

Strategic Risk owner	Risk Domain	Risk Title	Risk Description	Controls in place	Action Plan	Assuring Committees	Rating (current)	Rating (Target)	Trend	Opened	Date Risk on the RR reviewed	Datix ID
Executive Director of Finance & Procurement	Finance	Failure to remain in financial balance in 2021/22, when the significant non-recurring Covid funding received in 2020/21 is likely to reduce. The context is that very significant non-recurring funding was allocated to the Health Board in 2020/21 which may not be at the same level in 2021/22	IF: The Health Board is not able to plan changes which enable current run rates of expenditure to align with the available funding for 2021/22 Then: The Health Board will not be able to develop a break-even financial plan for 2021/22 and deliver it . The context is that very significant non-recurring funding was allocated to the Health Board in 2020/21 which may not be at the same level in 2021/22 Resulting in: Potential deficit in 2021/22 leading to potential short term unsustainable cost reductions with associated risks, qualification of the accounts and potential Welsh Government regulatory action.	Arrangements are being put in place to develop the 2021/22 IMTP, including the Covid response, TTP, planned care and diagnostics, including prioritisation of planned changes within the available resources. Developing the Health Board's understanding and use of Value Based Healthcare principles to drive service planning and improvement. Developing a more project and programmatic approach to planning and delivery of efficiency savings schemes, with focus on pipeline schemes as well as schemes in delivery. Including the development and implementation of the CTM Improvement Plans. Routine monitoring arrangements in place. Regular reporting to Management Board and Planning, Performance & Finance Committee and Board.	High level process and timetable agreed at December Management Board - Completed . Implement CTM Improvement and Value Based Healthcare. Timescale: 31.3.2021	Planning, Performance & Finance Committee	20	12	↔	01/04/2013	18.11.2020	4060
Executive Director of Operations Bridgend Locality	Patient / Staff & Public Safety - Physical and /or psychological harm	Failure to sustain Child and Adolescent Mental Health Services	IF: The Health Board continues to face challenges in the CAMHS Service Then: there could be an impact in maintaining a quality service Resulting in: recruitment challenges, long waiting times and impact to the implementation of the new model of care. Difficulties remain in recruiting key staff and new model of care being implemented; waiting times for specialist CAMHS and the new neurodevelopmental service remains challenging. Rationale for target score: Increasing demands being placed on the Core CAHMS Services resulted in long waiting times and the service was experiencing difficulties in recruiting staff	<ul style="list-style-type: none"> Reported local and Network pressures across the CAHMS Network with variable problems dependant on the area of the network. Updates provided to Management Board on developing service model to address reported issues and additional investment secured to increase capacity within the service and to address service pressures. Waiting list initiatives in place whilst staff recruitment is being progressed. Service Model developed around Core CAHMS in Cwm Taf Morgannwg which includes agreement with General Paediatrics to take the lead on Neurodevelopmental Services and shared care protocols with Primary Care. New investment impact being routinely monitored A number of service reviews in relation to Ty Llidiard undertaken and monitored via Q,S&R Committee	Commissioning discussions taking place across the Network in relation to service pressures and funding. Implementation of the Choice and Partnership Approach (CAPA) and being closely monitored.	Planning, Performance & Finance Committee	16	9	↓ 20	01/01/2015	18.11.2020	4149
Executive Director of Operations	Patient / Staff & Public Safety - Physical and /or psychological harm	Failure to achieve the 4 and 12 hour emergency (A&E) waiting times targets	IF: The Health Board fails to achieve the 4 and 12 hour emergency (A&E) waiting time targets. Then: The Health Boards ability to provide safe high quality care will be reduced. Resulting in: Compromised safety of patients, potential avoidable harm due to waiting time delays. Potential of harm to patients in delays waiting for treatment.	Need to strengthen minors streams at DGH sites to sustain improved delivery of performance against the 4, 8 and 12 hour targets. Also variable practice across A&E departments. Consultant and middle grade gaps in RGH now filled. PCH DU report delivered and being enacted. PoW/RGH/PCH provided full Safety and Dignity analysis to September QSR committee and Safety Briefing sitrep model and SAFER being rolled out across sites. Programme of improvement work with AM&ED, HR and Retinue teams to improve medical booking and staffing to raise shift fill (ADH initiative has been successful). Winter Plan in train through directorate and partners (RPB). Interim Site Management arrangements coming into place. Systems model in development. 1) Clear discharge planning processes in place. 2) Improvements in the patient flow and investments to support Winter planning. 3) Stay Well At Home (SW@H) Service introduced and evaluated (6 month). Transformation funding will initiate Jan/Feb 2020. 4) SW@H 2 developments and Enhanced Community Clusters being progressed through Transformation bid.	The existing controls will be maintained and developed, with monitoring in place via internal ILG meetings and the monthly ILG meetings with Directors. Given the pressure upon the UHB in the covid-19 environment, the risk will remain at level 16, with review in March .	Planning, Performance & Finance Committee & Quality & Safety	16	12	↔	01/04/2013	11.01.2020	4070

