



GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

Diweddariad Diwedd Blwyddyn
Dangosfwrdd Fframwaith Sicrwydd y
Bwrdd 2023/24

Board Assurance Framework Dashboard
2023/24 End of Year Update

Datganiad a Goddefgarwch ynghylch
Parodrwydd i Dderbyn Risg 2024/25

Risk Appetite 2024/25 Statement and
Tolerances

Chris Darling

Ysgrifennydd y Bwrdd

Board Secretary

Diweddariad Diwedd Blwyddyn Dangosfwrdd Fframwaith
Sicrwydd y Bwrdd 2023/24

Board Assurance Framework Dashboard 2023/24
End of Year Update

Principal risk heat map

Progress Report

The planned activity for the principal risks is for action April 23 – March 24 with aim to move towards or achieve the target risk score by then. The report will be presented to the SHA Board in May and November each year, it will provide a self assessment RAG status from the objective/mission owner to indicate the current areas of concern. Additionally it will give an overview of progress on the action plans to address any gaps and will provide narrative as to the trajectory of the principal risks. Areas of concern will be allocated to the relevant Committee of the Board for ongoing scrutiny between SHA Board Reviews.

Starting points for each risk are shown by numbers corresponding to the objective/mission in the heat map to the right, in future reports changes in score will be indicated through movement along the black line. Should a risk increase in score this will be highlighted by a dotted line and the number will be moved to that space.

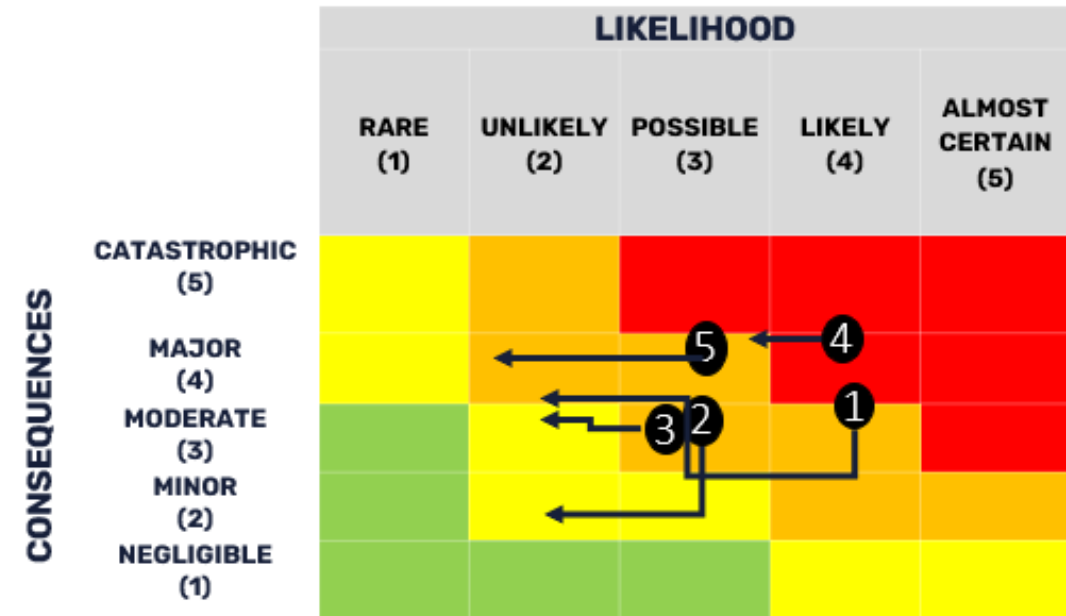
Strategic Principal Risk Impact Statement

Should any of the strategic risks being realised the consequence would include potential of harm to patients, impacts on the working conditions of staff, poor quality service, failure to achieve the required digital transformation at pace, potential litigation at both a corporate and personal level with financial and/or penal sanctions and/or significant reputational damage which could threaten the future of the organisation and it's success.

Questions to ask yourself:

- Is the progress of the action plans later in the report sufficient to achieve the target score?
- Are you satisfied the principal risks are still accurate and reflective with reference to the delivery of the strategic objectives?

