PWYLLGOR CYLLID FINANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 February 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Operational Risk Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Director of Finance

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)
Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA SBAR REPORT

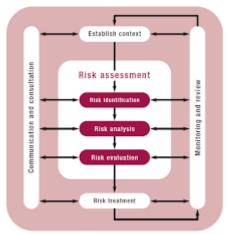
Sefyllfa / Situation

The Finance Committee is responsible for providing assurance to the Board that risks affecting finance are being identified, assessed and managed effectively.

The Committee is asked to seek assurance from Lead Officers/ representatives of the Directorates that the operational risks identified in the attached reports are being managed effectively.

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 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, formal monitoring and scrutiny processes are in place within Hywel Dda

University Health Board (HDdUHB) to provide assurance to the Board that risks are being managed effectively.

All risks identified within the Datix Risk Module must be assigned to a formal Board Committee, Sub-Committee or Group which will be responsible for securing assurance that risks within their remit are being managed effectively. Appendix 1 shows the different levels of Risk Registers within HDdUHB. Appendix 2 shows how risk is reported within the Health Board.

A monthly reminder is circulated to Management Leads requesting that risk assessments and risks actions are reviewed and updated in line with the following timescales for review:

	DEFINITION	MINIMUM REVIEW FREQUENCY
15-25	Extreme	This type of risk is considered extreme and should be reviewed and progress on actions updated at least monthly.
8-12	High	This type of risk is considered high and should be reviewed and progress on actions updated at least bi-monthly.
4-6	Moderate	This type of risk is considered moderate and should be reviewed and progress on actions updated at least every six months.
1-3	Low	This type of risk is considered low risk and should be reviewed and progress on actions updated at least annually.

In monitoring the risks associated with their respective areas of activity, each Committee, Sub-Committee and Group 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 actions to mitigate risk;
- Identifying, through discussions, new and emerging risks and ensuring these are assessed by those with the relevant responsibility;
- Providing assurance to its parent Committee, or to the Board, that risks are being managed effectively and reporting risks which have exceeded tolerance through its Committee/ Sub-Committee/ Group Update Report;
- Using Risk Registers to inform meeting agendas.

It is therefore essential that the membership of these Committees and Sub-Committees includes appropriate representation from Directorates, and that they are in attendance to provide assurance and to respond to gueries.

Relevant discussion should be reflected in the Finance Committee Update Report to the Board to provide assurance on the management of significant risks. This will include risks that are not being managed within tolerance levels (see <u>Risk Appetite Statement</u>), and any other risks, as appropriate.

Asesiad / Assessment

The Finance Committee's Terms of Reference state that it will:

 Seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) allocated to the Committee (financial risks), and provide assurance to the Board that risks are being managed

- effectively, reporting any areas of significant concern e.g. where risk appetite is exceeded, lack of timely action.
- Consider and keep under review the organisation's medium-term financial strategy in relation to both revenue and capital risks.

The 15 risks presented in the attached Risk Register (Appendix 3) as at 8th February 2021 have been extracted from Datix, based on the following criteria:

- The Finance Committee has been selected by the Risk Lead as the 'Assuring Committee' on Datix:
- The <u>current</u> risk score exceeds the tolerance level, as discussed and agreed by the Board on 27th September 2018;
- Risks have been approved at Directorate level on Datix;
- Risks have not been escalated to the CRR.

All 15 risks have been scored against the Finance, including Claims 'impact' domain.

Below is a **summary** of the 15 risks, ranked highest to lowest by current score, which meet the criteria for submission to the Finance Committee on 25th February 2021.

TOTAL NUMBER OF RISKS	15					
NEW RISKS ENTERED ON DATIX	0					
INCREASE IN CURRENT RISK SCORE ①	0					
NO CHANGE IN RISK SCORE ⇔	15					
REDUCTION IN RISK SCORE ↓	0					
REMOVED RISKS	0					
EXTREME (RED) RISKS (based on 'Current Risk Score')	2					
HIGH (AMBER) RISKS (based on 'Current Risk Score')						

The summary table below has been extracted from the Datix system:

