# Bundle Finance Committee 30 November 2020

### 2.1.4 Operational Risks

Presenter: Huw Thomas

2.1.4 Finance Operational Risk Register SBAR Nov 2020 (004) final.docx

2.1.4 Appendix 3 Finance Operational Risk Register.xlsx

# PWYLLGOR CYLLID FINANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 November 2020
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 Gvfer Trafodaeth/For Discussion

## ADRODDIAD SCAA SBAR REPORT

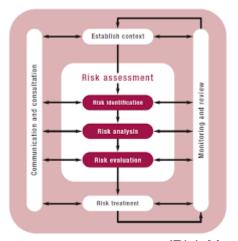
#### Sefyllfa / Situation

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/ Directorate representatives 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 <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 17<sup>th</sup> November 2020 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 27<sup>th</sup> 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 30th November 2020.

15
11
1
0
3
0
4
2
13

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 <b>NEW</b>	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	Scheduled Care	16	This is now being dealt with via the HR process. Further work with the support of HR	4

		Hospital (BGH) theatres compensatory rest policy.			is being undertaken. Date for resolution is now uncertain.	
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 <b>NEW</b>		4
971	01/05/20	Failure to remain within allocated budget over the medium term (MH&LD).	Mental Health and Learning Disabilities	12 <b>NEW</b>	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
958	01/09/20	Failure to remain within allocated budget over the medium term (Scheduled Care).	Scheduled Care	12 <b>NEW</b>	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
967	03/08/20	Failure to remain within allocated budget over the medium term (P,C&LTC).	Primary, Community and Long Term Care	9 <b>NEW</b>		6
964	03/08/20	Failure to remain within allocated budget over the medium term (Carmarthenshire).	Three Counties: Carmarthen- shire	9 <b>NEW</b>		6
977	01/07/20	Failure to remain within allocated budget over the medium term (PPH).	Unscheduled Care: Prince Philip Hospital	9 <b>NEW</b>		6
966	03/08/20	Failure to remain within allocated budget over the medium term (Medicines Management).	Primary, Community and Long Term Care	9 <b>NEW</b>		6
968	03/08/20	Failure to remain within allocated budget over the medium term (Pembrokeshire).	Three Counties: Pembroke- shire	9 <b>NEW</b>		6

979	01/07/20	Failure to remain	Unscheduled	9		6
		within allocated	Care:			
		budget over the	Glangwili	NEW		
		medium term	General			
		(GGH).	Hospital			
980	01/07/20	Failure to remain	Unscheduled	9	Assessment refreshed to	6
300	01/01/20	within allocated	Care:	9		O
				ALT-VA/	quantify likely impact of	
		budget over the	Withybush	NEW	COVID-19 on the underlying	
		medium term	General		deficit, focusing on both the	
		(WGH).	Hospital		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	Central	8		12
		within allocated	Operations:			
		budget in the	Directorate	NEW		
		current financial	Team	11211		
		year 2020/21	l Cam			
		(Central				
516	27/05/16	Operations). Health Board-wide	Finance	8	KDMC are surrently in	8
516	27/05/16		Finance	Ö	KPMG are currently in	Ö
		risk regarding VAT		<del>(</del>	discussion with HMRC about	
		advice on historic		**	the treatment of the VAT on	
		Design for Life			the FOH Final Account.	
		Schemes is			HMRC's response will	
		incomplete.			dictate whether or not	
					KPMG will be required to	
					undertake further detailed	
					analysis on our behalf on	
					this scheme. HMRC	
					response expected by mid	
					December.	
					December.	

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)

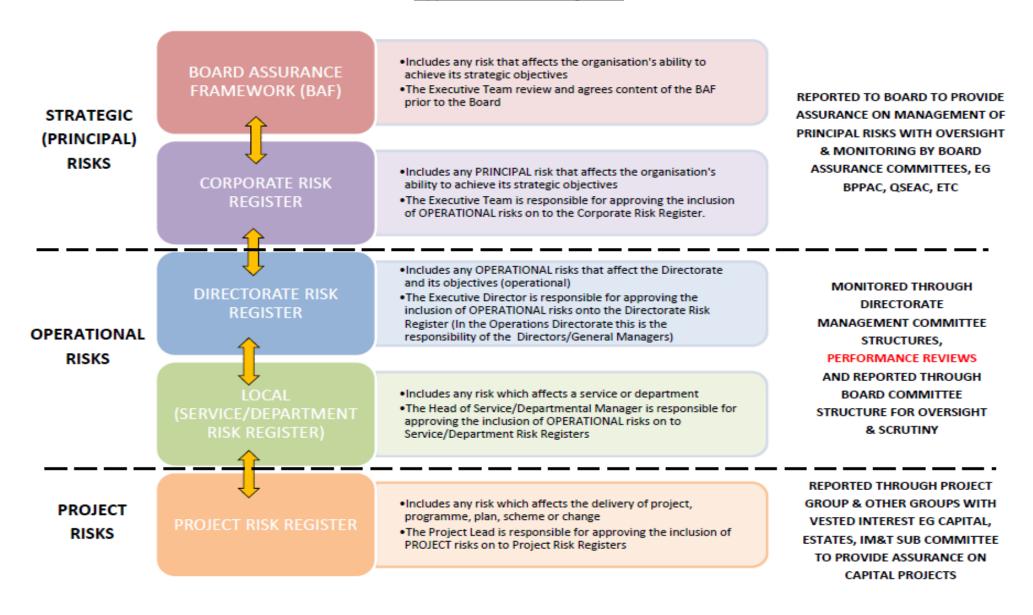
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	5.3 Seek assurance on the management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee (financial risks), and provide assurance to the Board that risks are being managed effectively 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 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	Not Applicable although Risk Registers are submitted to Performance Reviews.
Pwyllgor Cyllid: Parties / Committees consulted prior to Finance Committee:	

