

 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p> Name of Meeting Quality, Safety and Improvement Committee Date of Meeting 04/06/2026 Agenda item: 4.5.1 </p>
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<h2 style="text-align: center;">Public Health Wales Strategic Risk Register</h2>	
Medical Director/ National Director	SR 3
Purpose	
<p>Receive this revised Strategic Risk Register for the purpose of scrutiny and challenge, noting the updates to action plans and controls and progressing risk maturity going forward since the last reporting period.</p> <p>Colleagues are requested to note the inclusion and removal of action plans and controls, where appropriate.</p> <p>Appendix 1 includes the full risk assessments for each strategic risk.</p>	
Approval/Scrutiny route:	Business Executive Team 20.05.26

Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> Take assurance on the management of Strategic Risk within the Organisation. 				
<p> Link to Public Health Wales Strategic Plan Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives. This report contributes to the following: </p>				
Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives			

Summary impact analysis	
Equality and Health Impact Assessment	No decision is required.
Risk and Assurance	This submission is the Strategic Risk Register.



Health and Care Standards	This report supports and/or takes into account the Health and Care Quality Standards . All themes
Financial implications	The financial implications of failing to manage risk effectively are significant, both in terms of the potential for loss and also the failure to capitalise on opportunities.
People implications	There are both Corporate and Strategic Risk(s) relating to workforce and organisational development.

1. Purpose

This paper updates the Business Executive Team and Quality, Safety and Improvement Committee on the key developments in the risk agenda.

This paper must be read in conjunction with the Strategic Risk Register (*Appendix 1*). The Strategic Risk Register should be considered as a source of assurance in conjunction with the Board Assurance Framework (BAF), the Integrated Medium-Term Plan (IMTP) and Public Health Wales Strategic Objectives.

In line with due process and the approach of all Health bodies in Wales, risks are measured against a 5x5 risk scoring matrix:

Risk Scoring Matrix					
Likelihood/ Frequency	Consequence/Impact				
	1. Negligible	2. Minor	3. Moderate	4. Major	5. Catastrophic
5. Almost Certain (91%)	5 (Moderate)	10 (High)	15 (Extreme)	20 (Extreme)	25 (Extreme)
4. Likely (61-90%)	4 (Moderate)	8 (High)	12 (High)	16 (Extreme)	20 (Extreme)
3. Possible (41-60%)	3 (Low)	6 (Moderate)	9 (High)	12 (High)	15 (Extreme)
2. Unlikely (11-40%)	2 (Low)	4 (Moderate)	6 (Moderate)	8 (Moderate)	10 (High)
1. Rare (1-10%)	1 (Low)	2 (Low)	3 (Low)	4 (Moderate)	5 (Moderate)

Organisational risk reporting provides a snapshot of a point in time, and this will continue to be an iterative process. This report outlines the strategic risk position as of **1st April 2026**. In line with the current Risk Management Policy, strategic risks are reviewed and updated every other month, however, the Business Executive Team was asked to acknowledge that the organisational risk profile and landscape is iterative, and work is consistently ongoing to manage the identified strategic risks to the organisation.

As risk management processes and practice becomes more mature throughout the organisation enhanced reporting, including the measurement and impact of mitigating actions, will continue to be refined.

2. Risk Description, Architecture and Ownership and Changes Since the Last Reporting Period

The Business Executive Team were reminded that a rolling programme of strategic risk deep dive sessions commenced in early 2026. We are in the process of working through each strategic risk with a view that this exercise will facilitate discussions at

an Executive level and enable the risk assessment template to continue to be populated as accurately as possible. Interdependencies between strategic, corporate risks and respective Directorates/Programmes of work are considered when undertaking these deep dives. In doing this we are able to track and monitor the synergy and ‘golden thread’ reporting principles to evidence how the operational management of corporate risks directly impact the management of the strategic level risks.

3. Overarching Strategic Risk Profile

The below diagram provides the overarching strategic risk profile for the organisation that incorporates risk appetite tolerance levels/thresholds, as requested at the December 2025 Audit and Corporate Governance Committee: ¹



The spider diagram illustrates that for the most part, we are operating within an agreed risk appetite tolerance however, SR3 is now just outside of risk tolerance with a score of **16** and a tolerance of **15** for an Open risk appetite level. This score has not changed since the last reporting period. The detail for the management of this specific risk is articulated within the SR3 risk reporting template.

The Business Executive Team were asked to acknowledge that Strategic Risk 3 was being managed outside of its tolerance level, however, mitigations continue to be in place to manage the risk down to a tolerable level.

3.1 Risk Appetite Reporting

The Business Executive Team were asked to note that currently, strategic risks 1,2,4 and 5 are being managed within an agreed risk appetite level, with all risks

¹ The diagram does not include SRR6 as this risk is considered in private session of the Board due to the nature of the risk.

incorporating a tolerance level, should the risk profile worsen. This makes it easier to identify if the risks are being managed to a satisfactory level or if further interventions or focus is required to manage the risk more effectively.

4. Links to the Corporate Risk Register

The Corporate Risk Register (CRR) reflects the most significant operational risks that impact Public Health Wales. The CRR summary table presented within this report is provided to demonstrate the synergy between the management of the Corporate and Strategic risks.

