

**PWYLLGOR CRONFA ELUSENNOL
CHARITABLE FUNDS COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	20 th September 2019
TEITL YR ADRODDIAD: TITLE OF REPORT:	Charitable Funds Risk Register
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sarah Jennings, Director of Partnerships and Corporate Services
SWYDDOG ADRODD: REPORTING OFFICER:	Sarah Jennings, Director of Partnerships and Corporate Services

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er gwybodaeth/For information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

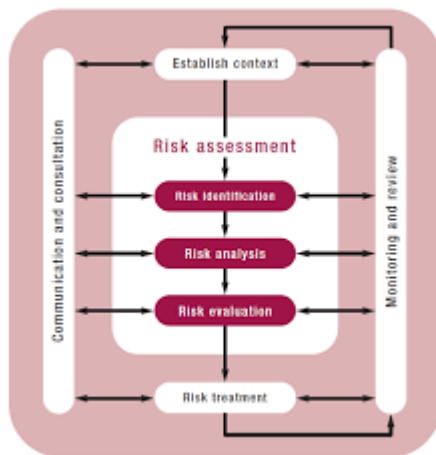
The Charitable Funds Committee (CFC) is responsible for providing assurance to the Board that operational risks aligned to the Committee are being identified, assessed and managed effectively.

This paper provides an update on any charitable funds related risks and recent actions that have been undertaken to provide assurance that the risk will be appropriately monitored and mitigated.

The Committee is asked to review and scrutinise these risks to seek assurance that all relevant controls and mitigating actions being put in place.

Cefndir / Background

Effective risk management requires a 'monitoring and review' structure to be in place to ensure that risks are effectively identified and assessed and that appropriate controls and responses are in place.



(Risk Management Process, ISO 31000)

Operational risks must be managed within directorates under the ownership and leadership of individual executive directors, who must establish local arrangements for the review of their risk registers, which includes the validation of the information and risk scores, and the prioritisation and identification of solutions to their risks. In addition to these local arrangements, there are formal monitoring and scrutiny processes in place within the UHB with the aim of providing assurance to the Board that it is managing its risks effectively.

All risks identified within the Datix Risk Module must be aligned to a formal Board Committee, Sub-Committee or Group who will be responsible for monitoring and scrutiny of risks which relate to their remit.

The Charitable Funds Committee is responsible for the monitoring and scrutiny of operational risks within their remit. It is responsible for:

- Scrutinising operational risks within their remit either through receiving the risk registers or through Service Reports.
- Gaining assurance that risks are being appropriately managed, effective controls are in place and planned additional controls are being implemented.
- Challenging pace of delivery of risk actions.
- Identifying through discussions, new and emerging risks and ensure these are assessed by those with the relevant responsibility.
- Providing assurance to its parent committee that risks are being managed effectively and report risks which have exceeded tolerance through its Sub-Committee/Group update report.
- Using risk registers to inform meeting agendas.

Asesiad / Assessment

The Charitable Funds Committee Terms of Reference state that it will:

- Contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework (12.4).

The current charitable funds risk is presented below on the risk register along with the proposed actions to be put in place to provide assurance that the risk will be appropriately monitored and mitigated. The risk has been based on the following criteria:

- CFC has been selected by the risk lead as the 'Assuring Committee' and will feature in this way on Datix.
- The current risk score exceeds the tolerance level of 4, discussed and agreed by the CFC on 29th November 2016.
- Risks have been approved at Directorate level.
- Risks have not been escalated to the Corporate Risk Register.

The risk has scored against the following 'impact' domains':

- Adverse publicity or reputation

Argymhelliad / Recommendation

The Committee is asked to:

- review and scrutinise this risk to seek assurance that all relevant controls and mitigating actions are being put place.
- discuss whether the planned action will reduce the risk further and/or mitigate the impact if the risk materialises.

This in turn will enable the Committee to provide the necessary assurance to the Board, or otherwise, that the UHB is managing any risks effectively.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	12.4 In doing so, the Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board’s overall risk and assurance framework.
Cyfeirnod Cofrestr Risg Risk Register Reference:	n/a – new risk
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	9. To improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Not Applicable
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio: The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	Please explain how each of the '5 Ways of Working' will be demonstrated
	Long term - the importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs Not Applicable
	Prevention – the importance of preventing problems occurring or getting worse Not Applicable

	<p>Integration - the need to identify how the Health Board's well-being objectives may impact upon each of the well-being goals, on its other objectives, or on the objectives of other public bodies Not Applicable</p>
	<p>Collaboration – acting in collaboration with anyone else (or different parts of the organisation itself) which could help the Health Board to meet its well-being objectives Not Applicable</p>
	<p>Involvement - the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the Health Board serves Not Applicable</p>

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Underpinning risk registers on the Datix Risk Module from across the UHB's services reviewed by risk leads/owners
Rhestr Termau: Glossary of Terms:	Risk Appetite - <i>the amount of risk that an organisation is willing to pursue or retain</i> (ISO Guide 73, 2009) Risk Tolerance - <i>the organisation's readiness to bear a risk after risk treatment in order to achieve its objectives</i> (ISO Guide 73, 2009)
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Bwrdd Partneriaeth Y Prifysgol: Parties / Committees consulted prior to University Partnership Board:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts from report however impacts of each risk are outlined in risk description.
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts from report however impacts of each risk are outlined in risk description.