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Executive Director of Public Health	Operational - Core Business / Business Objectives	Risk of interruption to service sustainability, provision & destabilising the financial position re: Brexit	IF: the health board is impacted by a "no deal" Brexit. Then: there could be an interruption to service delivery. Resulting in: the inability to provide sustainable service delivery.	Full planning preparations aimed to be stood up in September. Due to these current developments and the Covid-19 Pandemic the risk has increased from that in previous planning periods. Gap analysis/risk assessment on Brexit and Audit Wales self-assessment completed. Service Group Business Continuity plans updated- particularly in Medicines Management; Facilities (food); ICT; Workforce; Estates; R&D Working with other HBs and Welsh NHS Confederation learn lessons from other organisations and provide information on SharePoint to allow opportunities for staff across the HB to identify and areas of concern Work nationally with Welsh Government, Local Resilience Forums and other HBs and Trusts to share business continuity plans. Continue with strong controls in place to ensure "business as usual" through robust business continuity plans. active on SRO and Health Securities groups Emergency Planning, Preparedness & Response (EPPR) for the CTM sites Workforce actively pursuing the gap analysis. Assessment of potential risks to the flow of personal data following Brexit Active with NWSSP to provide detail on product lines and non stock items Taking part in Operation Yellowhammer reporting (with WG) Undertaken a number of business continuity exercises to test existing business continuity plans to identify any gaps in resilience.	Service Groups to ensure their business continuity arrangements ensure sustainability in the event of any impact as a result of a "no deal" Brexit. Supported by the Emergency Planning Officer. This an ongoing action so no specific timescales have been assigned.	Planning, Performance & Finance Committee	16	8	↔	01/11/2018	18.11.2020	4113
Executive Director of Operations	Ensure sustainability in all that we do, economically, environmentally and socially.	Replacement of the auto remat system for processing of clothing and coats due to age.	(Facilities Risk Register 11476) ILG: CSO Facilities Hub If: Auto remat system requires upgrading as risk of breaking down and parts becoming scarce. Then: Potential delay to laundry service for the organisation. Resulting In: Business and service objectives not being completed and financial loss from service disruption.	Continue to maintain at cost including maintenance, overtime and parts where available. Contingency Plan in place with options included such as using other equipment available, using another laundry and additional agency staff if required.	Undertake gap analysis of laundry services against WHTM 01-04 and BS EN 14065: 2016. Completed. Purchase and installation of new system with capital funding required through SON. SON submitted and still awaiting response from CMG on funding. Timescale for completion has been extended following confirmation on 07/12/2020 that the laundry service will move under NWSSP from 1st April 2021. Timescale: 31/03/2021 Review contingency plans to ensure adequacy in light of risk. Contingency plans reviewed, maintaining equipment as much as possible until parts are no longer available. Timescale for completion has been extended following confirmation on 07/12/2020 that the laundry service will move under NWSSP from 1st April 2021. Timescale: 31/03/2021 Based on this update the risk remains unchanged until new system has been installed and is compliant.	Quality-& Safety-Committee- Planning, Performance & Finance Committee	16	8	↔	16/12/2016	11/12/2020	4285

Organisational Risk Register (Closed Risks)
December 2020 (Management Board January 2021)

Datix ID	Executive Portfolio	Risk Domain	Risk Title	Risk Description	Controls in place	Action Plan	Assuring Committees	Rating (current)	Rating (Target)	Trend	Opened	Last reviewed	Comments
4154	Executive Director of Finance & Procurement	Finance	Financial Impact of Covid-19 (including Resetting CTM) on the 2020/21 In Year financial position.	<p>IF: The Health Board is unable to manage the operational revenue costs of addressing the pandemic and resetting programme within the available revenue and capital funding in 2020-2021.</p> <p>Then: The Health Board will breach its financial duties for 2020-2021.</p> <p>IF: Covid capital costs are not funded by the Welsh Government</p> <p>Then: The Health Board will breach its capital resource limit for 2020/21.</p> <p>Resulting in: Qualification of the accounts and potential regulatory action by the Welsh Government. Covid costs not managed within the resources provided.</p>	<p>Modelling of anticipated patient flows, and the resultant capacity requirements, workforce requirements and revenue and capital costs</p> <p>Financial modelling and forecasting is co-ordinated with planning and projecting of service impacts.</p> <p>Balance sheet projections and consideration with Audit Wales regarding the potential need for a prior year adjustment.</p> <p>Financial reporting to Welsh Government on projected and actual revenue and capital costs to inform central and local scrutiny, feedback and decision-making;</p> <p>Seeking feedback from WG on funding availability (both revenue allocations and Capital Resource)</p> <p>Oversight arrangements in place at CTM Resetting meetings and monitoring arrangements.</p> <p>Exploring internal sources of funding further (from slippage or re-direction of targeted WG funding including partnership funding).</p> <p>Monitored through the CTM Resetting arrangements</p>	A key dependency is tracking of the Q3-4 plan delivery and work with Audit Wales on balance sheet projections.	Planning, Performance & Finance Committee	8	8	↓ 20	05/05/2020	11/01/2020	Covid funding provided by WG which will exceed the requirements of CTM in 2020/21. CTM has agreed to return the element of this not able to be utilised back to WG, and the residual risk is that due to unexpected events too much funding is returned, resulting in a deficit. This is though a small risk.