PWYLLGOR CYLLID FINANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 May 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

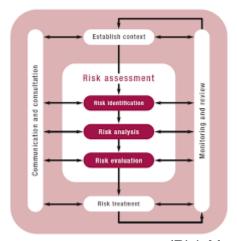
Sefyllfa / Situation

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 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, 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 queries.

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 Risk Appetite Statement), 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 11 risks presented in the attached Risk Register (Appendix 3) as at 7th May 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 11 risks have been scored against the Finance, including Claims 'impact' domain.

Below is a **summary** of the 11 risks, ranked highest to lowest by current score, which meet the criteria for submission to the Finance Committee on 25th May 2021.

TOTAL NUMBER OF DICKS	11
TOTAL NUMBER OF RISKS	11
NEW RISKS ENTERED ON DATIX	0
INCREASE IN CURRENT RISK SCORE ① 975 – Risk was previously below tolerance, but risk score increased from 2 to 10 in April 2021 and now reportable to the Committee 983 - Risk was previously below tolerance, but risk score increased from 6 to 9 in April 2021 and now reportable to the Committee	2
NO CHANGE IN RISK SCORE ⇔	9
REDUCTION IN RISK SCORE ↓	0
REMOVED RISKS 974 – Risk related to financial year 2020/21 therefore closed, with new risk to be written for financial year 2021/22 970 - Risk related to financial year 2020/21 therefore closed, with new risk to be written for financial year 2021/22 525 – Risk has been reassigned to OQSESC 134 - Risk has been reassigned to OQSESC 977 – Risk closed by General Manager of Prince Philip Hospital in February 2021 as the site had underspent for the year 972 - Risk related to financial year 2020/21 therefore closed, with new risk to be written for financial year 2021/22	6
EXTREME (RED) RISKS (based on 'Current Risk Score')	0
HIGH (AMBER) RISKS (based on 'Current Risk Score')	11

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
958	01/09/20	Failure to remain within allocated budget over the medium term (Scheduled Care).	Scheduled Care	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	4

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					due to service changes in response to COVID-19.	
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
975	01/05/20	Failure to remain within allocated budget over the medium term (Estates & Facilities).	Estates and Facilities: Directorate Team	10 NEW	Finance Business Partners continue to work with the Estates team, however the risk score has been recently increased as an additional cleaning standards costing £3m is required. Currently awaiting WG funding decision.	
979	01/07/20	Failure to remain within allocated budget over the medium term (GGH).	Unscheduled Care: Glangwili General Hospital	9	No rationale added in Datix.	6
980	01/07/20	Failure to remain within allocated budget over the medium term (WGH).	Unscheduled Care: Withybush General Hospital	9 🚓	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.	5
964	03/08/20	Failure to remain within allocated budget over the medium term (Carmarthenshire).	Three Counties: Carmarthen- shire	9	No rationale added in Datix.	6
966	03/08/20	Failure to remain within allocated budget over the medium term (Medicines Management).	Primary, Community and Long Term Care	9	The national agreed price per item increases and item demand / growth continues to drive the financial liability for Medicines Management, mainly within Primary Care prescribing. Category M price increase announced from January 2021 with additional cost pressure of £0.5m in FY21 year.	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	No rationale added in Datix.	6
968	03/08/20	Failure to remain within allocated budget over the	Three Counties:	9	No rationale added in Datix.	6

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		medium term (Pembrokeshire).	Pembroke- shire	⇔		
983	22/07/21	Failure to remain within allocated budget over the medium term (BGH).	Unscheduled Care: Bronglais General Hospital	9 NEW	The change in score reflects the financial forecast undertaken in April 2021, which reflects the estimated pressures around maintaining capacity within Bronglais. Mitigating actions are being pursued with the bid for SDEC and interaction with Community urgent care proposals that will impact positively on the pressures and capacity requirement in BGH.	3
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 responded in March 2021 requesting a timescale for submission of the Final Claim for the scheme so that they can approve a final recovery percentage and adjust for the whole life of the scheme. KPMG have produced a response, to be sent to HMRC early May, setting out alternative proposals with a view to reaching a compromise agreement.	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.

The Finance Directorate, through its business partnership arrangements, is finalising the risk assessments in regard to the failure to remain within allocated budget in the current financial year (2021/22) and will work with appropriate operational services to ensure these risks are reflected on their Risk Registers and are allocated the appropriate support to manage them effectively.

