

 GIG CYMRU NHS WALES	Iechyd Cyhoeddus Cymru Public Health Wales	Name of Meeting Board Date of Meeting 23 January 2020 Agenda item: 6.1.230120
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Integrated Performance Report

Executive lead:	Huw George, Deputy Chief Executive/ Executive Director Operations and Finance
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Approval/Scrutiny route:	Business Executive Team – 13 January 2020

Purpose

The purpose of the Integrated Performance Report is to provide an update on Public Health Wales' performance, including:

- Progress against our Strategic Priorities
- Operational performance including indicators within the NHS Wales Delivery Framework
- Financial performance – month 9 2019/20
- Workforce performance
- Quality – Putting Things Right
- Progress against Health & Care Standards and Quality indicators – Quarter 3 2019/20

Recommendation:

APPROVE <input type="checkbox"/>	CONSIDER <input checked="" type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
The Board is asked to: <ul style="list-style-type: none"> • Discuss and scrutinise the paper and provide feedback and comments 				

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.

In order for Public Health Wales to deliver our strategic plan, effective performance management arrangements need to be in place to monitor and report on progress against achieving our strategic priorities to improve health outcomes. This intelligence is used to draw the Board's attention to areas of underperformance and is fundamental for effective and efficient decision making.

This report contributes to the following:

Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives
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Summary impact analysis

Equality and Health Impact Assessment	An Equality and Health Impact Assessment is not required. Equality and Health Impact Assessments will be completed as part of delivery of the specific actions within the Plan.
Risk and Assurance	Our Strategic Risks are detailed within Our Strategic Plan
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes All themes
Financial implications	An update on the organisation's financial performance is enclosed
People implications	An update on the organisation's people performance is enclosed

1. Purpose / situation

The purpose of the Integrated Performance Report is to provide the Board with an update on Public Health Wales' performance, including:

- Progress against our strategic priorities
- Operational performance including indicators within the NHS Wales Delivery Framework
- Financial performance – month 9 2019/20
- Workforce performance
- Quality – Putting Things Right
- Progress against Health & Care Standards and Quality indicators – Quarter 3 2019/20

2. Background

The Integrated Performance Report is discussed and scrutinised at each Board meeting as part of the regular agenda items.

3. Description/Assessment

A summary of key performance highlights and key performance issues by Strategic Priority area is provided in the main body of the report, and is supported by supplementary information in Annex A of the Integrated Performance Report.

3.1 Well-being of Future Generations (Wales) Act 2015



Ensures Public Health Wales is able to successfully monitor the delivery of its Long Term Strategy and Integrated Medium Term Plan. Areas of underperformance can be identified with earlier intelligence to aid decision making.



Effective and efficient decision making by Senior Managers, Executive Team and the Board is paramount to successful performance of the organisation in order for it to achieve its purpose, whilst preventing the potential to cause harm through underperformance.



The development of Public Health Wales' Long Term Strategy and Integrated Medium Term Plan was grounded in collaboration and integration across our workforce. To demonstrate that the

organisation is achieving what it set out to achieve over the short, medium and long term, high quality monitoring and reporting of information is essential through the integrated performance report.



Reporting of data and information through the integrated performance report requires collaboration across the organisation to ensure timely delivery of key service, quality, workforce and financial data. The potential for the development of business intelligence tools will require close working relationships with Directorates and especially Informatics to maximise potential.



To ensure compliance with the Welsh Audit Office Structured Assessment, agreeing and reporting Division / Directorate level performance measures will require involvement across the full breadth of the organisation. Monitoring and reporting against the strategic plan will involve working closely with staff to ensure accurate and timely intelligence for the Executive Team and Board.

4. Recommendation

The Public Health Wales Board is asked to:

- **Discuss** and scrutinise the paper and provide feedback and comments

INTEGRATED PERFORMANCE REPORT

December 2019

Report authors:

Huw George (Deputy Chief Executive and Director of Operations and Finance); Phil Bushby (Director of People and Organisation Development); Rhiannon Beaumont-Wood (Executive Director of Quality Nursing and Allied Health Professionals); Angela Fisher (Deputy Director of Finance); Ioan Francis (Head of Performance)

Version: v1a



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Introduction

To support the delivery of our Long Term Strategy, we actively monitor progress against our strategic priorities. The Integrated Performance Report provides a comprehensive overview of our strategic and operational performance, set alongside our people, quality and financial performance. Where possible, the following report is presented through the lens of our seven long term priorities for 2018-2030. As we look to develop outcome goals, and realign our people and resources to support the delivery of our strategy, we will further develop and strengthen our performance reporting so that it aligns with the proposed shift towards a more devolved model, as defined by our Long Term Strategy.

Our ambition for the people of Wales is that by 2030 they will:

- have a more equal chance of living a fulfilling life, free from preventable ill health
- know how to support their families' mental well-being, that supports everyone to be mentally healthy citizens with greater resilience and a greater level of mental well-being
- live in an environment and society in which healthy choices are the easy choices; and in a Wales where
- more children will have achieved their full potential

We want a Wales with:

- reduced infections and which is prepared for and able to deal with the expected effects of climate change
- where the balance has shifted from hospital to community based care; reduced burden of disease from long term conditions with reduced incidence, improved early detection and survival outcomes; and also a Wales where
- population health services and interventions are based on world class intelligence and analysis, giving maximum return on investment



