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# Assurance and Risk Report

# Situation



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This report provides the Charitable Funds Committee (CFC) with the current status of the risks, audits and inspections recommendations, Welsh Health Circulars (WHCs) and Ministerial Directions (MDs) within its remit. The Committee is asked to seek assurance from Lead Executive Directors that risks are being managed effectively, and that recommendations from audit and inspections, WHCs and MDs are being implemented by the Health Board.

Principal Risks:  
0

Corporate Risks:  
0

Operational Risks  
1

Audit and Inspection  
Reports  
0

Welsh Health  
Circulars  
0

Ministerial Directions  
0

# Risk Management - Overview



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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.

The Health Board’s risk management process is recorded via the Datix Risk Register module, and enables risks to be recorded at either Principal, Corporate or Operational level. An escalation process is in place to ensure that risks which require escalation or de-escalation are done via appropriate approval processes and governance arrangements.

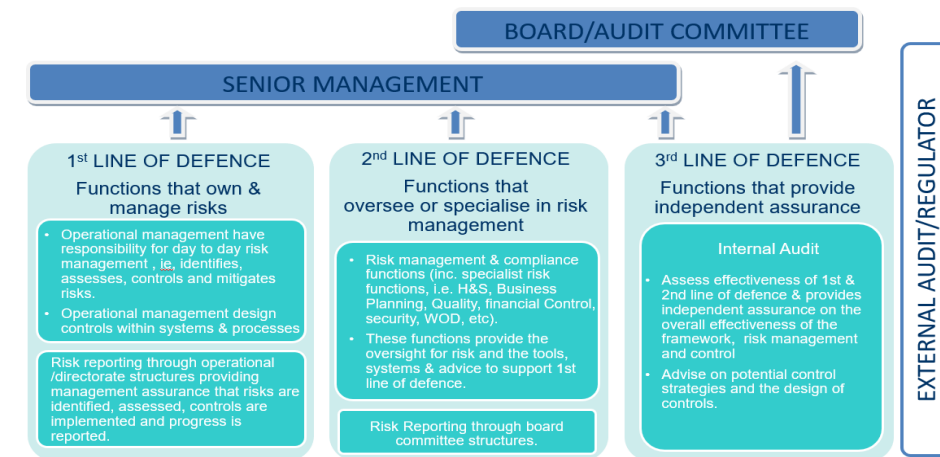
The Health Board operates within the widely accepted “Three Lines of Defence” model to ensure the appropriate responsibility is allocated for the management, reporting and escalation of risk.

Risks are aligned to an appropriate Clinical Care Group or Executive Function (hereto referred to as “Functions”), and each has a designated risk lead responsible for reviewing in a timely and comprehensive manner.

The Board’s Committees are responsible for the monitoring and scrutiny of corporate and operational risks within their remit and providing assurance to the Board that risks are being managed effectively and report areas of significant concern (e.g. where the risk appetite is exceeded, or there is a lack of action).

Committees are also responsible for reviewing risks over tolerance and where appropriate, recommend the ‘acceptance’ of risks that cannot be brought within risk appetite.

A revised approach to risk tolerance was agreed by the Board at its meeting in March 2025 to reflect the organisation’s readiness to bear the risk after risk treatment, in order to achieve its objectives. Risk leads are required to provide a rationale for the target risk score (TRS), and an expected date when the target risk score (TRS) will be achieved. These are mandatory fields on Datix as of 1 July 2025, and therefore where risks do not currently have this detail, risk leads will be asked to provide by the next report to CFC.



# Operational Risks assigned to CFC



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There is currently one operational risk on Datix which is aligned to CFC and is within the review date.

The risk has been identified as reportable to CFC based on the following criteria:

- The CFC has been selected by the risk lead as the 'Assuring Committee' on Datix;
- The risk has been identified at operational level (previously Service and Directorate level) on the Datix risk module;
- The current risk score is 'extreme' or 'high'; and
- The current risk score is either equal to or exceeds the target risk score.

The following slide summarises the operational risk aligned to CFC. The Risk Register attached at Appendix 1, provides full detail of the risk, including control measures in place and the risk action plan to further manage and mitigate the risk.

Hywel Dda Risk Heat Map					
	LIKELIHOOD →				
IMPACT ↓	Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Catastrophic 5	Yellow	Orange	Red	Red	Red
Major 4	Yellow	Orange	2045 NEW Orange	Red	Red
Moderate 3	Green	Yellow	Orange	Orange	Red
Minor 2	Green	Yellow	Yellow	Orange	Orange
Negligible 1	Green	Yellow	Yellow	Orange	Orange

# Operational Risk assigned to CFC



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Risk Reference & Title	Lead Director	Current Risk Score	Target Risk Score (TRS)	Expected Date to Achieve TRS
<b>2045</b> - Risk of the Health Board not being able to sustain a paid fundraising function for its charity due to low returns on investment (ROI)	Executive Director of Nursing, Quality and Patient Experience	<b>12</b> <b>NEW</b>  (Reviewed 15/08/25)	<b>12</b>	31/12/2025

## Rationale for Current Risk Score (CRS)

With all the current control measures in place, the risk score remains high. For the period ending 31 July 2025, income from donations has increased by 5.9% compared with the same period in the previous financial year.

