

| Datix ID | Portfolio                             | Risk Domain (Strategic Objective)                      | Risk Title   | Risk Description   | Controls in place  | Action Plan   | Sources of Assurance   | Rating (current) | Rating (Target) | Trend | Opened     | Review date |
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| 4260     | Chief Ambulance Services Commissioner | Set the Strategic Commissioning Plan                   | Failure to produce an agreed Strategic Commissioning plan and commissioning intentions   | <p><b>IF:</b> There is a failure to produce and agree a strategic commissioning plan and commissioning intentions</p> <p><b>Then:</b> The commissioned providers would not be clear regarding expectations for the quality, effectiveness and efficiency of services within an agreed financial plan .</p> <p><b>Resulting in:</b> Lack of clarity in the direction of the commissioned organisations (WAST and EMRTS)</p> | <p>Ensuring a program approach to planning and delivery with focus on monitoring progress through the EASC Sub Groups;</p> <p>Commissioning Intentions collaboratively developed and agreed with quarterly updates to be provided;</p> <p>EASC IMTP recently confirmed as acceptable by WG (with accountability conditions);</p> <p>Forward look developed for all EASC Sub Groups including receiving progress on the deliverables within the plans;</p> <p>Regular reporting from EASC Sub Groups to the EAS Joint Committee on progress;</p> <p>Commitment from the EASC for strategic commissioning cycles;</p> <p>Ongoing work to refresh the EMS Commissioning Framework, with work soon to commence on local integrated commissioning action plans;</p> | EASC Commissioning Cycle in place to set out the process and timeline for the development of Commissioning Intentions and Commissioning Frameworks;   | Approved EASC IMTP; EASC Commissioning Cycle; EASC Commissioning Intentions; Minutes of EASC Sub Group meetings monitoring progress against plans; Commissioning Frameworks; Quarterly updates against EASC IMTP and Commissioning Intentions;   | 4x1 = 4          | CXL<br>4x1=4    | ▢     | 01/08/2020 | 01/12/2022  |
| 4502     | Chief Ambulance Services Commissioner | Meet the Ministerial direction to produce an EASC IMTP | Failure to develop an agreed EASC IMTP for endorsement by the Joint Committee seeking approval from the Welsh Government   | <p><b>IF:</b> There is no agreement for the EASC IMTP</p> <p><b>Then:</b> The Strategic Commissioning plan (commissioning intentions) would not be supported</p> <p><b>Resulting in:</b> Lack of clarity in the direction of the commissioned organisations (WAST and EMRTS)</p>   | <p>CASC Quality and Delivery meeting held monthly to discuss Quality and performance matters (under review);</p> <p>Detailed work to deliver EASC IMTP overseen by EASC Management Group;</p> <p>EASC IMTP (2020 to 2023) approved by EASC (January 2020);</p> <p>EASC Annual Plan 2021-22 approved EASC 9 March 2021;</p> <p>EASC IMTP 2022-2025 approved by EASC March 2022;</p> <p>CASC IQPD (Integrated Quality and Performance Delivery) meeting with Welsh Government bi-monthly;</p> <p>CASC meetings with Welsh Government planning department;</p> <p>EASC IMTP 2022-25 confirmed as acceptable (with accountability conditions) by Welsh Government with quarterly updates in-year;</p>  | EASC IMTP recently confirmed as acceptable by WG (with accountability conditions); Quarterly updates now to be provided;  | Consistency between EASC IMTP with WAST IMTP and also with Health Boards; Letter of support received from the Welsh Government with accountability conditions; EASC Approval of the plan and WG confirmation; Quarterly IMTP updates to EASC and its sub groups;   | 4x1=4            | CXL<br>4x1= 4   | ▢     | 01/08/2020 | 01/12/2022  |
| 4503     | Chief Ambulance Services Commissioner | Effective Commissioning                                | Failure to deliver the Ministerial direction that EASC effectively plans, commissions and secures services within its remit; and failure to maintain collaborative relationship with providers | <p><b>IF:</b> The EASC fail to plan and secure services and maintain effective collaborative relationships with providers</p> <p><b>Then:</b> The purpose and effectiveness of the EAS Joint Committee would not be met</p> <p><b>Resulting in:</b> Potential Ministerial and Welsh Government intervention</p>  | <p>Agreed collaborative commissioning methodology;</p> <p>Review and refine commissioning arrangements and refresh Commissioning Framework;</p> <p>Effective function of the EASC Joint Committee;</p> <p>Independent Chair;</p> <p>Effective governance arrangements in place;</p> <p>CASC and Welsh Government IQPD meetings (bi-monthly);</p> <p>Minister meets with the Chair quarterly;</p> <p>Meet regularly with providers to ensure continued development of open and transparent relationship;</p> <p>Model Standing Orders agreed for EASC;</p> <p>July 2021 Special meeting of EASC with Minister and clear expectations received;</p>  | Commissioning framework and monitoring at EASC and its sub groups; Annual Governance Statement; Monitoring of EASC IMTP at EASC and sub groups; Review and refine governance arrangements; Maintaining close working and collaborative relationships during unprecedented system pressures; EASC action plan for Ministerial priorities and monthly monitoring return commitment; | Internal and external audit; Welsh Government; EASC Committee members; Annual Governance Statement; Strategic Commissioning intentions and Commissioning Frameworks; Continued engagement with the commissioning process and EASC Governance; EASC Action Plan with monthly update to the Minister and review; Chair's appraisal letter with Minister; | 5x2=10           | CXL<br>5x1=5    | ▢     | 01/08/2020 | 01/12/2022  |