Gweithlu: Workforce:	No direct impacts from report however impacts of each risk are outlined in risk description.
Risg: Risk:	No direct impacts from report however organisations are expected to have effective risk management systems in place.
Cyfreithiol: Legal:	No direct impacts from report however proactive risk management including learning from incidents and events contributes towards reducing/eliminating recurrence of risk materialising and mitigates against any possible legal claim with a financial impact.
Enw Da: Reputational:	Poor management of risks can lead to loss of stakeholder confidence. Organisations are expected to have effective risk management systems in place and take steps to reduce/mitigate risks.
Gyfrinachedd: Privacy:	No direct impacts
Cydraddoldeb: Equality:	Has EqIA screening been undertaken? No Has a full EqIA been undertaken? No

Risk Ref	Health and Care Standards Directorate	Directorate lead	Management or service lead	Date risk identified	Risk Statement	Existing Control Measures Currently in Place	Domain	Risk Tolerance Score	Current Likelihood	Current Impact	Current Risk Score	Additional Risk Action Required	By Whom	By When	Progress Update on Risk Actions	Lead Committee	Target Likelihood	Target Impact	Target Risk Score	Date Reviewed	
								8	3	4	12										
743	Standard 7.1 Workforce	P&CS: Charitable Funds	Jennings, Sarah	Llewelyn, Nicola	30/11/2018	<p>There is a risk of reputational damage if the Health Board becomes implicated by default, in events outside of the HB's control, due to association, or perceived association with any external charitable organisations.</p> <p>This is caused by no requirement for external charitable organisations to conform to the HB's policies and procedures. Donations given to the HB to say thank you for the care received are sometimes made to HB staff involved in external charities of their own where their interests may not have been declared.</p> <p>This will lead to an impact/affect on the HB's reputation if association by default occurs with external charitable organisations which appear to have HB involvement and/or participation and seem to be aligned to the Health Board (either via staff association or name). This may result in a decrease of donations, charitable giving, lack of trust by patients, carers and members of the public, media interest and/or concerns or complaints raised.</p> <p>Risk location, Health Board wide.</p>	<p>UHB policies:</p> <p>Standards of Behaviour Policy (Incorporating Declarations of Interests, Gifts, Hospitality, Honorarium and Sponsorship).</p> <p>The above policy is referenced in all HDdUHB (A4C) contracts of employment where it states "I hereby confirm that I accept this appointment on the terms and conditions set out above and contained in the Hywel Dda University Health Board Standards of Business Conduct".</p> <p>Charitable Funds: Financial Administration and Governance Policy.</p>	Adverse publicity/reputation	8	3	4	12	<p>Revise the UHB's Standards of Behaviour Policy to incorporate guidance on the declaration of interests involving external charitable organisations and those with any financial associations.</p>	Head of Corporate & Partnership Governance	31/06/2019	<p>The Standards of Behaviour Policy has undergone a full review and been assessed against similar policies across Wales. Consultation end date was mid July 2019 following its passage through Staff Partnership Forum (10th June), Workforce & OD Sub-Committee (4th July) and Audit & Risk Assurance Committee (27th August). The revised policy was approved at Business Planning & Performance Assurance Committee on 29th August 2019. The revised Standards of Behaviour Policy will be linked to the revised 'Charitable Funds: Financial Administration and Governance Policy' once approved.</p>	Charitable Funds Committee	1	4	4	05/06/2019
												<p>Develop a communications plan to raise awareness of the updated Standards of Behaviour Policy and the importance of declaring all external interests, especially those involving external charitable organisations and those with any financial associations.</p>	Head of Corporate & Partnership Governance	31/10/2019	<p>The Communications Plan included in the revised policy approved at Business Planning & Performance Assurance Committee will involve:</p> <ol style="list-style-type: none"> 1. Use of Team Brief, the payslip information advice section and the staff intranet. 2. Global e-mails will remind employees and Independent Members of the Standards of Behaviour Policy and their responsibility to comply with it. 3. Targeting of specific groups and forums to raise awareness of the policy such as corporate and local induction, the Local Partnership Forum, Medical Leadership Forum, Operations Business Meeting and other key meetings. 						

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												Work with key clinicians to communicate the importance of declaring all external interests, especially those involving external charitable organisations and those with any financial associations e.g. via the Medical Leadership Forum and 1:1 meetings with key clinicians.	Assistant Director, Medical Directorate	31/12/2019	Assistant Director Medical Directorate has begun to meet with key clinicians to discuss the declaration of interests in external charitable organisations. Following the approval of the revised policy (BPPAC 29/08/19) wider dissemination will take place during the next quarter across the whole Medical Directorate.					
												Work with senior Operations Directorate managers to communicate the importance of supporting all staff to declare external interests, especially those involving external charitable organisations and those with any financial associations e.g. awareness raising session at Operations Business Meeting.	Head of Corporate & Partnership Governance & Head of Hywel Dda Health Charities	31/12/2019	Presentation delivered at the May Operations Business Meeting on the revised Standards of Behaviour Policy as part of targeted consultation. Following the approval of the revised policy (BPPAC 29/08/19) wider dissemination will take place during the next quarter across the whole Operations Directorate.					
												Develop a 'model' Memorandum of Understanding to be introduced with all relevant external charitable organisations to discuss and agree how both organisations will collaborate and co-operate and the establishment of relevant governance structures.	Head of Hywel Dda Health Charities	31/10/2019	Guidance on the operations of external charities on UHB premises is being included in the revised 'Charitable Funds: Financial Administration and Governance Policy (420)' rather than developing a new corporate policy. The revised policy is being presented to the October 2019 Finance Committee meeting.					