Risk Ref	Risk Description	Risk Cause	Strategic Risk Link
1533	There is a risk of reputational damage and failure to effectively implement the HIA statutory regulations that form part of the Public Health (Wales) Act which requires Public Health Wales to give assistance to other public bodies carrying out health impact assessments (see Part 6 here: https://www.legislation.gov.uk/anaw/2017/2/part/6/enacted)	This is caused by a lack of capacity in the WHIASU team and limited knowledge, skills and capacity across PHW, outside of WHIASU, to meet the anticipated high volume of requests for assistance, guidance and training from Welsh Government, internally in PHW and externally from public bodies.	SR1 SR4 SR5 SR6
1541	There is a risk of harm to service users and employees within PHW, specifically in relation to vulnerable groups, due to the absence of regular disclosure and barring service checks.	This is caused by the organisation failing to carry out disclosure and barring service renewal checks in addition to the initial check that is undertaken at recruitment (whilst this is not a legal requirement it is best practice)	SR2 SR3
1593	There is a risk that we are unable to demonstrate that the quality standards and the Duty of Quality are embedded in all aspects of PHW business.	This is caused by lack of organisational capacity and capability to operationalise and embed due to competing priorities.	SR1 SR2 SR3 SR4 SR5 SR6
1648	There is a risk that Public Health Wales will lose access to Primary Care data.	This is caused by Audit+ (the current tool) used to gather primary care data being discontinued from July 2024 and there will be no further support of Audit+ from March 2026.	SR1 SR3 SR4 SR5



1678	<p>There is a risk that the organisation will fail to provide sufficient assurance that it is identifying and managing risks effectively through the endorsed Risk Management Procedure and failing to identify themes and trends.</p>	<p>This is caused by inconsistencies in the use of Datix across the organisation, contrary to the approved process.</p>	<p>SR1 SR2 SR3 SR4 SR5 SR6</p>
1758	<p>There is a risk of further service disruption due to excessive dust damaging the detectors of the mammography units on the MBSU's. 1 mobile unit is currently out of service due to this issue. 9 other units could potentially be at risk.</p>	<p>This is caused by dust entering the casing containing the image detector potentially damaging the detector, rendering the machine inoperable.</p>	<p>SR1 SR2 SR3 SR6</p>
1779	<p>There is a risk that we will lose our ability to monitor our impact due to declining survey response rates across many sources of official statistics including the National Survey for Wales, the Annual Population Survey and the Labour Force Survey.</p>	<p>This is caused by declining survey response rates across multiple sources of official statistics.</p>	<p>SR1 SR2 SR3 SR4 SR5 SR6</p>
1946	<p>There is a risk that the organisation will fail to implement a suitable Datix Web replacement that matches the current risk maturity when the system is decommissioned in November 2027</p>	<p>There is no current funding allocated to procure, develop and implement a replacement system and a lack of strategic direction regarding whether a local or national solution is being taken forward. There is also no organisational commitment to supporting this project from a digital perspective.</p>	<p>SR1 SR2 SR3 SR4 SR5 SR6</p>



2003	<p>There is a risk that: Public Health Wales may not achieve our net zero target by 2030 and the carbon negative target by 2035 as set out in the Public Health Wales Long Term Strategy.</p>	<ul style="list-style-type: none"> • Inability to accurately measure our carbon emissions for all activities undertaken in Public Health Wales and understand what areas we can make the greatest impact to reduce carbon emissions • Inadequate pace and scale of organisational response to reduce our carbon footprint over the next five years. • Failure to effectively engage staff in our carbon reduction work across the organisation. • Limited dedicated decarbonisation resources across the organisation and failure to prioritise resources across the organisation to actions that would make a measurable difference to the reduction of our carbon emissions. • Potential need for future investment in response to emerging threats and incidents similar to the Covid-19 pandemic response which will increase our emissions • Decisions not always prioritising the impact on the environment 	SR4
2076	<p>There is a risk that PHW is unable to meet the legal duties set out in the Equality Act 2010/Public Sector Equality Duty and respond to the needs of the population. It may be unable to enable and demonstrate full compliance with the newly published Accessible Information Standards</p>	<p>This is caused by the lack of an organisational capacity with overall responsibility for Equality Diversity & Inclusion to ensure both a strategic and coordinated approach and associated infrastructure is in place to respond to the needs of the population.</p>	SR1 SR2



2143	There is a risk that we will be unable to deliver an effective long-term sustainable and excellent Environmental Public Health Service to the population of Wales.	<p>- The service is provided by Public Health Wales & Environmental Public Health and the UKHSA, underpinned by an MOU signed in 2013. The MOU was later re-negotiated with UKHSA withdrawing from existing informal arrangements to support front line service provision (can be traced to risk ID 1633; risk materialised).</p> <p>- UKHSA withdrawing from existing informal arrangements to support front line service provision will mean that the Environmental Public Health Service will need to be solely responsible for frontline response both in and out of hours.</p> <p>- Resource capacity issues within the team.</p> <p>10/02/2026: Further information below: UKHSA has historically provided support to Public Health Wales for the delivery of the duty desk service as a matter of custom and practice. However, no formal or documented arrangements were ever agreed between the two organisations. Following recent developments relating to the revision of arrangements between UKHSA and the devolved administrations, UKHSA colleagues informed Public Health Wales that their frontline support for both in-hours and out-of-hours duty desk provision would cease.</p>	SR1 SR2 SR3
2144	There is a risk that service users may have a clinical procedure undertaken or make decisions on planned care without being fully informed if the All-Wales consent process is not adhered to. This could be from direct service delivery in Public Health Wales or because of national advice & guidance being published by Public Health Wales without taking consent and decision making into consideration.	This is caused by clinicians or Public Health Wales staff potentially not following the latest guidance as detailed in the All-Wales consent and decision-making policy and procedure.	SR3

5. Strategic Risks

A full assessment of all Strategic Risks 3 is provided in the attached Strategic Risk Register.



6. Equality Impact Assessment

No decision required.

7. Recommendation

The Committee is asked to:

- Take **assurance** on the management of Strategic Risk within the Organisation.