## CORPORATE RISK REGISTER SUMMARY SEPTEMBER 2020

Risk Ref	Risk (for more detail see individual risk entries)	Included on BAF	Risk Owner	Domain	Tolerance Level	Previous Risk Score	Risk Score Sep- 20	Trend	Target Risk Score	Risk on page no
856	Risk to delivery of the Financial Plan for 2020/21	ves to rmed.	Thomas, Huw	Statutory duty/inspections	6	4×5=20	4×5=20	$\rightarrow$	2×4=8	<u>3</u>
956	Risk that the Health Board will be breach its Capital Resource Limit in 2020/21	objecti e confi	Thomas, may	Statutory duty/inspections	8	New	3×5=15	New risk	2×4=8	<u>7</u>
646	Ability to achieve financial sustainability over medium term.	HB	Thomas, Huw	Finance inc. claims	6	3×4=12	3×4=12	$\rightarrow$	2×3=6	<u>10</u>

# **Assurance Key:**

	3 Lines of Defence (Assurance)								
1st Line	Business Management	Tends to be detailed assurance but lack independence							
2nd Line	Corporate Oversight	Less detailed but slightly more independent							
3rd Line	Independent Assurance	Often less detail but truly independent							

Key - Assurance Required	NB Assurance Map will tell you if
Detailed Teview of Televant Information	you have sufficient sources of
Medium level review	assurance not what those sources
Cursory or narrow scope of review	are telling you

Key - Control RAG rating	
LOW	Significant concerns over the adequacy/effectiveness of the controls in place in proportion to the risks
MEDIUM	Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks
HIGH	Controls in place assessed as adequate/effective and in proportion to the risk
INSUFFICIENT	Insufficient information at present to judge the adequacy/effectiveness of the controls

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Date Risk	Apr-20
Identified:	
Strategic	Health Board objectives 20/21 to be confirmed.
Objective:	

Risk ID:	856	<b>Principal Risk</b>	There is a risk to the delivery of the Health Board's Financial Plan for 2020/21
		Description:	of a £25m deficit. This is caused by 1. Costs of addressing our local COVID-19 needs may exceed funding available from UHB, Regional and WG sources.  2. Unidentified savings schemes included in the Financial Plan are also at risk of non-delivery due to both the operational focus being diverted to respond to COVID-19 and where identified schemes are not supportive of the response needed (e.g. bed closures). This could lead to an impact/affect on the Health Board's deficit position, reduction in stakeholder confidence and increased scrutiny from WG.
Door this	و بياماد انساد :	to any Divertor	rate (operational) risks?

Risk Rating:(L	ikelihood x Impac	t)	[		
Domain:	Statutory duty	/inspections	25	 	Current Risk
Inherent Risk Score (L x I): 4×5=20			15 —		Score
Current Risk Score (L x I): 4×5=20		10		 Farget Risk Score	
Target Risk Score (L x I): 2×4=8			5 —	 	 Folerance Level

43952

Date of Review:

**Date of Next** 

43983

Sep-20

Oct-20

Thomas, Huw

Finance Committee

#### Rationale for CURRENT Risk Score:

The scale of the pandemic and the likely impact on the Health Board is as yet unknown, however the financial impact in Month 12 2019/20 and Months 1-5 2020/21 was significant and current demand modelling and corresponding forecast would suggest that the Health Board's existing revenue and capital funding streams would be insufficient.

#### Rationale for TARGET Risk Score:

Executive Director Owner:

Lead Committee:

Trend:

The Health Board needs to demonstrate that it is able to manage its financial position effectively, cognisant of the risks which are inherent in the delivery of safe and timely care.

As the demand modelling matures, informed by actual activity in the Health Board or in other Health Boards in Wales, the level of risk may be considered to be reduced, however current indications are that the pandemic will continue for the remainder of the financial year. As clarity is provided by partner organisations and Welsh Government as to funding arrangements, the risk of unfunded activity may be reduced.

Given the challenge in delivering the financial position this year, it is unlikely that the Health Board will achieve a risk which is in line with the tolerable risk for the year. Consequently, the target risk score exceeds the tolerable risk at this point. This is not an acceptable position, and further work is ongoing to manage this risk.