The table below shows when risks assigned to the Finance Committee were last updated within 3 month timeframes. These risks are assigned to the Finance Committee (18 risks), regardless of whether they meet the criteria set out on page 3 of this SBAR.

	Risk updated within last 0-3 months	3-6 Risk updated within last months	Risk updated within last 6-9 months
Directorate Level risk	50%	22%	0%
Service Level risk	11%	6%	11%

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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.

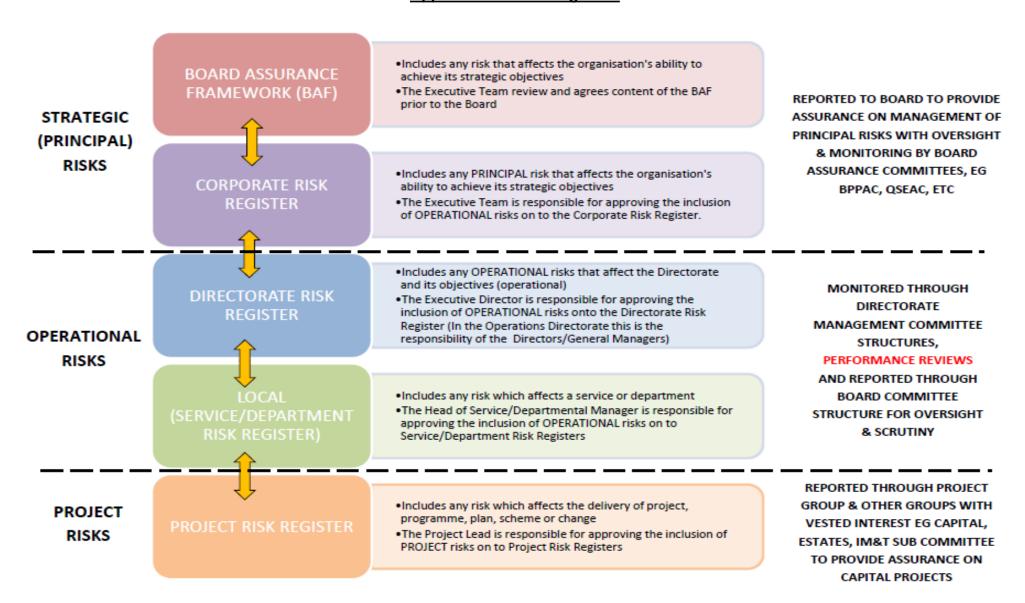
Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.3 Seek assurance on the management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee (financial risks), and provide assurance 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 Cyfredol: Datix Risk Register Reference and Score:	Contained in the report
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Not Applicable

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
Financial / Service:	risk are outlined in risk description.
Ansawdd / Gofal Claf:	No direct impacts from report however impacts of each
Quality / Patient Care:	risk are outlined in risk description.
Gweithlu:	No direct impacts from report however impacts of each
Workforce:	risk 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
Reputational:	stakeholder 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
Privacy:	risk are outlined in risk description.
Cydraddoldeb:	Has EqIA screening been undertaken? No
Equality:	Has a full EqIA been undertaken? No