Further analysis of the charity's performance was undertaken during quarter 2 and presented to the Business Executive Team on 9 July 2025. The Executive Team discussed the charity's current running costs, current and previous income levels and the benchmarking data on fundraising performance. The Executive Team requested that a review of the impact of existing vacancies within the team be undertaken and be presented to Business Executive Team within six months.

## Rationale for Target Risk Score (TRS)

The nature of charitable giving is unpredictable and it is difficult to predict annual charitable income levels.



The committee is requested, in relation to the areas presented in this paper, to:

## Risk Management

- **RECEIVE ASSURANCE** that identified controls are in place and working effectively; and
- **RECEIVE ASSURANCE** that all planned actions are credible and deliverable, and in line with agreed plans, and will be implemented within stated timescales and will reduce risks further and/or mitigate the impact should risks materialise.



**DIOGEL | CYNALIADWY | HYGYRCH | CAREDIG**  
**SAFE | SUSTAINABLE | ACCESSIBLE | KIND**



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Risk Ref	Clinical Care Group / Executive Function	Clinical Service Group / Executive Function Service	Clinical Service Sub-Group / Executive Function Service	Executive Director	Clinical Care Group Director / Executive Function Lead	Clinical Service Group Lead / Executive Function Service Lead	Clinical Service Sub-Group Lead / Executive Function Service Lead	Date risk identified	Risk Statement	Existing Control Measures Currently in Place	Domain	Current Likelihood	Current Impact	Current Risk Score	Rationale for 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 (tolerable score)	Rationale for Target Risk Score	Detailed Risk Decision	Review date
2045	Director of Nursing, Quality and Patient Experience	Nursing, Quality and Patient Experience	NQPE: Charitable Funds	Daniel, Sharon	Daniel, Sharon	Llewelyn, Nicola	Llewelyn, Nicola	13-Dec-24	<p>There is a risk of HDdUHB not being able to sustain a paid fundraising function for its charity.</p> <p>This is caused by the increased investment in fundraising costs since 2021/22 and the level of charitable income generated by the charity resulting in variable levels of ROI.</p> <p>This will lead to an impact/affect on:</p> <ol style="list-style-type: none"> <li>The charity's ability to sustain its current staffing structure.</li> <li>The charity's ability to generate income from proactive fundraising activities in future years.</li> <li>Staff wellbeing and morale: Fundraising staff may disengage and lose motivation if there is uncertainty regarding the sustainability of the team.</li> <li>Loss of confidence if key stakeholders (NHS staff, public, donors) do not feel that the charity is using its resources efficiently.</li> <li>The charity's ability to improve experiences for, and make a positive difference to, the health and wellbeing of Health Board's patients, service users and staff due to reduced resources.</li> </ol> <p>Risk location, Health Board wide.</p>	<ol style="list-style-type: none"> <li>Review of the charity's fundraising and communications activities, including an assessment on the return on investment of fundraising costs, submitted to the December 2024 Charitable Funds Committee meeting for discussion.</li> <li>Charitable income and financial performance reported to the CFC on a quarterly basis for scrutiny.</li> <li>Financial reports submitted to the CFC include a comparison of the charity's performance against a sector wide recognised benchmark/ratio for return on investment.</li> <li>Annual work plans submitted to the CFC on an annual basis for consideration and approval.</li> <li>Progress reports on the annual work plan submitted to the CFC on a quarterly basis.</li> <li>Income reports produced by the finance team on a monthly basis for scrutiny by the Head of Hywel Dda Health Charities (HDdHC) and Fundraising Team.</li> <li>Agreement to not fill the vacant positions (x2) within the fundraising/communications team without Executive Director consideration and approval when income levels have stabilised or increased.</li> <li>Fundraising Manager has monthly 1-2-1s with the fundraising team to discuss operational issues and progress against the fundraising workplan.</li> <li>Senior Communications Officer has monthly 1-2-1s with the Communications Assistant to discuss operational issues and progress against the communications workplan.</li> <li>Head of Hywel Dda Health Charities has a monthly 1-2-1 with the Fundraising Manager and Senior Communications Officer to discuss operational issues and progress against the workplan.</li> <li>Further analysis of the charity's performance undertaken during quarter 2 and presented to the Business Executive Team on 9 July 2025.</li> </ol>	Finance inc. claims	3	4	12	<p>With all the current control measures in place, the risk score remains high. For the period ending 31 July 2025, income from donations has increased by 5.9% compared with the same period in the previous financial year.</p> <p>Further analysis of the charity's performance was undertaken during quarter 2 and presented to the Business Executive Team on 9 July 2025. The Executive Team discussed the charity's current running costs, current and previous income levels and the benchmarking data on fundraising performance. The Executive Team requested that a review of the impact of existing vacancies within the team be undertaken and be presented to Business Executive Team within 6 months.</p>	<p>Review of the impact of holding two vacancies within the fundraising team to be undertaken and the findings presented to the Executive Team.</p>	Llewelyn, Nicola	31-Jan-26	<p>Further analysis of the charity's performance was undertaken during quarter 2 and presented to the Business Executive Team on 9 July 2025. The Executive Team discussed the charity's current running costs, current and previous income levels and the benchmarking data on fundraising performance. The Executive Team requested that a review of the impact of existing vacancies within the team be undertaken and be presented to Business Executive Team within 6 months.</p>	Charitable Funds Committee	3	4	12	<p>The nature of charitable giving is unpredictable and it is difficult to predict annual charitable income levels.</p>	Treat	15-Aug-25