
			Information Governance toolkit			X		
			Information Governance Group assurance to Audit and Corporate Governance Committee			X		
			Information Asset Register			X		
SR 4.2	Compliance with Risk Management policy, procedure and other written control documents (protocol)	Executive Director of Quality and Nursing	Assurance reports on Strategic Risks					X
			Strategic Risk Register and Corporate Risk Register reports to Board				X	X
SR 4.3	Planned People and OD Committee Meetings to review progress v plan (including dashboard data on workforce trends) and consider emerging threats	Neil Lewis, Director of People & OD	PODCOM Minutes from meetings				X	
SR 4.4	Refreshed Long Term	Deputy Chief Executive and Exec Dir Ops and Finance	IMTP Reporting process			X		
SR 4.5	People Strategy and IMTP	Neil Lewis, Director of People & OD	Reporting against IMTP Milestones			X		
SR 4.6	Compliance with Standing Orders, Scheme of Delegation and Board Etiquette Protocol	Paul Veysey, Board Secretary and Head of the Board Business Unit	Internal Audit Audit Wales Annual Accountability Reporting to Welsh Government					X X X
SR 4.7	Ongoing review and development of a wellbeing provision which meets the needs of all staff including those affected by the Covid-19 Public Inquiry	Neil Lewis, Director of People & OD	Strategic Risk Register Staff Survey		X	X	X	X

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Action plan No.	Gaps in controls	Action Plan	Exec Director	Due Date	Progress
AP 4.1	Organisational-wide Records Management System	Design and implement Records Management System across organisation	Executive Director of Quality and Nursing	March 2025	December 2023: On target
		Approved Records Management policies and procedures	Executive Director of Quality and Nursing	December 2023 March 2023	December 2023: Consultation process has concluded and policy and procedure are progressing through the approval process. Amend due date to 30/03/24.
AP 4.2	Standardised approach to Governance and Quality Management	Implement Quality as an Organisational Strategy	Director for NHS Quality Improvement and Patient Safety	August 2024	December 2023: On target. Work is progressing to integrate the principles of QOS into work already underway in PHW following a review of the implementation approach in the Summer. Examples include integration into the IMTP planning process; integration with the work on organisational design principles; alignment with work following the culture survey; support to the stage 2 project to iterate the PAD; and support from the I&I hub to tier 1-3 projects as required. A workshop to further develop our macro and meso system maps has progressed this work and a series of further support sessions will be rolled out in January. The workshop also provided an opportunity to

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					bring together all the QOS leadership activities we have been working on to begin viewing as a Quality Management System. A joint BET/LT SBET to share progress & next steps is planned for February 2024.
		Implement year 2 of Integrated Governance implementation plan	Executive Director of Quality and Nursing	March 2024	December 2023 On target
AP 4.3	A co designed / developed high- level plan which will deliver desired culture	Establish a high-level plan which will deliver desired culture (to include communication and engagement aspects)	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Directorate briefings not yet complete and this has been raised as an issue by Trade Unions. New Executive Directors have recently taken up post, which has meant conclusion of this work has taken longer than anticipated. Revise due date to March 2024.</p> <p>December 2023 Work is ongoing across directorates to close the culture gap, organisation and directorate levers are being worked through and the Executive Team are meeting on 24 January 2024 to agree next steps. Engagement plan for 2024/25 and the cycle of activity is being discussed at the newly formed Leadership Forum on 18 January 2024 and the plan will be further refined. Culture advocates</p>

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					are also being trained across the organisation to support this work.
		Develop KPIs to measure how well Managers are engaging their direct reports and use these as part of regular 1-1 reviews	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date at risk of delay due to dependency on AP4.5</p> <p>December 2023 Work ongoing in this area and KPI's development progressing.</p>
AP 4.5	A strategic and systemic approach to employee engagement	Development of a strategic and systemic approach to employee engagement	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date at risk of delay due to dependency on AP4.5</p> <p>December 2023 Linked to AP4.3 and employee engagement is aligned to our culture work.</p>
		Systematic reviews of Staff survey responses and delivery of action plans	Neil Lewis -Director People and OD	March 2024	<p>October 2023 Due date moved forward 3 months due to staff survey results not being scheduled to be received until 31/01/2024</p> <p>December 2023 NHS Wales Staff Survey outputs are due 31 January 2024, the results will complement the Culture Survey by giving greater detail on specific actions we can take against some of the causal factors (both organisationally and at directorate level).</p>

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AP 4.6	Ownership of organisation wide Workforce Planning process to ensure delivery of capacity and capability risks addresses	Directorates to commit to Workforce Planning process and take action to close workforce risks	Neil Lewis -Director People and OD	March 2024	<p>November 2023 Critical roles have been identified. Resourcing plans required to support the building of pipelines will in place until 31/3/24</p> <p>December 2023 On Target to meet 31/3/24 deadline</p>
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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		Likelihood	Impact		
3	4	12	3	2		

Strategic Risk Register

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			

Strategic Risk Register

		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		

Strategic Risk Register

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

Strategic Risk Register

						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>

Strategic Risk Register

						<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>

Strategic Risk Register

						<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>

Strategic Risk Register

						<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>

Strategic Risk Register

						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.

Strategic Risk Register

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			GREEN
Likelihood	Impact		Likelihood	Impact		
3	3	9	3	2	6	

Strategic Risk Register

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	

Strategic Risk Register

			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		

Strategic Risk Register

		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	

Strategic Risk Register

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>

Strategic Risk Register

			Set out service requirements in a business case and single establishment control submission as contribution towards the Directorate budget realignment work.	National Director of Health Protection and Screening Services	May 2023 March 2024	<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>
			Complete training competencies for all staff who are able/required to deliver OOH services	National Director of Health Protection and Screening Services	September 2023 March 2024	<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>

Strategic Risk Register

			<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>

Strategic Risk Register

						<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>

Strategic Risk Register

			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>

Strategic Risk Register

						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 from Improvement Cymru on behalf of the NHS Executive in January 2024.</p>

Strategic Risk Register

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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