Residual Principal Risk Severity Map (showing direction of travel to target)




Assurance Summary

Key – Control and assurance RAG Rating	Strategic Mission Delivery Confidence LOW	Significant concerns over the adequacy/effectiveness of the controls in place in proportion to the risks
	Strategic Mission Delivery Confidence MEDIUM	Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks
	Strategic Mission Delivery Confidence HIGH	Controls in place assessed as adequate/effective and in proportion to the risk
	Insufficient Data to provide RAG	Insufficient information at present to judge the adequacy/effectiveness of the controls

Type	Detail	Associated risk impact domain		Risk Appetite	Risk Appetite rationale/likely scenario	Assurance Assessment
M	1. 2023/24: Provide a platform for enabling digital transformation	<ul style="list-style-type: none"> Reputational Development of services Information – Access and Sharing Information – Storing and maintaining 	<ul style="list-style-type: none"> Financial Service Delivery Patient/Citizen Safety Corporate Social Responsibility 	CAUTIOUS	DHCW will accept a small amount of risk in ensuring compliance with information governance, information security and cyber security. We will manage the associated corporate risks at their appetite levels to protect against the potential consequences.	
PR	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace					
M	2. 2023/24 Deliver high quality digital products and services	<ul style="list-style-type: none"> Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Information – Access and Sharing Compliance 	CAUTIOUS	DHCW will accept a small amount of risk in the provision of secure and resilient high quality digital services. Where we are developing services we will take more risks.	
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.					
M	3. 2023/24 Expand the digital health and care record and the use of digital to improve health and care	<ul style="list-style-type: none"> Reputational Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk to deliver successful expansion of the digital health and care record with input from users. We will carefully manage the associated corporate risks with a focus on prioritising any patient/citizen safety risk concerns.	
PR	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.					
M	4. 2023/24 Drive better value and outcomes through innovation	<ul style="list-style-type: none"> Reputational Information – Access and Sharing 	<ul style="list-style-type: none"> Development of services 	OPEN	DHCW will accept risks in the pursuit of driving innovation to achieve better value evidenced by improved outcomes.	
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.					
M	5. 2023/24: Be the trusted strategic partner and a high quality, inclusive, and ambitious organisation	<ul style="list-style-type: none"> Reputational Safety and Wellbeing 	<ul style="list-style-type: none"> Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk in the pursuit of becoming recognised as a trusted partner and a high performing inclusive organisation.	
PR	IF we are not a Trusted Partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.					

MISSION 1: Provide a platform for enabling digital transformation			RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks			Amber	Amber			
EXECUTIVE OWNER: Director of Strategy		RISK APPETITE: CAUTIOUS			SELF ASSESSMENT ASSURANCE RATING	KEY CONTROLS	ASSURANCE			
REPORTING PERIOD: 1 ST April 2023 – 31 ST May 2024		DATE OF REVIEW: May 2024								
RISKS	PRINCIPAL RISK 1				CURRENT SCORE		TARGET SCORE			
	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace				12/25 4 (Likely) x 3 (Moderate)		6/25 2 (Unlikely) x 3 (Moderate)			
	ASSOCIATED CORPORATE RISK/S				Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased					
	RISK REFERENCE		CURRENT SCORE		TARGET SCORE		RISK REFERENCE		CURRENT SCORE	TARGET SCORE
	DHCW0332 Sustainable Major Programmes Funding		20 (4x4)		8 (4x2)		DHCW0315** PRIVATE		12 (4x3)	4 (4x1)
	DHCW0333 WICIS implementation Delay		20 (4x4)		8 (2x4)		DHCW0320 – Citizen and Stakeholder trust in uses of Health and Social Care Data		12 (4x3)	4 (4x1)
	DHCW0277** PRIVATE		16 (3x3)		10 (5x2)		DHCW0335 – Service Delivery Risk due to incomplete service catalogue		12 (4x3)	6 (3x2)
DHCW0281** PRIVATE		16 (3x3)		10 (5x2)						
DHCW0282** PRIVATE		16 (3x3)		10 (5x2)						
CONTROLS AND ASSURANCE	KEY CONTROLS		ACTION PLAN		ASSURANCE		ACTION PLAN (ASSURANCE)		PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER	
	<ul style="list-style-type: none"> 1.New cloud based national health and data store 2. API Priorities Roadmap 3. Strategy for priority platforms/architecture building blocks 4. Published Open Architecture Standards 5. Code of Conduct for Sharing Personal Information (WASPI) 6. Engagement and communication of the Data Promise 7. Cloud Plan and Business Case 8. Updated Infrastructure Strategy 9. Annual NIS CAF Assessments 		<ul style="list-style-type: none"> 1. Work on the establishment of a new cloud based national health and care data store 2. Delivery of an API Priorities Roadmap 3. Continue with the development of a strategy 4. Work with stakeholder to publish standards 5. Consultation on the WASPI Code of Conduct 6. Continued working with WG to agree engagement & communication methods 7. Develop a prioritised Cloud plan and business case 8. Further development of the Infrastructure Strategy 9. CRU to report upon the status of NHS Wales cyber posture to WG 		<ul style="list-style-type: none"> 1. Analysis and reporting on data use 2. Reporting on APIs that have moved into production and are live 3. Reporting on progress against plan emerging from Strategy 4. Ability to monitor against compliance with standards 5. Reporting on implementation of the Code of Conduct 6. Communications Plan with timescales 7. Monitoring of optimisation of cloud usage 8. Strategy meets the growing needs of the service and reflects technological advances 9. CRU Annual Report (hosted by DHCW on behalf of WG) 		<ul style="list-style-type: none"> 1. Develop reporting on data use 2. Develop and increase the number of live APIs 3. Develop reporting requirements 4. Determine reporting requirements 5. Produce implementation plan and identify reporting requirements 6. Engage with WG to define timescales for communication 7. Development of enhanced cloud reporting 8. Dialogue with partner organisations to ensure needs are met 9. Board to receive CRU Annual Report 		<p>PROGRESS HIGHLIGHTS:</p> <ul style="list-style-type: none"> 1. Platform live since Aug 23 and Operational roadmap developed. 2. Initial API products delivered in Q2. 3. IMPT Milestones on track for delivery 4. FHIR Welsh Health Circular published Q2. 5. WASPI Code of Conduct Formal Consultation progressing. 7. Cloud Business case on track for Q4 high level economic case delivered 8. No longer continuing with separate Infrastructure plan 9. CRU annual plan on track for Q4 <p>As a forward look we are looking at developing options for Cloud native architectures in key products areas</p>	