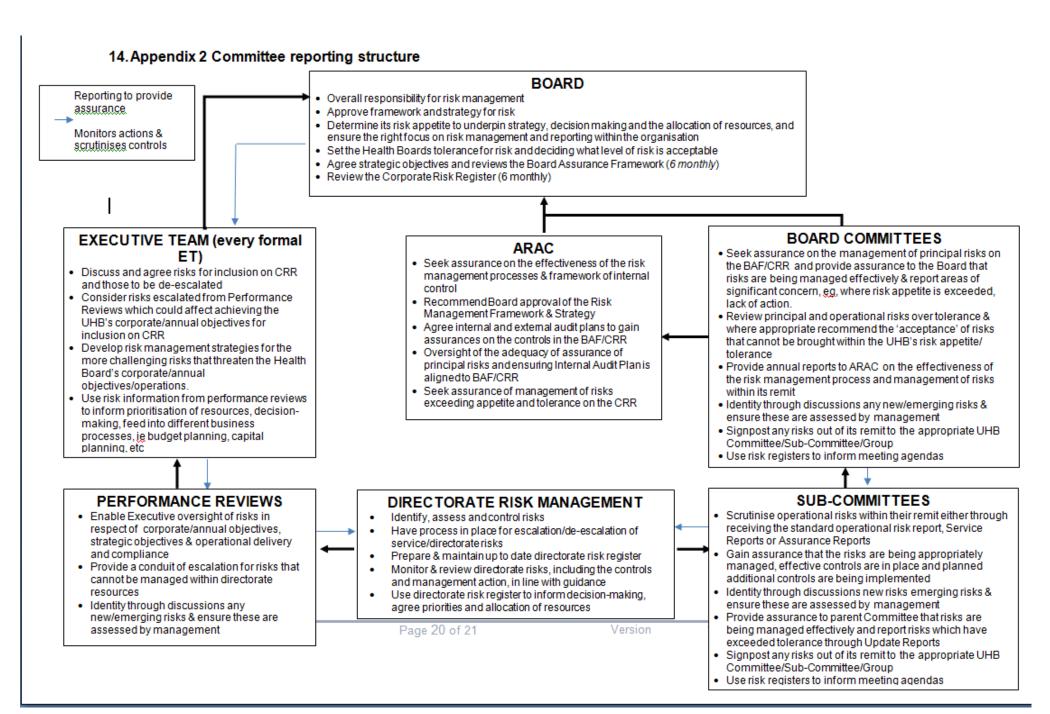
Appendix 1 - Risk Registers



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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
958	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. 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.	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 are working closely with the operating team to understand the directorates COVID costs, and proactivitly managing these costs to ensure there is clear understanding of the choices to be made to stop these costs from being incurred Recovery plans in the medium term will require additional funding if previous RTT type metrics are to be instated	Finance inc. clair	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, and the opportunities arising due to service changes in response to COVID-19.	g,	/12/20	A reporting Dashboard for financial information has been achieved. 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	8	2	2	4	Treat	07-mai-21
1/26	Directorate Level Risk		MHLD	Carroll, Mrs Liz	Popham, Leon	01-mai-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 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.	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. 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.	am	31/12/2020 31/03/2021 31/03/2021	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		1	4	4	Treat	01-mar-21

By Whom By When Lead Committee Target Likelihood Target Risk Score Target Risk Decision Review date	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
By	ram, Leon Popham, Lé
By Whom	Popham, Leon Popham
Additional Risk Action Required	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 non-financial information for budget holders and to allow a better understanding of cost drivers. This will facilitate better and more
Current Risk Score	10
Current Impact	5
Risk Tolerance Score	6 2
Domain	Finance inc. claims
Existing Control Measures Currently in Place	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.
tatement	is a risk of the Estates and ties Directorate failing to remain their allocated budget over the am term. Is caused by the inability to the inability and deliver robust and tic recurrent savings plans, nage the impact of the COVID-Indemic within available funding, nage the impact on the redying deficit of resulting non-intry of the recurrent savings ement, or, intify and implement tunities in such a way that the tial gains are realised and an vement trajectory is achieved. In the inability to the inability to the course of the coving plans, and the inability of the coving plans, and in the inability of the coving plans are realised and an vement trajectory is achieved.
Date risk Identified	01-mai-20
Management or service lead	Popham, Leon
Directorate lead	Elliott, Rob
Directorate	E&F: Directorate Team
Health and Care Standards	
Status of Risk	Directorate Level Risk
Risk Ref	975

Risk Ref	Status of Risk	Health and Care	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
979	Directorate Level Risk		USC: GGH	Perry, Sarah	Billen, Janine	01-jul-20		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	9	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan.	Billen, Janine	31/12/2020	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	14-des-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.							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	Complete.						
														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.		Completed	Achieved.						
														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.	Billen, Janine	31/12/2020	New actions.						
086	Directorate Level Risk		USC: WGH	Cole-Williams, Janice	Jones, Keith	01-jul-20	There is a risk of of the WGH 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	Understanding the underlying deficit. Work with budget holders to understand the impact of moving into a post Covid environment. 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	3	9	A 3-year financial training programme is being developed for budget holders as part of the Health Board's three year Plan. This will facilitate better and more informed decision making by budget holders.	Jones	31/12/202	A reporting Dashboard for financial information has been achieved. 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.	9	3	2	6	Treat	07-mai-21