Key C	CONTR	OLS C	urrently	v in Place:
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(The existing controls and processes in place to manage the risk)

- Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command.
- Financial forecasting is an embedded monthly cycle, fully engaging budget holders through the Finance Business Partners. COVID-19 forecasting is now fully aligned to Directorates, where the accountability structure is better managed. System Engagement Meetings are held monthly for the higher risk Directorates.
- 3. Timely financial reporting to Directorates, Finance Committee, Board and Welsh Government on local costs incurred as a result of COVID-19, and cost reductions arising from changes in activity levels; this informs central and local scrutiny, feedback and decision-making.
- Oversight arrangements in place at Board level and through the command structure.
- 5. Exploration of a number of funding streams being explored, including: Local Health Board funding arrangements; Funding arrangements through the Regional Partnership Board and Local Authority partners. Funding from Welsh Government's own sources or from HM Treasury via Welsh Government.
- Opportunities Framework, refreshed to identify alternative ways of working in response to COVID-19 that may result in cost reductions/formal savings schemes identified.

	Gaps in CONTROL	.S		
Identified Gaps in Controls: (Where one or more of the key controls on which the organisation is relying is not effective, or we do not have evidence that the controls are	How and when the Gap in control be addressed Further action necessary to address the controls gaps	By Who	By When	Progress
evidence that the controls are The costs of addressing the Health Board's local needs may exceed available funding.  Identification and assessment of sustainable opportunities arising from cost reductions due to changes in activity levels or other service changes in response to COVID-19.	Alignment of strategic response to current demand modelling indicators between Welsh Government, Gold Command and operational teams.	Carruthers, Andrew	30/06/2020 31/10/2020	A Q2 Operational Plan has been submitted to Welsh Government in July 2020, as agreed by Gold Command (Q3&4 combined Plan due Oct 2020). The Board approved the Plan at the July 2020 meeting following the submission deadline. Feedback from WG following the Q2 submission indicated that the basis of assumptions should move from a 'worst case' scenario to a 'realistic' scenario, which will be factored in to the Q3&4 submission.
	Clarity as to what current escalation measures can be safely and appropriately deescalated/decommissioned and which ceased/deferred services/activities can be recommenced.	Carruthers, Andrew	3 <del>0/06/2020</del> 31/10/2020	A Q2 Operational Plan has been submitted to Welsh Government in July 2020, as agreed by Gold Command (Q3&4 combined Plan due Oct 2020). The Board approved the Plan at the July 2020 meeting following the submission deadline. Feedback from WG following the Q2 submission indicated that the basis of assumptions should move from a 'worst case' scenario to a 'realistic' scenario, which will be factored in to the Q3&4 submission.

	Refine Finance structure following review of effectiveness and efficiencies of function following OCP.	Spratt, Andrew	30/09/2020	Final transitional arrangements in progress to transfer and process improve workstreams from Business Partnering to Process Improvement, and to create distinct Management Accounting function with clear remit. Consultation complete and departmental structure changes communicated to Finance staff and relevant Service Leads - handover process pilots complete with final transition to be completed over coming weeks.
	Accountability statements in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic.	Thomas, Huw		Letters issued May 2020, clarifying continuation of existing financial control principles and the importance of existing governance processes and frameworks. Also stating the significance of decision making in response to, and the accurate recording of the financial impact of, COVID-19.
	Feedback/clarity from Welsh Government as to levels of additional revenue and capital funding available.	Thomas, Huw		Initial guidance, at a high level, has been received from Welsh Government. A level of WG funding has been provided in June 2020 for Quarter 1 Pay, Field Hospital and Primary Care costs incurred. Further clarifications are anticipated following the Month 5 reporting cycle. Current indications are that funding may be allocated on a principles basis (e.g. population) rather than on a costs incurred basis.

	ASSURANCE MAP			Control RAG	Latest Papers	Gaps in ASSURANCES				
Performance Indicators	Sources of ASSURANCE	Type of Assurance (1st, 2nd, 3rd)	Required Assurance Current Level	Rating (what the assurance is telling you about your controls	(Committee & date)	in Assurance:	How are the Gaps in ASSURANCE will be addressed Further action necessary to address the gaps	By Who	By When	Progress
Performance against planned response to COVID-19	Performance against plan monitored through Engagement meeting with Services	1st			* Month 5 Finance Report - Finance Committee	None				
In-month financial monitoring	Executive Performance Reviews	2nd			and Board September 2020					
	Finance Committee oversight of current performance	2nd			* COVID-19 Reporting Principles Paper -					
	Transformation & Financial Report to Board & PPPAC	2nd			Finance Committee May 2020					
	WG scrutiny through revised monthly Monitoring Returns (specific COVID-19 template) and through Finance Delivery Unit	3rd								
	WAO Structured Assessment 2020	3rd								

Date Risk	Aug-20
Identified:	
Strategic	Health Board objectives 20/21 to be confirmed.
Objective:	