MISSION 2: Deliver high quality technology, digital products and services		RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks				Amber	Amber
EXECUTIVE OWNER: Director of Operations		RISK APPETITE: CAUTIOUS		SELF ASSESSMENT ASSURANCE RATING		KEY CONTROLS	ASSURANCE
REPORTING PERIOD: 1 ST April 2023 – 31 ST May 2024		DATE OF REVIEW: May 2024		CURRENT SCORE		TARGET SCORE	
PRINCIPAL RISK 2				9/25 3 (Possible) x 3 (Moderate)		4/25 2 (Unlikely) x 2 (Minor)	
IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.							
ASSOCIATED CORPORATE RISK/S				Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased			
RISK REFERENCE		CURRENT SCORE		TARGET SCORE		RISK REFERENCE	
DHCW0316 – Technical Debt Accumulation		16 (4x4)		10 (5x2)			
DHCW0334 – Impact of cost of transition team		12 (3x4)		8 (2x4)			
DHCW0296 – Allergies/ Adverse Reactions		12 (4x3)		8 (4x2)			
KEY CONTROLS GAPS		KEY CONTROLS ACTION PLAN		ASSURANCE GAPS		ACTION PLAN (ASSURANCE)	
<ul style="list-style-type: none"> 1. Product Strategy 2. WCCIS Strategic Review 3. WEDS Strategic Review 4. National Eyecare System Gateway Review 5. Welsh Emergency Care Data Set 6. LINC System 7. RISP System 8. Single Medicine Record 9. ETP Early Adopter 		<ul style="list-style-type: none"> 1. Agree product approach and timeline for implementation 2. Delivery of the recommendations from the WCCIS Strategic review 3. Review outputs of the WEDS Strategic review 4. Review outputs of the National eyecare system gateway review and confirm future arrangements 5. Produce the Welsh Emergency Care Data set 6. Configure, build and test new LINC System in readiness for roll out 7. Complete procurement and FBC for new RISP system 8. Build Single record in medicines for every patient in Wales 9. Implement ETP across Early adopter sites in Primary Care and Community Pharmacies 		<ul style="list-style-type: none"> 1. Approved Product Strategy plan 2. Reporting against progress and annual plan for WCCIS 3. Reporting against progress and annual plan for WEDS 4. Formal approval of Eyecare future arrangements 5. Validation of the Welsh Emergency Care Data Set 6. Approved roadmap for the implementation of LINC 7. Approved FBC for new RISP System 8. Reporting on roll out of the Single Record to Service Management Board 9. Approved roll out 		<ul style="list-style-type: none"> 1. SHA Board to approve the product implementation plan 2. Ongoing monitoring of progress and annual plan 3. Ongoing monitoring of progress and annual plan 4. Ongoing discussions 5. Implement tools to validate Data set 6. Agreed NHS Wales position on LINC System 7. Engagement with Welsh Government on FBC 8. Reporting mechanism and approved project plan present at Programme Board/ SMB 9. Monitoring of approved roll out plan for ETP 	
				PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER			
				Progress Highlights: 1. OCP Programme underway with posts out for recruitment as part of shift to product. DevOps maturity assessment – complete. 4. Eyecare change request approved to extend Programme reset and re-baselined plans 6.LINC contingency plan On track for delivery. 7. RISP FBC approved. 9. One pharmacy and GP practice in North Wales gone live with ETR collation feedback on go live process. Forward Look: 6 Developing the action plan and progressing the target operating model engagement.			