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
							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.	actions. Finance Business Partners review with Directorate the opportunities from the framework during 21-22 incorporating the lessons form learned operating in the Covid environment. Health Systems Evaluation Meetings with Director of Finance.						Develop a reporting dashboard to improve the accessibility to financial and non-financial information for budget holders and to allow a better understanding of cost drivers.	nes, Ke	/12/	A reporting Dashboard for financial information has been achieved. 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.						
							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.	Jones, Keith	Completed	Achieved						
964	Directorate Level Risk		3 Counties: Carmarthenshire	Dawson, Rhian	Billen, Janine	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.	Health Systems Evaluation Meetings with	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.	Ĕ,	31/12/2020 31/0	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-des-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.	Director of Finance.						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, Jan	Completed	Achieved						

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
996		Standard 2.1 Managing Risk and Promoting Health and Safety	P,C,LTC: Medicines Management	Pugh-Jones, Jenny	Jarman, Carwen	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 financial sustainability. Risk location, Health Board wide.	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 2021-22.	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	Jarman, Carwen	Completed 31/12/2020 30/09/2021	The implementation of the training programme was put on hold during the pressured winter period, this has now been revisited and will need some revision and a programme of training shared and delivered for budget holders by 30th September 2021.	Finance Committee	3	2	6	Treat	06-mai-21
196	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 financial sustainability. Risk location, Health Board wide.	Finance Business Partners review with Directorate the opportunities from the framework during 21-22 incorporating the lessons form learned operating in the Covid environment.	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	31/12/20	A reporting Dashboard for financial information has been achieved. 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.	18	3	2	6	Treat	07-mai-21

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		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	Understanding the underlying deficit. Work with budget holders to understand the impact of moving to a post Covid environment. 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 21-22 incorporating the	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		31/12/20	A reporting Dashboard for financial information has been achieved. 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.	8	2	3	6	Treat	07-mai-21
							are realised and an improvement trajectory is achieved.	lessons learned operating in the Covid environment. Health Systems Evaluation Meetings with Director of Finance.						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, Ke	Completed							
886	Directorate Level Risk		USC: BGH	Davies, Hazel	Jarman, Carwen	22-jul-20	There is a risk of of the BGH 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-	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	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.	Jarman, Carwen	31/	The implementation of the training programme was put on hold during the pressured winter period, this has now been revisited and will need some revision and a programme of training shared and delivered for budget holders by 30th September 2021.	Finance Committee	3	1	3 tear	Treat	06-mai-21
							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. 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.	Directorate the opportunities from the framework during 2021-22.						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.	Jarman, Carwen	O	A draft Reporting Dashboard has been created for M6 Financial Reporting, and send to budget holder. Awaiting feedback from key finance users and service, before rolling our the full interactive Dashboard. No change to original action completion date.						

Health and Care Standards	0	Huw Directorate lead	Rhian Management or service	i-16 Date risk Identified	Risk Statement There is a risk of the Health Board	Existing Control Measures Currently in Place This contract is managed by NHS Shared	ims Domain	© Risk Tolerance Score	4 Current Likelihood	Current Impact	∞ Current Risk Score			eted By When	For new D4L schemes the VAT	ttee Lead Committee	5 Target Likelihood	7 Target Impact	○ Target Risk Score	Detailed Risk Deci	I-21 Review date	
	Finance	Thomas, H	Davies, Rł	27-mai-16	recovering an incorrect amount of VAT on advice given on historic and incomplete Design for Life Schemes. This is caused by difficulty in obtaining VAT advice from D4L nominated VAT advisor. This will lead to an impact/affect on the capital program with any incorrect or blocked VAT claims needing to be repaid. This may increase as final reviews are undertaken. Risk location, Health Board wide.	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. cla					Work with Shared Services and the HB's VAT advisors to resolve the older D4L schemes.	Thomas, Huw Eve, David (Inactive User)	30/09/2017 31/01/2019 Cont 30/09/2019 30/09/2020	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 reply from HMRC was received in March 2021. KPMG LLP are supporting the HB with preparing a response to HMRC with a view to reaching a compromise agreement.	Finance Commi				.	04-mai-21	

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