Risk ID:	956	<b>Principal Risk</b>	There is a risk that based on the current capital funding issued to date from			
		Description:	Welsh Government for COVID-19 that the Health Board may spend in excess			
			of the capital resource it has available. This is caused by funding to date			
			a)has been based on items delivered to sites and not for expenditure			
			committed b)funding to date does not cover the potential cost of our			
			response to the social distancing legislation c)does not cover the potential			
			cost of the mitigating action required to ensure appropriate segregation of			
			COVID and non-COVID patients in our services d)not cover additional costs o			
			This could lead to an impact/affect on the Health Board breaching its			
			statutory financial duty to breakeven against its Capital Resource Limit for			
			2020/21 by £3.931m on expenditure already committed, and on COVID-19			
			schemes not yet committed of £12.469m which would have a direct effect on			
			the Health Board's ability to effectively deal with COVID-19 and respond to			
			the pandemic.			
Does this	s risk link	to any Director	rate (operational) risks?			

Rationale	for	CURRENT	Risk Score:
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The scale of the pandemic and the likely impact on the Health Board is evolving. The financial impact on capital in the first quarter of 2020/21 was significant and the current feasibility work being on schemes to deal with COVID -19 issues on ongoing basis would suggest that the Health Board's capital funding streams is insufficient.

Executive Director Owner:	Thomas, Huw	Date of Review:	Sep-20
Lead Committee:		Date of Next Review:	Oct-20

Risk Rating:(Like	lihood x Impact)		No trend information available.
Domain:	Statutory duty/ins	spections	
Inherent Risk Sc	ore (L x I):	4×5=20	
<b>Current Risk Sco</b>	re (L x I):	3×5=15	
Target Risk Score	e (L x I):	2×4=8	
Tolerable Risk:		8	
Trend:		New risk	

## Rationale for TARGET Risk Score:

The Health Board needs to demonstrate that it is able to manage its capital position effectively, cognisant of the risks which are inherent in the delivery of safe and timely care. Given the challenge in delivering the capital position this year, the Health Board will achieve a risk which is in line with the tolerable risk for the year. Effective prioritisation will aim to reduce the impact of this risk on statutory and clinical schemes.

## **Key CONTROLS Currently in Place:**

(The existing controls and processes in place to manage the risk)

- 1. Modelling the anticipated impact of feasibility schemes being developed and the impact on equipment and operational requirements through Bronze Acute and Estates Groups to ensure full knowledge of prioritised schemes.
- 2. Prioritisation and expenditure commitment are managed and approved through Gold command.
- 3. Timely financial reporting to Finance Committee, Board and Welsh Government on local costs incurred as a result of Covid-19 to inform central and local scrutiny, feedback and decision-making.
- 4. Monthly reporting to the Finance Committee regarding the Capital Risk.

	Gaps in CONTRO	LS		
Identified Gaps in Controls: (Where one or more of the key controls on which the organisation is relying is not effective, or we do not have evidence that the controls are	How and when the Gap in control be addressed Further action necessary to address the controls gaps	By Who	By When	Progress
The costs of addressing the Health Board's local needs may exceed available funding.  Co-ordination of approval process to progress projects.	Working with Welsh Government to review and identify and mitigate the Financial Risk	Thomas, Huw	30/09/2020	Further clarification is expected in September2020 around the potential availability of additional capital.
	Gold Command to approve prioritised list. Gold Command to approve any further changes to the prioritised list. No commitment to schemes without an agreed funding source.	Thomas, Huw	30/09/2020	Report to be prepared for consideration at Gold Command in September 2020.

	ASSURANCE MAP							
Performance Indicators	Sources of ASSURANCE	Type of Assurance	Required Assurance					
		(1st, 2nd, 3rd)	Current Level					
Performance against the Capital Resource Limit	Performance against plan monitored through Capital Monitoring Group with key internal stakeholders	1st						
	Operational prioritisation through Bronze Group using the operational risk and benefit matrix	1st						
	Performance Reports through to Capital, Estates and IM&T Sub-Committee	2nd						
	Finance Committee oversight of current performance	2nd						

ontrol RAG ating (what e assurance telling you about your controls	Latest Papers (Committee & date)
	Monthly Reports to Finance Committee on capital reporting the COVID risk

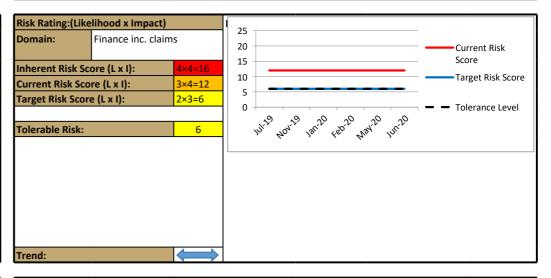
		Gaps in ASSUR	ANCES	
	How are the Gaps in ASSURANCE will be addressed Further action necessary to address the gaps	By Who	By When	Progress
None				