MISSION 3: Expand the digital health and care record and the use of digital to improve health and care

EXECUTIVE OWNER: Director of Strategy

RISK APPETITE: MODERATE

REPORTING PERIOD: 1ST April 2023 – 31ST May 2024

DATE OF REVIEW: May 2024

RAG STATUS: AMBER
Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks



Amber

Amber

SELF ASSESSMENT ASSURANCE RATING

KEY CONTROLS

ASSURANCE

PRINCIPAL RISK 3

CURRENT SCORE

TARGET SCORE

IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.

9/25
3 (Possible) x 3 (Moderate)

6 /25
2 (Unlikely) x 3 (Moderate)

ASSOCIATED CORPORATE RISK/S

Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased

RISK REFERENCE	CURRENT SCORE	TARGET SCORE	RISK REFERENCE	CURRENT SCORE	TARGET SCORE
DHCW0300 – Canisc System Phase 2	16 (4x4)	6 (3x2)			
DHCW0318 ** PRIVATE	12 (3x4)	9 (3x3)			

KEY CONTROLS GAPS

KEY CONTROLS GAPS

KEY CONTROLS ACTION PLAN

ASSURANCE GAPS

ACTION PLAN (ASSURANCE)

PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER

- Digital Health Care Record
- Enhanced WNCR
- Cancer Informatics Plan
- NHS App Roll-out/Release Plan

- Engage with DHCW teams and suppliers, roadmap plan to increase clinical content through APIs
- Roadmap for enhanced WNCR functionality
- Develop future phases of the informatics improvement plan
- Monitor usage of the app

- Migrate applications to interacting with the single record through open APIs.
- User research and user design to drive priorities and enhancements
- User research and user design to drive priorities and enhancements
- User research and user design to drive priorities and enhancements


- Develop a roadmap for the development of APIs to live service.
- Report on user feedback, benefits realisation, and service performance
- Report on user feedback, benefits realisation, and service performance
- Report on user feedback, benefits realisation, and service performance

PROGRESS HIGHLIGHTS

- API platform team is established, and new open APIs have been published.
- WNCR Adult transition to live service continuing with appropriate Clinical engagement.
- Palliative Care features assured for release.
- Over 200 GP practices connected and use of the App accelerating. Maintaining user satisfaction levels.

FORWARD LOOK FOCUS

- Products and Application teams will build out the API roadmap by March 24
- Confirm forms design in WNCR Paediatrics with users.
- Responses to feedback on use in early January 24.
- Complete GP onboarding and start public communication campaign.