Risk Ref	Date Risk Identified	Title	Directorate	Current Risk Score	Rationale for the Current Risk Score	Target Risk Score
974	01/05/20	Failure to remain within allocated budget in the current financial year 2020/21	Estates and Facilities	16	Accountability statements in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic.	9
525	18/06/18	Scheduled care financial pressure due to continuation of the Bronglais General Hospital (BGH) theatres compensatory rest policy.		16	This is now being dealt with via the HR process. Further work with the support of HR is being undertaken. Date for resolution is now uncertain.	4
958	01/09/20	Failure to remain within allocated budget over the	Scheduled Care	12	Assessment refreshed to quantify likely impact of COVID-19 on the underlying	4

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		medium term (Scheduled Care).		⇔	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.	
970	01/05/20	Failure to remain within allocated budget in the current financial year 2020/21 (MH&LD).	Mental Health and Learning Disabilities	12		4
971	01/05/20	Failure to remain within allocated budget over the medium term (MH&LD).	Mental Health and Learning Disabilities	12	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.	4
134	08/01/15	HB wide, financial loss arising from inability to trace potentially contaminated surgical instruments.	Central Operations	10	There is no system currently available on the market to track supplementary instruments on an individual basis.	10
964	03/08/20	Failure to remain within allocated budget over the medium term (Carmarthenshire).	Three Counties: Carmarthen- shire	9 🚓		6
966	03/08/20	Failure to remain within allocated budget over the medium term (Medicines Management).	Primary, Community and Long Term Care	9		6
967	03/08/20	Failure to remain within allocated budget over the medium term (P,C<C).	Primary, Community and Long Term Care	9		6
968	03/08/20	Failure to remain within allocated budget over the medium term (Pembrokeshire).	Three Counties: Pembroke- shire	° 🛟		6
977	01/07/20	Failure to remain within allocated budget over the medium term (PPH).	Unscheduled Care: Prince Philip Hospital	9 🚓		6
979	01/07/20	Failure to remain within allocated budget over the medium term (GGH).	Unscheduled Care: Glangwili General Hospital	9		6
980	01/07/20	Failure to remain within allocated	Unscheduled Care:	9	Assessment refreshed to quantify likely impact of	6

		budget over the medium term (WGH).	Withybush General Hospital	\$	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.	
972	01/05/20	Failure to remain within allocated budget in the current financial year 2020/21 (Central Operations).	Central Operations: Directorate Team	8		12
516	27/05/16	Health Board-wide risk regarding VAT advice on historic Design for Life Schemes is incomplete.	Finance	8	KPMG are currently in discussion with HMRC about the treatment of the VAT on the FOH Final Account. HMRC's response will dictate whether or not KPMG will be required to undertake further detailed analysis on our behalf on this scheme. HMRC response expected early 2021.	8

The Risk Register at Appendix 3 details the responses to each risk, i.e. the Risk Action Plan.

Finance Business Partners are supporting Service and Directorate management to manage their financial risks, therefore the Finance 'themed' Risk Register will no longer be reported to the Finance Committee.

Argymhelliad / Recommendation

The Finance Committee is asked to:

- Review and scrutinise the risks included within this report to seek assurance that all relevant controls and mitigating actions are in place.
- Discuss whether the planned action will be implemented within stated timescales and will reduce the risk further and/ or mitigate the impact, should the risk materialise.

This in turn will enable the Committee to provide the necessary assurance to the Board that these risks are being managed effectively.

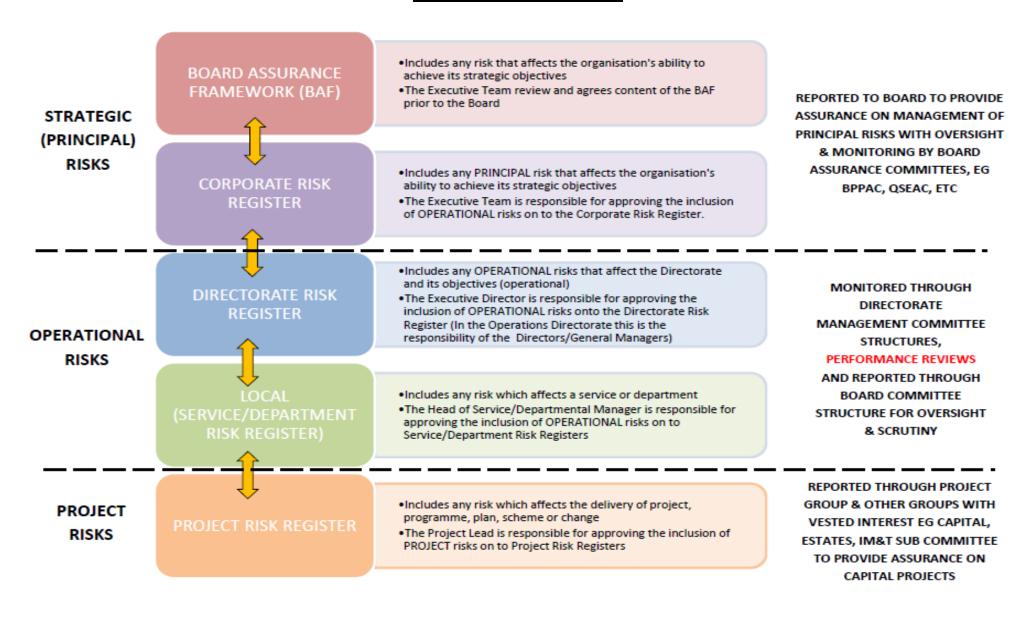
Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.3 Seek assurance on the management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee (financial risks), and provide assurance to the Board that risks are being managed effectively and that any areas of significant concern are reported e.g. where risk appetite is exceeded, or where there is a lack of timely action.