| 4504     | Chief Ambulance Services Commissioner | Outcome measurement                                    | Failure to respond to requirements identified within commissioned work related to the ambulance services   | <p><b>IF:</b> Work commissioned is failed to be acted upon</p> <p><b>Then:</b> risks and issues identified will not be acted upon and implemented</p> <p><b>Resulting in:</b> a missed opportunity to improve services for patients</p>  | <p>Forward plan (Annual Business Plan) for EASC and all sub groups;</p> <p>Development of action plans which are received, endorsed and approved by the EASC for action;</p> <p>Action log for EASC and all sub groups;</p> <p>Regular review of Ambulance Service Indicators with dedicated group jointly chaired with WAST;</p> <p>Commissioning intentions - including measurement across the system;</p> <p>Commissioner request for system wide measures;</p> <p>Refresh of Commissioning Frameworks;</p>   | Governance and planning for EASC and all sub groups and supporting meetings; Review of the commissioning framework; EASC Action Plan and monthly monitoring return commitment;  | Amber Review; ORH Report D&C EMS; Emergency Ambulances Framework - updated Sept 2022; McClelland Review of Welsh Ambulance Services (2013); Internal and external audit; CASC IQPD meeting with Welsh Government; Annual Governance Statement; Commissioner Ambulance Availability Taskforce;  | 4x2=8            | CXL<br>4 x2 = 8 | ▢     | 01/08/2020 | 01/12/2022  |
| 4505     | Chief Ambulance Services Commissioner | Ministerial direction                                  | Failure to achieve the agreed Chair's objectives with the Minister   | <p><b>IF:</b> The agreed Chair's objectives with the Minister are not delivered</p> <p><b>Then:</b> Then the confidence of the Minister will be potentially compromised</p> <p><b>Resulting in:</b> The Minister not being assured that necessary progress has been made in the commissioning of ambulance services and the wider connections to unscheduled care services in Wales</p>                                    | <p>Regular meetings with the EASC team to discuss any issues as well as quality issues and the development of improved reporting arrangements;</p> <p>Cross reference to the work to deliver the Six Goals for Urgent and Emergency Care Programme and particularly Goal 4;</p>  | Commissioner support for commissioning; EASC Commissioning intentions; Refresh Commissioning Frameworks; EASC IMTP; 'Focus on' sessions at EASC to discuss wider system issues;   | Minister's response following Chair's appraisal; Six Goals for Urgent and Emergency Care Programme delivery particularly Goal 4; Updated objectives for Chair received   | 3x2=6            | CXL<br>3 x2 = 6 | ▢     | 01/08/2020 | 01/12/2022  |

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| 4506     | Chief Ambulance Services Commissioner | Securing safe ambulance services     | Failure to achieve agreed performance standard for category red calls   | <p><b>IF:</b> The red performance level is less than 65% for each health board area and across Wales as a whole on a monthly basis</p> <p><b>Then:</b> The core target will be missed</p> <p><b>Resulting in:</b> Unsatisfactory service for the people of Wales (or within specific health board areas)</p>   | The necessary resources secured in the EASC IMTP; performance monitoring on a daily basis and month to date position; Bi monthly CASC IQPD meetings with Welsh Government; CASC monthly Quality and Delivery Meeting with the Welsh Ambulance Services NHS Trust; Commissioner element of EMS Demand and Capacity plan for additional staff supported;  | Delivery of EASC IMTP and WAST IMTP; Implementation of the commissioning intentions through the commissioning agreement; Role of the EASC Management Group to provide oversight on operational performance; Development of WAST performance improvement plan;   | Ambulance Service Indicators; Daily weekly and monthly performance reports; Remedial Action plans (if required); Specific targeted actions as required; Commissioner Ambulance Availability Taskforce; Implementation of the Demand and Capacity Review; Commissioner EASC Action Plan including monthly submission and review; CASC liaison with Chief Operating Officers; Additional £3m investment in year to support front line services which will also support the commencement of the Cymru High Acuity Response Unit (CHARU) | 5x5=25           | CXL<br>4x3= 12  | ↑     | Aug-20 | Dec-22      |