MISSION 4: Drive better values and outcomes through innovation				RAG STATUS: AMBER Some areas of concern over the adequacy/effectiveness of the controls in place in proportion to the risks			Amber	Amber	
EXECUTIVE OWNER: Medical Director		RISK APPETITE: OPEN				SELF ASSESSMENT ASSURANCE RATING	KEY CONTROLS	ASSURANCE	
REPORTING PERIOD: 1 ST April 2023 – 31 ST May 2024		DATE OF REVIEW: May 2024							
PRINCIPAL RISK 4						CURRENT SCORE		TARGET SCORE	
IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.						16/25 4 (Likely) x 4 (Major)		12/25 3 (Possible) x 4 (Major)	
ASSOCIATED CORPORATE RISK/S						Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased			
RISKS									
RISK REFERENCE		CURRENT SCORE		TARGET SCORE		RISK REFERENCE		CURRENT SCORE	TARGET SCORE
DHCW0263 – Establishment & Functions		12 (4x3)		4 (4x1)					
DHCW0313 - Digital Cost Pressure – Service Model Changes		12 (4x3)		9 (3x3)					
DHCW0269 – Switching Service - Data Warehouse		9 (3x3)		6 (3x2)					
KEY CONTROLS GAPS			KEY CONTROLS ACTION PLAN		ASSURANCE GAPS		ACTION PLAN (ASSURANCE)		PROGRESS ON ACTION PLAN – NARRATIVE PROVIDED BY EXECUTIVE OWNER
1. R&I Governance 2. Research Committees 3. Access to secure anonymised Data 4. Health Intelligence portal 5. Information & Analytics Strategy			1. Agree and approve the R&I Governance arrangements 2. Confirm Research commitments with academic partners 3. Operationalise secure research platform (SeRP) to enable the provision of secure access to anonymised data 4. Develop Health Intelligence portal 5. Development of a formal information & analytics strategy		1. Approval of R&I government governance arrangements 2. Agreed Research plan 3. Roadmap for implementation of SeRP 4. Agreed implementation plan for Health Intelligence portal 5. Agreed plan for implementation of information & Analytics strategy		1. SHA Board approval of R&I governance arrangements 2. Approved Research plan in place 3. Approved Roadmap for implementation of SeRP 4. Management Board approval of Health Intelligence Portal plan 5. Approval of plan for Analytics Strategy		Progress Highlights: 1.R&I Governance in place 2. List of current agreements in place and supporting Engagement team to revise and develop new agreements as appropriate. Attendance at several regular partnership meeting underway. 3. Pilot phase of Secure Data Platform undertaken 4. Health Intelligence portal is live available on the Website Forward Look: Implementation plans developed and milestones reflected in IMTP
CONTROLS AND ASSURANCE									

MISSION 5: Be the trusted strategic partner and a high quality, inclusive and ambitious organisation

EXECUTIVE OWNER: Director of Finance/Deputy CEO

RISK APPETITE: MODERATE

REPORTING PERIOD: 1ST April 2023 – 31ST May 2024

DATE OF REVIEW: May 2024

RAG STATUS: Green
Controls in place assessed as adequate/effective and in proportion to the risk



Green

Green

SELF ASSESSMENT ASSURANCE RATING

KEY CONTROLS

ASSURANCE

PRINCIPAL RISK 5

CURRENT SCORE

TARGET SCORE

IF we do not become a trusted partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.

12/25
3 (Possible) x 4 (Major)

8/25
2 (Unlikely) x 4 (Major)