Cyfeirnod Cofrestr Risg Datix a Sgôr	Contained in the report
Cyfredol:	
Datix Risk Register Reference & Score:	
Safon(au) Gofal ac lechyd:	All Health & Care Standards Apply
Health and Care Standard(s):	
Amcanion Strategol y BIP:	All Strategic Objectives are applicable
UHB Strategic Objectives:	
Amcanion Llesiant BIP:	Not Applicable
UHB Well-being Objectives:	

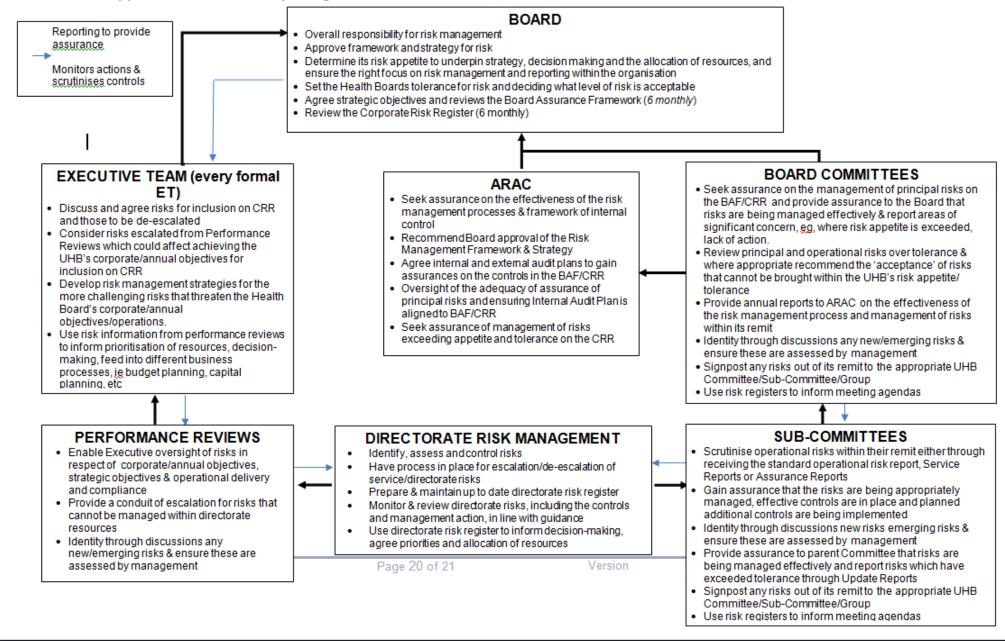
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Underpinning risk on the Datix Risk Module from across HDdUHB's services, reviewed by risk leads/owners
Rhestr Termau: Glossary of Terms:	Risk Appetite - the amount of risk that an organisation is willing to pursue or retain' (ISO Guide 73, 2009) Risk Tolerance - the organisation's readiness to bear a risk after risk treatment in order to achieve its objectives (ISO Guide 73, 2009)
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cyllid: Parties / Committees consulted prior to Finance Committee:	Not Applicable although Risk Registers are submitted to Performance Reviews.