| 4507     | Chief Ambulance Services Commissioner | Securing safe ambulance services     | Failure to achieve agreed performance standard for amber category calls   | <p><b>IF:</b> The average time for amber performance calls does not reduce year on year</p> <p><b>Then:</b> The core target will be missed.</p> <p><b>Resulting in:</b> unsatisfactory service for the people of Wales (or within specific health board areas).</p>  | The necessary resources secured in the EASC IMTP/ Annual Plan; performance monitoring on a daily basis and month to date position; CASC Monthly quality and delivery meetings with WAST; Bi monthly CASC Quality and Delivery meeting with Welsh Government; CASC monthly Quality and Delivery Meeting with the Welsh Ambulance Services NHS Trust; Commissioner element of EMS Demand and Capacity plan for additional staff supported | EASC IMTP accepted with accountability conditions; awaiting outcome of WAST IMTP; Implementation of the commissioning intentions through the commissioning agreement; Role of the EASC Management Group to provide oversight on operational performance; Development of WAST performance improvement plan; Weekly dashboard of management information developed and shared across NHS Wales to capture progress | Ambulance Service Indicators; Daily weekly and monthly performance reports; Remedial Action plans (if required); Specific targeted actions as required; Commissioner Ambulance Availability Taskforce; Implementation of the Demand and Capacity Review; EASC Action Plan for Minister including monthly submission and review; CASC liaison with Chief Operating Officers (multiple arenas);  | 5x5=25           | CXL<br>4x3= 12  | ↑     | Aug-20 | Dec-22      |
| 4653     | Chief Ambulance Services Commissioner | Set the Strategic Commissioning Plan | Failure by the whole system, policy makers, commissioners and providers to utilise EASC in matters which relate to its areas of responsibility during times of escalation | <p><b>IF:</b> The system does not utilise the arrangements in place at EASC</p> <p><b>Then:</b> The governance and purpose of EASC will be undermined</p> <p><b>Resulting in:</b> a lack of consistency, duplication of services and resources, poor governance and non compliance with the Statutory Instrument leading to unnecessary system pressures</p> | Accountable officers are members of EASC; Memorandum of understanding and commitment from all EASC members; Sharing information on service developments; Alignment to the 6 Goals for Urgent and Emergency Care Policy Steering Board; Model Standing Orders agreed and reviewed annually; Commissioning Frameworks reviewed;   | Collaborative commissioning agreements; EASC Management group representing all organisations; Aligning EASC IMTP with WAST and Health board IMTPs; CASC meeting with Welsh Government planners; CASC IQPD meeting with Welsh Government; CASC Quality and Delivery meeting with WAST; Chair of EASC and CASC meetings with Health Boards; CASC Member of NHS Leadership Board;                                  | Memorandum of understanding; Independent Chair; Governance arrangements; Commitment to collaborative nature of working; External audit; Welsh Government and Commissioner support for EASC; EASC Action Plan EASC Standing orders and Standing Financial Instructions;   | 4x2 =8           | CXL<br>4x1= 4   | ▢     | Aug-20 | Dec-22      |

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| 5005     | Chief Ambulance Services Commissioner | Effective Commissioning           | Failure to take appropriate commissioning actions to support the provider in their management of patient safety and to minimise clinical risk during times of escalation | <p><b>IF:</b> Commissioning actions are not taken to manage patient safety and minimise clinical risks</p> <p><b>Then:</b> Patients are more likely to come to harm</p> <p><b>Resulting in:</b> poorer patient outcomes and patient experience, increased SAIs, litigation and reputational damage</p>   | <p>Discussion at EASC Committee;</p> <p>Discussion at EASC Management Group;</p> <p>CASC and WAST Quality &amp; Delivery meeting;</p> <p>Sought clarification from WAST re Equality Impact Assessment;</p> <p>Agree red lines for handover delays to improve ambulance availability;</p> <p>Securing of funding for additional emergency ambulance capacity</p> | <p>Joint escalation plan developed and approved at NHS Leadership Board;</p> <p>Commissioning Operational Delivery Unit to avoid unilateral WAST decision-making;</p> <p>Provide necessary funding to WAST;</p> | <p>WAST Equality Impact Assessment (to be completed);</p> <p>Commitment to collaborative nature of working and implementation of system-wide escalation policy;</p> <p>Ongoing discussions around system-wide escalation;</p> <p>EASC Management Group agreed to set up two task and finish groups</p> <p>1. Response to Healthcare Inspectorate Wales review related to handover delays</p> <p>2. Appendix B</p> | 5X3 = 15         | CXL<br>5X1 = 5  |       | Dec-21 | Dec-22      |
| 5006     | Chief Ambulance Services Commissioner | Outcome measurement               | Failure to receive timely and quality assured information for publication as a result of the transition to new information systems (ECNS, ePCR)                          | <p><b>IF:</b> Timely and quality assured data is not provided</p> <p><b>Then:</b> EASC will be unable to publish data or assure itself of the quality of service provision</p> <p><b>Resulting in:</b> a lack of consistency and public confidence, duplication of services and resources, poor governance and non compliance with reporting requirements set out in the commissioning framework</p> | <p>Regular meetings with the project team to discuss any issues as well as with the clinical audit team around the development of reporting arrangements;</p> <p>Weekly dashboard of management information developed and shared;</p>   | <p>Provide oversight on operational performance;</p> <p>Implementation plans for new information systems (ECNS, ePCR);</p>  | <p>Ambulance Service Indicators;</p> <p>Daily weekly and monthly performance reports;</p> <p>Remedial Action plans (if required);</p> <p>Specific targeted actions as required;</p>   | 3X4 = 12         | CXL<br>3X2 = 6  |       | Dec-21 | Dec-22      |