ASSOCIATED CORPORATE RISK/S

Risk Key: ★ New Risk ↔ Non-Mover ↓ Reduced ↑ Increased

RISK REF	CURRENT SCORE	TARGET SCORE	RISK REF	CURRENT SCORE	TARGET SCORE
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HCW0331 – Fixed Term Resource Funding	20 (4x5)	4 (4x1)			
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KEY CONTROLS GAPS	ACTION PLAN (CONTROLS)	ASSURANCE GAPS	ACTION PLAN (ASSURANCE)	PROGRESS ON ACTION PLAN – NARRATIVE BY EXEC OWNER
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<p>Understand the role of DHCW and its role in the system to respond to recent NHS financial challenged Digital Workforce Review Equality, Diversity and Inclusion (EDI) Strategy Digital Inclusion Charter NHS Wales Digital Maturity position confirmed Foundational Economy Decarbonisation Wellbeing of Future Generations Act Sustainable Funding Model FinOps Function Benefits Management Framework Digital Programme Office Business Continuity Policy Brand Management Guidance Quality Standards DHCW ISO Internal Audit Plan Governance Assurance</p>	<ol style="list-style-type: none"> Complete a financial plan to respond to the NHS Wales financial challenge Published and review agreed Digital Workforce action plan with Welsh Government Consultation with WG and NHS Wales on future sustainable funding models for Digital EDI Strategy approval by Board Develop action plan to embed the 6 pledges of the digital inclusion charter Co-ordinate next steps post maturity surveys Gather data to monitor the contribution to Foundational Economy Qualitative and Quantitative reporting to Welsh Government Work with Wellbeing of future generations act commissioner in readiness for April 20234 Work develop a future national and local funding model Develop a FinOps function for Cloud Develop a benefits management framework Establish a digital programme office Implementation of the Business Continuity Policy Develop DHCW Brand Management guidance EDI Strategy approval by Board Produce and Approve ISO Internal Audit Plan Provide annual Governance reports and BAF reviews 	<ol style="list-style-type: none"> Report progress of the financial plan as part of Board reporting Reporting on progress against Digital WF Review action plan. Regular reporting on implementation of EDI Strategy Reporting on compliance with the Digital inclusion Charter Routine Digital Maturity reporting in NHS Wales Foundational economy bi- annual reporting to Welsh Government Delivery of roadmap and Decarbonisation action plans Reporting progress to the Wellbeing & Future generations office Balanced financial plan Roadmap for FinOps implementations Implement a Benefits Management Framework Establish Governance and reporting requirements for Digital Programme office Business continuity plans in place for all teams Embed Brand guidance across DHCW Publication of Annual Quality Report External Audit reports Reporting to Board on Governance compliance and structures 	<ol style="list-style-type: none"> Initial report on financial plan to Board in September 2023. Continual review plan to ensure dynamic and robust Share and learning from Best practice Ongoing reporting and benchmarking on Digital inclusion charter Progress the HIMSS Digital Maturity Matrix KLAS user survey. Monitoring ongoing by DHCW Foundational Economy Group Reporting on Decarbonisation action plan Continued engagement with the WBFGA office Ongoing discussions with Welsh Government Agreed roll out plan for FinOps and reporting to Cloud Council Benefits Management Reporting Regular reporting on Digital Programmes Progress Reporting on BC progress Continued monitoring of Brand usage Continued monitoring on compliance Published External Audit reports available Continued Board engagement and embedding of processes 	<p>Progress Highlights:</p> <ol style="list-style-type: none"> Discussions underway on approach and priorities for the digital workforce review. Action and resource plans currently being developed. Strategic Equality Plan approved by the SH Board. Actions identified are on target and monitored by the SHA Board. EDI Network is actively engaged and involved in a number of key people initiatives. DHCW have worked to prepare and plan for the ISO 30415 Diversity and Inclusion Standard assessment in Sept and October 23. A shared listening and learning presentation on Digital Inclusion and the progress towards accreditation was delivered at SHA Public Board on 27th July 2023. CEO Helen Thomas is the Board Champion for Digital Inclusion and Chair of the Digital Inclusion Working Group. Action plan has been developed to seek Digital Inclusion Charter Accreditation by December 2023. Gartner review conduction action plan is underway. On target. Interim PMO team is in place, standardised reporting and government structures agreed. <p>Forward Look:</p> <p>Plans progressing well for each of key controls Agreeing and embedding workforce social Benefits and Governance Frameworks. Confirm financial allocation for 2024/25 and work towards sustainable funding model.</p>
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RISKS