Effaith: (rhaid cwblhau)	
Impact: (must be completed)	
Ariannol / Gwerth am Arian:	No direct impacts from report however impacts of each risk
Financial / Service:	are outlined in risk description.
Ansawdd / Gofal Claf:	No direct impacts from report however impacts of each risk
Quality / Patient Care:	are outlined in risk description.
Gweithlu:	No direct impacts from report however impacts of each risk
Workforce:	are outlined in risk description.
Risg:	No direct impacts from report however organisations are
Risk:	expected to have effective risk management systems in
	place.
Cyfreithiol:	No direct impacts from report however proactive risk
Legal:	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:	Poor management of risks can lead to loss of stakeholder
Reputational:	confidence. Organisations are expected to have effective risk
	management systems in place and take steps to reduce/
	mitigate risks.
Gyfrinachedd:	No direct impacts from report however impacts of each risk
Privacy:	are outlined in risk description.
Cydraddoldeb:	Has EqIA screening been undertaken? No
Equality:	Has a full EqIA been undertaken? No

Appendix 1 - Risk Registers



14. Appendix 2 Committee reporting structure



Risk Ref	Status of Risk	Health and Care Standards	Directorate	Directorate lead	Management or service lead	Date risk Identified	Date Hay 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	Detailed Risk Decision	Review date
974	Directorate Level Risk		E&F: Directorate Team	Elliott, Rob	Popham, Leon			Directorate's financial position may be adversely affected. This is caused by current indications	Timely financial reporting, including local costs incurred in response to the COVID-19 pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Opportunities Framework, refreshed to identify alternative ways of working in response to COVID-19 that may result in cost reductions/formal savings schemes identified.	Finance inc. claims	6	4	4	16	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders.	Popham, Leon Popham, Leon	31/12/2020 31/01/2021	A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022. A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022.	Finance Col	3	3	9	Treat	15-Dec-20
525	Directorate Level Risk	Standard 7.1 Workforce	Scheduled Care: Theatres	Hire, Stephanie	Knight: Diane	2		There is a risk of financial pressure for the department through both payments and the requirement for an increased nursing and Operating Department Practitioners (ODP) workforce to provide safe staffing levels. This is caused by the site specific policy for compensatory rest following on-call weekend shifts. This will lead to an impact/affect on the financial sustainability of the service. Safe staffing levels through pressure to recruit a larger workforce. Risk location, Bronglais General Hospital.	Maintenance of current model of compensatory rest, which contradicts Agenda for Change agreements as identified by the Internal Audit review of theatres.	Finance inc. claims	6	4	4	16	SBAR for removal of compensatory rest has been submitted for review by the Nursing Directorate. Implementation plan following the Executive decision to be drafted and agreed with the BGH Theatre team and TU reps.	ē	28/12/2018 30/04/201 31/10/202	Discussed at Executive Team meeting 2/5/18; 25/7/18. No agreement with SCRUB team on changes. OCP has been concluded. Still awaiting decision of this process, currently with Director of Operations. Delayed because of Covid-19.	Finance Committee	1	4	4	Treat	03-Nov-20

Risk Ref	Status of Risk	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	Detailed Risk Decision	Review date
896	Directorate Level Risk		Scheduled Care	Hire, Stephanie	Binding, Daniel	01-Sep-20	There is a risk of the Scheduled Care Directorate failing to remain within their allocated budget over the medium term. This is caused by the inability to either: 1. Identify and deliver robust and realistic recurrent savings plans, 2. Manage the impact of the COVID-19 pandemic within available funding, 3. Manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or, 4. Identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved.	COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating	Finance inc. claims	6	3	4	12	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders 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,	Binding, Daniel Binding, Daniel	Completed 31/12/2020 31/03/2022	A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022 Completed	Finance Cor	2	2	4	Treat	10-Sep-20
970	Level Risk		MHLD	Mrs Li	ı, Leon	01-May-20	This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financial sustainability. Risk location, Health Board wide. There is a risk of that the funding arrangements for the Health Board's COVID-19 pandemic response	Timely financial reporting, including local costs incurred in response to the COVID-19 pandemic.	. claims	6	3	4	12	and the opportunities arising due to service changes in response to COVID-19. A 3-year financial training programme is being developed for budget holders as part of the	am, Leon	1/01/2021	A reporting Dashboard for financial information has been achieved. Work in underway to	nmittee	1	4	4	Treat	15-Dec-20
	Directorate Lev			Carroll,	Popham,	-10	remain uncertain, and therefore a risk that the Health Board's and therefore Directorate's financial position may be adversely affected. This is caused by current indications that the costs of addressing our local needs may exceed funding available from these sources. This will lead to an impact/affect on the delivery of local savings schemes for 2020/21 due to the ongoing work in response to the pandemic. Also result in a risk of the Directorate failing to remain within their allocated budget for the 2020/21 financial year. This could lead to an impact on the Health Board's reputation with Welsh Government and other stakeholders. Risk location, Health Board wide.	Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Opportunities Framework, refreshed to identify alternative ways of working in response to COVID-19 that may result in cost reductions/formal savings schemes identified.	Finance inc					Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders. Ensure Accountability statements in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic.	Popham, Leon Popha	31/12/2020 31/01/202	include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022	Finance Co					15.