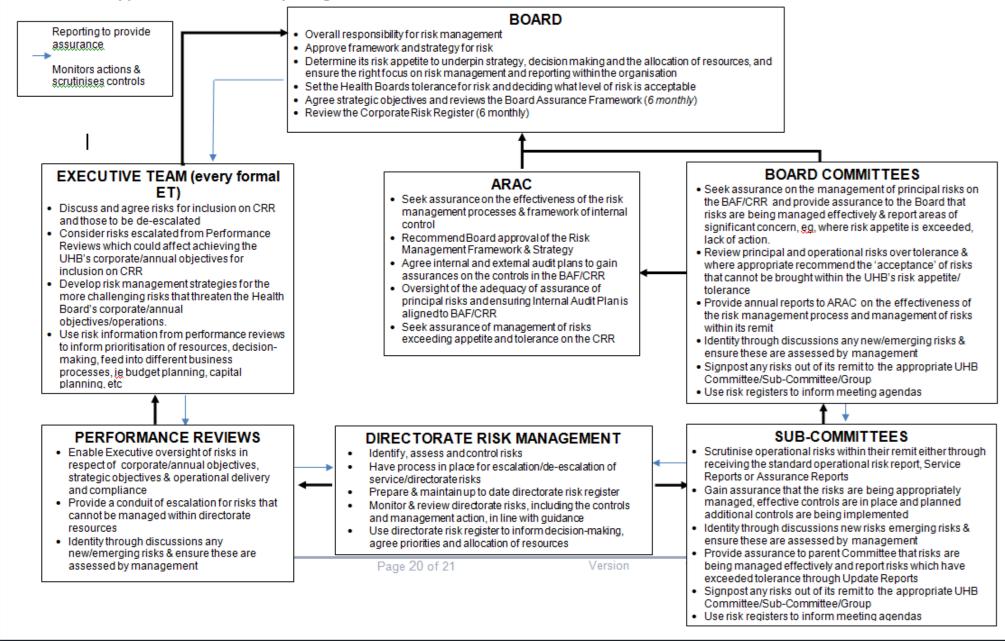
Effaith: (rhaid cwblhau)							
Impact: (must be completed)							
Ariannol / Gwerth am Arian:	No direct impacts from report however impacts of each						
Financial / Service: risk are outlined in risk description.							
Ansawdd / Gofal Claf: No direct impacts from report however impacts of each							
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									
	events contributes towards reducing/ eliminating recurrence of risk materialising and mitigates against any possible legal claim with a financial impact.  Poor management of risks can lead to loss of stakeholder confidence. Organisations are expected to									
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									
	place.  No direct impacts from report however proactive risk management including learning from incidents and events contributes towards reducing/ eliminating recurrence of risk materialising and mitigates against any possible legal claim with a financial impact.  Poor management of risks can lead to loss of stakeholder confidence. Organisations are expected 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



#### 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	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	Hayes, Rebecca		There is a risk of the funding arrangements for the Health Board's COVID-19 pandemic response remain uncertain, and therefore a ris 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 fialing 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. claims		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.	Billen,	31/12/2020	New action.	Finance Committee	3	3	9		11-Sep-20
525	Directorate Level Risk	Standard 7.1 Workforce	Scheduled Care: Theatres	Hire, Stephanie	Knight, Diane	1	f = 11	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.	Diane Kn	28/12/2018 30/4/2019 Comple 31/10/2020 31/12/2020	Subsequent request for Executive Team paper.  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
970	Directorate Level Risk		MHLD	Carroll, Mrs Liz	Billen, Janine	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	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	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.  Ensure Accountability statements	II B	31/12/2020	new action	Finance Committee	1	4	4	Treat	06-Oct-20
							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.	identified.						in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic.  Risk Register will be a standing	Carroll, Mrs Liz Billen, Jan	31/03/2021 31/12/2020	New action.	-					