Capital Report to People,	2nd	l	-			
Planning and Performance		l	-			
Assurance Committee (2nd		l	-			
line,		]	ı	<b>! !</b>		
WG scrutiny through	3rd	ı	-			
monthly monitoring and		ı	-			
COVID capital returns		ı	-			
	1					

Date Risk	Sep-18
Identified:	
Strategic	Health Board objectives 20/21 to be confirmed.
Objective:	

Executive Director Owner:	Thomas, Huw	Date of Review:	Sep-20
Lead Committee:		Date of Next Review:	Oct-20

Risk ID:	646	<b>Principal Risk</b>	There is a risk the Health Board not achieving breakeven over the medium			
		Description:	term. This is caused by the inability to either:			
			1. Develop a sufficiently robust financia	l plan which shows an achievable		
			improvement trajectory,			
			2. Manage the impact of the COVID-19	pandemic within available funding,		
			3. Manage the impact on the underlying	3. Manage the impact on the underlying deficit of resulting non-delivery of		
			the recurrent savings requirement,			
			4. Recover the unmet demand arising as a result of actions taken and the			
			financial implications, especially regarding RTT and Mental Health, or			
			5. Identify and implement opportunities in such a way that the financial gains			
			are realised and an improvement trajectory is achieved.			
			This could lead to an impact/affect on a	significant long term detrimental		
			impact on the Health Board's financial s	sustainability.		
Does this	risk link	to any Director	rate (operational) risks?	Corporate risk		



### Rationale for CURRENT Risk Score:

The Health Board has not developed a full long term financial base-case model, which can then be used to assess the impact of A Healthier Mid and West Wales and other medium term changes. The Health Board's underlying deficit also requires further work to fully explore and understand the opportunities for improvement which can be realised over the medium term. The forecast financial impact of COVID-19 on the underlying position is currently informed by limited modelling intelligence due to the early stages of the pandemic and the multitude of unknown variables inherent in such a situation.

## Rationale for TARGET Risk Score:

Achieving financial balance on a three-year rolling basis is a statutory requirement for the Board, and a clear requirement from the Board and Welsh Government.

	Gaps in CONTRO	LS		
Identified Gaps in Controls: (Where one or more of the key controls on which the organisation is relying is not effective, or we do not have evidence that the controls are	How and when the Gap in control be addressed Further action necessary to address the controls gaps	By Who	By When	Progress
Actions in response to external review of underlying deficit calculation largely superseded by necessary shift in focus in response to COVID-19.  Assessment of impact of COVID-19 on underlying deficit not yet undertaken.		Thomas, Huw	31/07/2020 31/10/2020	Reviews have been undertaken, however operational and clinical focus continues to be on service management and prioritisation of patient care. The Q3&4 Operational Plan will re-prioritise formalising schemes as appropriate.
Assessment not subject to planning scrutiny.  Development of the Opportunities Framework, Savings Framework and Value for Money Framework.	Assessment refreshed to quantify likely impact of COVID-19 on the underlying deficit, focusing on both the adverse impact such as non-delivery of recurrent savings, and the opportunities arising due to service changes in response to COVID-19.	Thomas, Huw	30/09/2020	Early assessments are being conducted as part of the forecasting process, however the fluidity of the situation as the pandemic evolves provides limited information as a basis at this time.
Early development of three-year Financial Plan.	Refine the Frameworks and embed these into the monthly reporting and Committee cycles as appropriate.	Thomas, Huw	Completed	Existing Frameworks have been refined and are now embedded into the reporting and Committee cycles.
	Early iterations of the three-year Financial Plan for discussion at Finance Committee.	Thomas, Huw	30/09/2020	A Principles Paper and timetable have been completed and will be shared with the Finance Delivery Unit (FDU) for feedback in September 2020. Alignment of the operational planning and financial planning cycles is underway. A monthly reporting cycle is in place to the Finance Committee.

ASSURANCE MAP				Control RAG	Latest Papers		Gaps in ASSURANCES				
Performance Indicators	Sources of ASSURANCE Type of Assurance Assurance (1st, 2nd, Curre	Required Assurance Current Level	d Rating (what the assurance is telling you	(Committee & date)	in Assurance:	How are the Gaps in ASSURANCE will be addressed Further action necessary to address the gaps	By Who	By When	Progress		
	Reporting to Finance Committee .	1st			N/A	None					
Welsh Government accepting of impact of COVID- 19 on underlying deficit.											
Plan in place to develop a long term financial plan.											
High level financial assessment of A Healthier Mid and West Wales in place.											