Risk Ref	Status of Risk	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	Detailed Risk Decision	
														Risk Register will be a standing agenda item at BP&PAG on a bimonthly basis. End of month meeting with Directorate Finance Business Partner, KPI meetings and individual Head of Service meetings will also be forums for monitoring the position and informing and managing the forecast.	Carroll, Mrs Liz	31/03/2021	New action.						
971	Directorate Level Risk		MHLD	Carroll, Mrs Liz	Popham, Leon	01-May-20	There is a risk of the MH&LD Directorate failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans. Manage the impact of the COVID-19 pandemic within available funding. Manage the impact on the underlying deficit of resulting non-delivery of the	Understanding the underlying deficit. A pre-COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions.	Finance inc. claims	6	3	4	12	Risk Register will be a standing agenda item at BP&PAG on a bimonthly basis. End of month meeting with Directorate Finance Business Partner, KPI meetings and individual Head of Service meetings will also be forums for monitoring the position and informing and managing the forecast.	Carroll, Mrs Liz	31/03/2021	New action.	Finance Committee	1	4	4	Treat	
							recurrent savings requirement. Identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved. This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financial sustainability. Risk location, Health Board wide.							A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders.	Popham, Leon		A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022						

Risk Ref	Status of Kisk Health and Care Standards	eaith and Care Standards	Directorate	Directorate lead	nagement 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	Detailed Risk Decision	Review date
	Directorate Level Kisk		Central Operations: HSDU	Rees, Gareth	Flear, Philip M	08-Jan-15	There is a risk of needing to destroy large numbers of surgical instruments following suspected prion contamination arising during invasive procedures. This is caused by the inability to be able to mark individual instruments to enable them to be tracked and traced through the decontamination processes as there is no instinctually reliable system available on the market. This will lead to an impact/affect on an inability to trace instruments should a look back exercise be required e.g. possible patient infection. Unable to defend possible litigation claims. In the event of detected contamination all similar instruments will need to be destroyed with consequential financial impacts. Risk location, Health Board wide.	Supplementary instruments are colour coded to allow the surgical speciality to be identified; Where the same supplementary instrument is used for the same procedure, these have been added to the relevant instrument sets; Stock of supplementary instruments within theatres have been reduced and continue to be monitored with the aim of reducing further; Single use instruments are used where available; All Wales Group representing organisation;	Finance inc. claims	6	2	5	10	HSDU management to continue reviewing new technologies which could possible mitigate this risk. Discuss with other Health Boards in England to establish how others are approaching this challenge. Continue to review technology for an acceptable resolution. Head of HSDU attending All Wales Group to identify a Wales wide approach.	ear, Philip Flear,)20 Completed 13/06/20	Currently there is no systems being within current knowledge and invention to do so safely. Regular update of no progress since 2018. No further update as of June 2020. No further update. 14.12.20 No further update. Discussed with other health boards and with Hospital Sterilisation and Decontamination Unit (HSDU) management from Derriford, who have etch marked their single instruments. However this is against manufacturer's warranty procedures. No suitable system in place to mitigate this risk as at August 2017. Update 13.08.18 - No further update. 23.10.18 Intend visiting to view a system to be updated in December of any progress. Update 27.12.18 Visit took place system on trial in enabling health board will review results in 3 months time. There is no instinctually reliable system available on the market. No further update. 14.12.20 No further update.	Finance Comm	2	5	10	Treat	14-Dec-20