Risk Ref Status of Risk	Health and Care Standards	Directorate		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
971 Directorate Level Risk		MHLD	Callul, MIS LIZ	Billen, Janine	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 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.	Ĕ,	31/03/2021	to be updated at next review.	Finance Committee	1	4	4	Treat	06-Oct-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
826	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 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	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.	Binding, Daniel Binding, Daniel Binding, Daniel	31/12/2020	New action.	Finance Committee	2	2	4	Treat	10-Sep-20

nt ve ts;	coded to allow the surgical speciality to be identified;  Where the same supplementary instrumer is used for the same procedure, these have been added to the relevant instrument set:  Stock of supplementary instruments within theatres have been reduced and continue be monitored with the aim of reducing further;  Single use instruments are used where	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  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 instruments within theatres have been reduced and continue be monitored with the aim of reducing further;  Single use instruments are used where available;	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.  Single use instruments are used where available;	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.  Where the same supplementary instrument is used for the same procedure, these have been added to the relevant instrument set:  Stock of supplementary instruments within theatres have been reduced and continue be monitored with the aim of reducing further;  Single use instruments are used where available;	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  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 instruments within theatres have been reduced and continue be monitored with the aim of reducing further;  Single use instruments are used where available;	There is a risk of needing to destroy large numbers of surgical instruments oded 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 set.  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.  Supplementary instruments 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 instruments within theatres have been reduced and continue be monitored with the aim of reducing further;  Single use instruments are used where
	available;	This will lead to an impact/affect on Single use instruments ar available;	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.	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.	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.	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 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:  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	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. 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	J	020 31/12/2020	New action.	Finance Committee	3	2	6	Treat	11-Sep-20
							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.	J. Comments of the comment of the co						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, K	31/12/2020							

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	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 realized and an improvement	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. 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.	Ę,	31/12/2020	new action	Finance Committee	3	2	6	Treat	11-Sep-20
							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.	Health Systems Evaluation Meetings with Director of Finance.						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.	Billen, Janine	31/12/2020	new action						
226	Directorate Level Risk		USC: PPH	Denning, Brett	Billen, Janine	01-Jul-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.	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	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	en, Janine Billen, Jan	31/12/2020	new action	Finance Committee	3	2	6	Treat	14-Sep-20
							This will lead to an impact/affect on a significant long term detrimental impact on the Health Board's financial sustainability.  Risk location, Prince Philip Hospital.	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						impact of social needs and or GP cluster behaviours.	Bille	(F)							

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
													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.	Billen, Janine	31/12/2020	new action						
966 Directorate Level Risk	Standard 2.1 Managing Risk and Promoting Health and Safety	P.C.LTC: Medicines Manac	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 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	Jarman, C	31/12/2020 31/12/2020	new action	Finance Committee	3	2	6	Treat	11-Sep-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		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.	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	31/12/2020	new action	Finance Committee	2	3	6	Treat	11-Sep-20
626	Directorate Level Risk		HSC: GGH	Perry, Sarah	Billen, Janine	01-Jul-20	failing to remain within their allocated budget over the medium term.	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. clai	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.	Billen, Janine Billen, Janine Billen,	31/12/2020 31/12/2020 31/12/2020	New action.  New action.	Finance Committee	3	2	6	Treat	14-Sep-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
														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 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 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. This will facilitate better and more informed decision making by budget holders.  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.	Keith	31/12/2020	new action	Finance Committee	3	2	6	Treat	14-Sep-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
972	Directorate Level Risk		Central Operations: Directorate Team	Rees, Gareth	Billen, Janine	01	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.	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.	Billen, Janine Billen, Janine	31/12/2020 31/12/2020	New action.	Finance Committee	4	3	12	Treat	11-Sep-20
							Risk location, Health Board wide.							Accountability statements in relation to Budget 2020/21 replaced with a Delegations and Finance Delivery letter, in light of the COVID-19 pandemic	Billen, Janine	31/12/2020	New action.						

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		Target Likelihood	Target Impact	Target Risk Score	Detailed Risk Decision	Review date
516	Directorate Level Risk		Finance	Thomas, Huw	Hayes, Rebecca	27-May-16	There is a risk of the Health Board 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.	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 Deloitte LLP to resolve the older D4L schemes.	omas, Huw Eve, Da	17 31/01/2019 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.  2 schemes are currently with HMRC for closure, another 3 schemes remain outstanding and 1 scheme is on-going. Work continues to resolve the older schemes. Deloitte are supporting the HB with current HMRC queries and correspondence. Discussions between HMRC Policy Team and Deloitte took place in December 2017, with internal HMRC discussions following in January 2018. HMRC visited the HB in July 2018 and reviewed all of the schemes in detail. As a result, Deloitte have prepared revised work in respect of final account assessment; this was submitted to HMRC in October 2018 for feedback. The fol	Finance Committee	4	2	8	Treat	29-Jun-20