CONTROLS AND ASSURANCE

Digital Health and Care

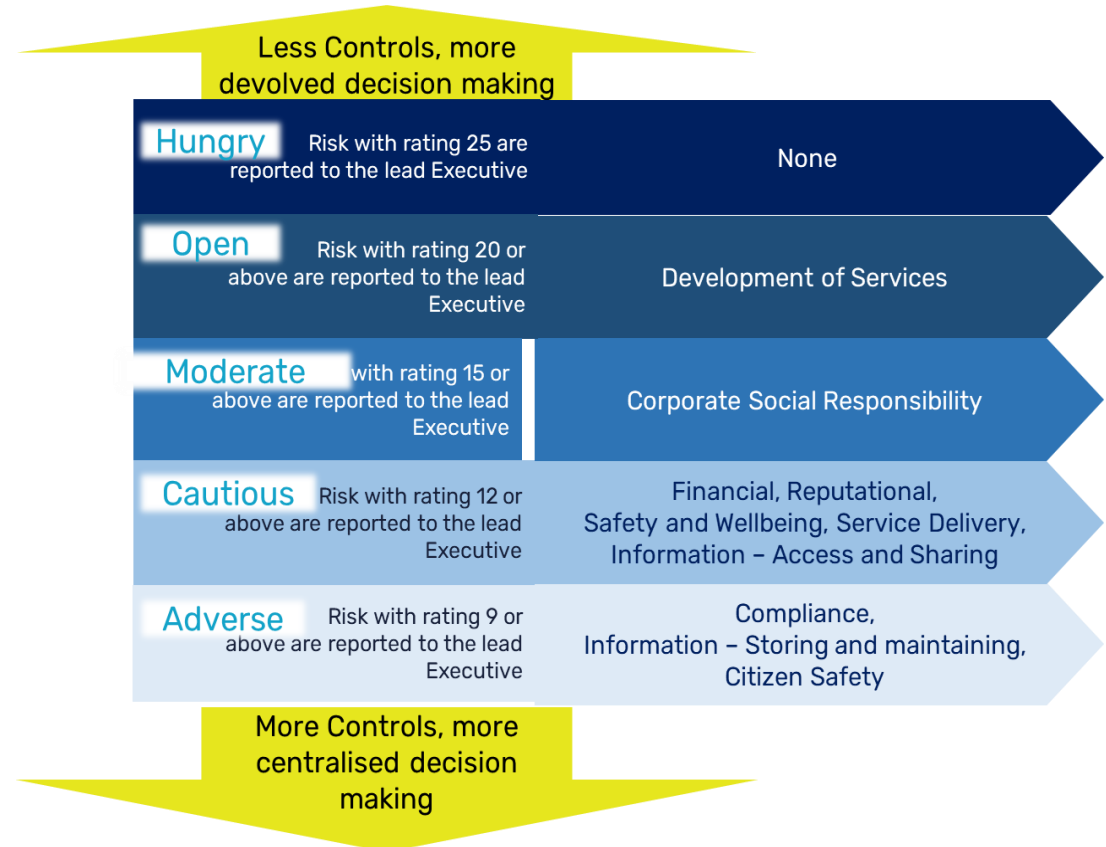
Datganiad a Goddefgarwch ynghylch Parodrwydd i
Dderbyn Risg 2024/25

Risk Appetite 2024/25 Statement and Tolerances

Datganiad IGDC o ran parodrwydd i dderbyn risg a goddefgarwch DHCW Risk appetite statement and tolerances

PARODRWYDD IGDC I DDERBYN RISG / DHCW RISK APPETITE

- DHCW must take risks to achieve its strategic aims and deliver beneficial outcomes to stakeholders
- Risks will be taken in a considered and controlled manner
- Exposure to risks will be kept to a level of impact deemed acceptable by the Board
- The acceptable level may vary from time to time and will therefore be subject to at least annual review and revision
- Any risk outside our agreed appetite may be accepted and will be subject to a governance process to ensure visibility and management
- Some particular risks above the agreed risk appetite may be accepted because:
 - the likelihood of them occurring is deemed to be sufficiently low
 - they have the potential to enable realisation of considerable reward/benefit
 - they are considered too costly to control given other priorities
 - the cost of controlling them would be greater than the cost of the impact should they materialise
 - there is only a short period of exposure to them
 - mitigating action is required by an external party



Adolygu Datganiad Parodrwydd i Dderbyn Risg – Parthau Gweithredol

Review of Risk Appetite Operational Domains

Domain	Definition	Appetite	Articulated Statement
Financial	Impacts upon the financial position and sustainability of the organisation	CAUTIOUS	DHCW will accept little risk accepted but in certain circumstances there may be a higher tolerance level to achieve specific goals that will help deliver substantial benefits to stakeholders and/or realise significant longer-term efficiencies for DHCW or the system.
Compliance	Impacts upon the organisation's conformance with legal obligations and statutory duties and its compliance with regulatory requirements	ADVERSE	DHCW must be adverse to risks that could impact upon its compliance with law and regulation. It will ensure robust processes and systems are in place to ensure obligations are appropriately managed and risk reduced to the lowest practical level.
Patient/Citizen Safety	Impacts upon the safety and wellbeing of patients/citizens	ADVERSE	DHCW must be Adverse to risks that threaten the safety of service users, citizens and the public. As a consequence, it will endeavour to eliminate such risks or reduce them to the lowest practical level.
Safety and Wellbeing	Impacts upon the safety and well-being of those who work for or with DHCW	CAUTIOUS	DHCW will endeavour to ensure the safety and wellbeing of those who work for or with DHCW.
Service Delivery	Impacts upon the intended/expected/contracted delivery of the organisation's services.	CAUTIOUS	Delivery of DHCW's core operational services must be protected from adverse impact from risks, while recognising that pursuing certain activities may result in some minor or short-term disruption to those services.
Development of Services	Impacts upon our ability to deliver innovative solutions for emerging service requirements	OPEN	DHCW will accept risks that appear the most likely to result in successful delivery, even if they have elevated levels of residual (mitigated) risk.
Reputational	Impacts upon the organisation's reputation amongst all or some of its stakeholders including the general public.	CAUTIOUS	Damage to the DHCW's reputation can undermine stakeholder confidence and be costly to remedy, so only risks with a low reputational impact will be acceptable.
Information – Storing and maintaining	Impacts upon the organisation's ability to safely store, maintain and transform data.	ADVERSE	DHCW recognise the importance of an adverse approach to the safety of data stored and managed by the organisation and will accept little to no risk impact in this area.
Information – Access and Sharing	Impacts upon the organisation's ability to transform, access, share, and use data.	CAUTIOUS	Access and sharing of data will enable further benefit and value from data. DHCW will accept a small amount of risk to allow access and sharing of data for potential wide reaching and transformational benefits.
Corporate Social Responsibility	Impacts on the organisation's ability to deliver an inclusive, sustainable, and socially responsible contribution to Wales including in the economic and social recovery	MODERATE	DHCW will endeavour to be a leader in terms of their Corporate Social Responsibility, this means DHCW will accept a moderate impact on their Corporate Social Responsibility should longer term benefits be realised from short term impact.