Risk Ref	Status of Risk	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	Detailed Risk Decision	Review date
964	Directorate Level Risk		3 Counties: Carmarthenshire	Dawson, Rhian	Billen, Janine	03-Aug-20	failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans, manage the impact of the COVID-19 pandemic within available funding, manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or, identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved.	Understanding the underlying deficit. A pre-COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Finance Business Partners review with Directorate the opportunities from the framework during 20-21. Health Systems Evaluation Meetings with Director of Finance.	Finance inc. claims	6	3	3	9	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders.	Ċ,	31/12/2020 31/01/2021	A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022.	Finance Committee	3	2	6	Treat	11-Dec-20
							This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financial sustainability. Risk location, Health Board wide.							Assessment refreshed to quantify likely impact of COVID-19 on the underlying deficit for FY22, 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. This we can tick off as part of the IMTP process.	Billen, Janine	Completed	Achieved						
996	Directorate Level Risk	Standard 2.1 Managing Risk and Promoting Health and Safety	P,C,LTC: Medicines Management	Pugh-Jones, Jenny	Jarman, Carwen	03-Aug-20	failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans, manage the impact of the COVID-19 pandemic within available funding, manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or, identify and implement opportunities	Understanding the underlying deficit. A pre-COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Finance Business Partners review with Directorate the opportunities from the framework during 20-21.	Finance inc. claims	6	3	3		A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders. 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	man, Carwen Jarman, Carw	31/12/2020	new action	Finance Committee	3	2	6	Treat	16-Dec-20

Date: February 2021

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Risk Ref	Status of Risk	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	Detailed Risk Decision	Review date
296	Directorate Level Risk		P,C,LTC: Primary Care	Bond, Rhian	Jones, Keith	03-Aug-20	There is a risk of the Directorate failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans. Manage the impact of the COVID-19 pandemic within available funding. Manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or Identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved. This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financia sustainability. Risk location, Health Board wide.	Finance Business Partners review with Directorate the opportunities from the framework during 20-21.	Finance inc. claims	6	3	3	9	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders. 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.	Jones,		A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022. Achieved.	Finance Committee	3	2	6	Treat	29-Dec-20
896	Directorate Level Risk		3 Counties: Pembrokeshire	Lorton, Elaine	Jones, Keith	03-Aug-20	There is a risk of of the Directorate failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans, manage the impact of the COVID-19 pandemic within available funding, manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or, identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved. This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financia sustainability. Risk location, Health Board wide.	completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Finance Business Partners review with Directorate the opportunities from the framework during 20-21. Health Systems Evaluation Meetings with Director of Finance.	Finance inc. claims	6	3	3	9	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. 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.	Jones,		A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022. Achieved.	Finance Committee	2	3	6	Treat	29-Dec-20

Risk Ref	Status of Risk	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	Detailed Risk Decision	Review date
226	Directorate Level Risk		USC: PPH	Denning, Brett	Billen, Janine	01-Jul-20	failing to remain within their allocated budget over the medium term. This is caused by the inability to either: Identify and deliver robust and realistic recurrent savings plans, manage the impact of the COVID-19 pandemic within available funding, manage the impact on the underlying deficit of resulting non-delivery of the recurrent savings requirement, or, identify and implement opportunities in such a way that the financial gains are realised and an improvement trajectory is achieved.	Understanding the underlying deficit. A pre-COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Finance Business Partners review with Directorate the opportunities from the framework during 20-21. 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.	Finance inc. claims	6	3	3	9	Develop a 3-year financial training programme for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and non-financial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders. Work with County Director and Primary Care to review high users of the services in PPH to quantify impact of social needs and or GP cluster behaviours. Review with Health System and through integrated partnership working avenue of opportunities' to pursue to reduce cost base and maintain capacity and ensure patient safety and improved outcomes. Assessment refreshed to quantify likely impact of COVID-19 on the underlying deficit for FY22, 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. This we can tick off as part of the IMTP process.	Billen, Janine Billen, Janine Billen, Janine		A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022. new action Achieved.	Finance Cor	3	2	6	Treat	11-Dec-20

	Health and Care Standards	Health	USC: GGH Directorate	Perry, Sarah Directorate lead	Billen, Janine Management or service lead	01-Jul-20 Date risk Identified	There is a risk of the GGH Directorate failing to remain within their allocated budget over the medium term. This is caused by inability to either: 1. Identify and deliver robust and realistic recurrent savings plans,	Understanding the underlying deficit. A pre-COVID-19 assessment has been completed, which will need to be reviewed in light of the impact of the pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is	Finance inc. claims Domain	Ris	Cur	ယ Current Impact	Current Risk Score	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan.	ine	/12/2020 3	A reporting Dashboard for financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in	nittee	ධarget Likelihood	N Target Impact	O) Target Risk Score	Treat Detailed Risk Decision	14-Dec-20 Review date
Q							2. Manage the impact of the COVID-19 pandemic within available funding,3. Manage the impact on the underlying deficit of resulting non-	sufficient focus on the financial implications of operational pressures and mitigating actions. Finance Business Partners review with Directorate the opportunities from the framework during 20-21.						A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders.	Billen, Janine	Completed	31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03/2022. Complete.						
							Risk location, Health Board wide.							Assessment refreshed to quantify likely impact of COVID-19 on the underlying deficit for FY22, 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. 4.Work with County Director and Primary Care to review high users of the services in PPH to quantify impact of social needs and / or GP cluster behaviours. Review with Health System and through integrated partnership working avenue of opportunities' to pursue to reduce cost base and maintain capacity and ensure patient safety and improved outcome.	Ϊ́Β	31/12/2020 Completed	Achieved. New actions.						

COVID-19.

Pick Bof	Jaid to autor?	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	Detailed Risk Decision	Review date
620			Central Operations: Directorate Team	Rees, Gareth	Popham, Leon	01-May-20	There is a risk of that the funding arrangements for the Health Board's COVID-19 pandemic response remain uncertain, and therefore a risk that the Health Board's and therefore Directorate's financial position may be adversely affected. This is caused by current indications that the costs of addressing our local needs may exceed funding available from these sources. This will lead to an impact/affect on the delivery of local savings schemes for 2020/21 due to the ongoing work in response to the pandemic. Also result in the Directorate failing to remain within their allocated budget for the 2020/21 financial year. This could lead to an impact/affect the Health Board's reputation with Welsh Government and other stakeholders. Risk location, Health Board wide.	Timely financial reporting, including local costs incurred in response to the COVID-19 pandemic. Finance Business Partners work closely with budget holders to support informed decision making and ensure that there is sufficient focus on the financial implications of operational pressures and mitigating actions. Opportunities Framework, refreshed to identify alternative ways of working in response to COVID-19 that may result in cost reductions/formal savings schemes identified.	Finance inc. claims	6	2	4	8	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. A reporting dashboard is under development to improve the accessibility to financial and nonfinancial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more informed decision making by budget holders. Accountability statements in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic	Popham, Leon Popham,	31/12/2020 31/01/2021 31/12/2020 31/01/2021 31/12/2020 31/01/2021	A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022. A reporting Dashboard for financial information has been achieved. Work in underway to include non-financial information also into the monthly Finance Dashboard to a plan, and this is currently scheduled for completion in 31/01/2021. The training programme was initially paused due to essential financial work due to Covid response and will be picked up and refined with an estimate delivery date of 03 / 2022. New action.	Finance Col	4	3	12	Treat	15-Dec-20

and Joid	Status of Risk	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			By When	Progress Update on Risk Actions		Target Likelihood	Target Impact	Target Risk Score	Detailed Risk Decision Review date	
	Directorate Level Risk		Finance	Thomas, Huw	Davies, Rhian	27-May-16	This is caused by difficulty in	This contract is managed by NHS Shared Services on behalf of Welsh Government. Welsh Government are informed through Capital Review Meetings. It is likely any issues will be funded by Welsh Government as they arise from an all Wales VAT advice contract.	Finance inc. claims	6	4	2	8	Work with Shared Services and the HB's VAT advisors to resolve the older D4L schemes.	/ Eve, David (Inacti	30/09/2017 31/01/2019 Complet 30/09/2019	For new D4L schemes the VAT advisory work will be undertaken by the HB current VAT advisors. The issue for new D4L schemes is resolved. Outstanding matters on all but one of the older D4L schemes have been resolved. Only the Bronglais Front of House scheme remains. A provisional VAT recovery position has been reached and HMRC has been asked by the HB to accept the provisional position as final. If HMRC do not accept, a final detailed VAT recovery analysis will need to be performed and approved by HMRC. A response from HMRC is expected in early 2021. KPMG LLP are supporting the HB with current correspondence with HMRC.	Finance Committe	4	2	8	Treat 20-Jan-21	