Risk Appetite for Principal Risks

Type	Detail	Associated risk impact domain		Risk Appetite	Risk Appetite rationale/likely scenario
M	1. 2023/24: Provide a platform for enabling digital transformation	<ul style="list-style-type: none"> Reputational Development of services Information – Access and Sharing Information – Storing and maintaining 	<ul style="list-style-type: none"> Financial Service Delivery Patient/Citizen Safety Corporate Social Responsibility 	CAUTIOUS	DHCW will accept a small amount of risk in ensuring compliance with information governance, information security and cyber security. We will manage the associated corporate risks at their appetite levels to protect against the potential consequences.
PR	IF we do not provide robust and secure platform services supported by common standards and open architecture principles THEN we will be unable to deliver high quality, innovative and joined up digital services RESULTING IN not being able to digitally transform services at pace				
M	2. 2023/24 Deliver high quality digital products and services	<ul style="list-style-type: none"> Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Information – Access and Sharing Compliance 	MODERATE	DHCW will accept a moderate amount of risk when we are developing new products and services. DHCW will be more cautious in the provision of secure and resilient high quality digital services.
PR	IF we do not deliver safe, secure, accessible, resilient products and services of high quality THEN the ability of health and care partners to deliver and modernise services is compromised RESULTING IN less effective, less sustainable care that could cause harm, would not meet the expectations of patients or professionals and holds potential cost implications.				
M	3. 2023/24 Expand the digital health and care record and the use of digital to improve health and care	<ul style="list-style-type: none"> Reputational Patient/Citizen Safety Development of services Service Delivery 	<ul style="list-style-type: none"> Financial Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk to deliver successful expansion of the digital health and care record with input from users. We will carefully manage the associated corporate risks with a focus on prioritising any patient/citizen safety risk concerns.
PR	IF we fail to provide a comprehensive digital health and care record, engage users and drive the adoption and use of our Digital Services THEN we will not realise value from Digital investment and service delivery RESULTING IN a reduced ability to use information to inform care and empower citizens, leading to poorer outcomes.				
M	4. 2023/24 Drive better value and outcomes through innovation	<ul style="list-style-type: none"> Reputational Information – Access and Sharing 	<ul style="list-style-type: none"> Development of services 	OPEN	DHCW will accept risks in the pursuit of driving innovation to achieve better value evidenced by improved outcomes.
PR	IF we do not focus on making use of data and innovation to improve outcomes THEN we may not be optimising value for citizens RESULTING IN less sustainable health and care services and reduced or delayed benefit for the public and patients.				
M	5. 2023/24: Be the trusted strategic partner and a high quality, inclusive, and ambitious organisation	<ul style="list-style-type: none"> Reputational Safety and Wellbeing 	<ul style="list-style-type: none"> Corporate Social Responsibility Compliance 	MODERATE	DHCW will accept a moderate amount of risk in the pursuit of becoming recognised as a trusted partner and a high performing inclusive organisation.
PR	IF we are not a Trusted Partner and a high performing inclusive organisation THEN people will not want to work with and for us RESULTING IN a failure to achieve our strategic ambition of delivering world leading digital services.				

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