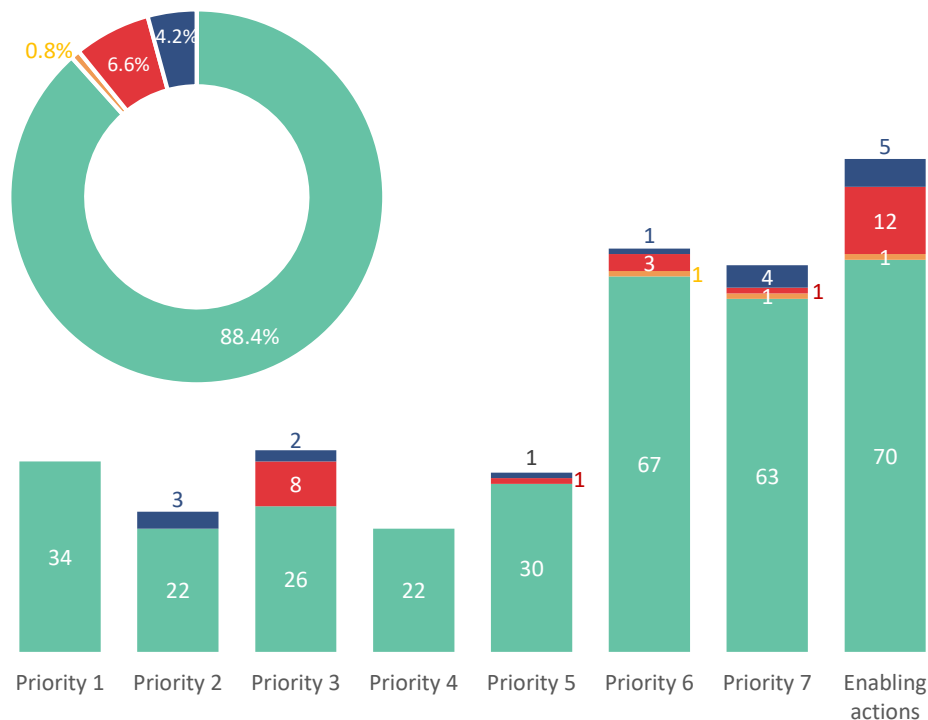
To secure this ambition, *Working to Achieve a Healthier Future for Wales* has seven priorities and each has defined:

- the difference we will have made by 2030
- how we will work
- medium term objectives to 2022
- a product map providing a blueprint for delivery
- short term (annual) plans

Annex A comprises the digest of information from which this summary report is derived.

Summary of performance

Progress across all Strategic Priorities – December 2019



Performance highlights to note

- Month 9 revenue position is a small surplus of £52K, and currently anticipating a breakeven position at year end.
- Number of complaints responded to within 30 working days of receipt remains much improved at 93% between 1 October and 31 December 2019.
- Good progress continues to be made against Health & Care Standards and Quality indicators at Quarter 3 2019/20.
- AAA surveillance uptake (medium) has risen from 90.5% to 97.9%.
- Diabetic Eye Screening result letters timeliness has met standard for the sixth consecutive month following significant performance issues.

Status

Of the 378 actions being tracked this year, 88% are being reported on target or completed, with a further 150 being delivered during the final quarter of this year's plan. All strategic priorities are showing a good level of delivery with 34 actions completed during December.

To date, the Strategic Priorities Coordination Group (SPCG) has approved six requests to rollover actions into the 2020/2021 plan.

The change process continues to mature across the organisation. 19 requests for change have been received by the SPCG for information / consideration on 06 January 2020, of which 18 will be delivered by March 2020: one was a request to rollover into 2020/21 plan.

Full details of the requests for change can be viewed [here](#)

Key Actions

- Development of the Integrated Medium Term Plan 2020-2023 has continued with approval being sought in January 2020.
- An informal Board Session was held on 12 December 2019 which included an update on the outcomes framework. Work will continue during 2020.
- The People Strategy which will be submitted for approval in January 2020.

The online Annual Plan 2019/20 reporting tool can be accessed [here](#)

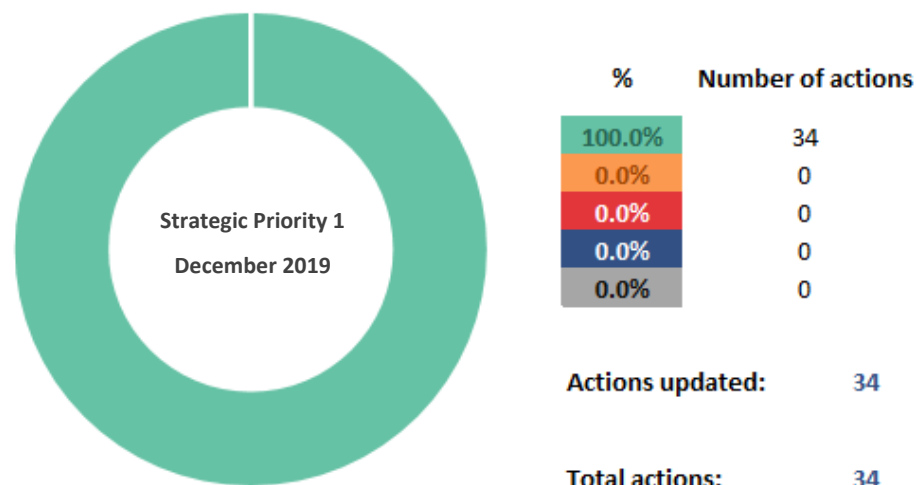
Performance challenges to note

- Breast Test Wales assessment waits fell in December (down 33.1%) and remains significantly below the 90% standard at 30.5%
- Bowel Screening Wales waiting time for colonoscopy declined by 21.8% over the latest period (from 68% to 46.2%)
- All-Wales C.difficile, Staph. aureus and E. Coli bacteraemia rates remain above national reduction expectations for December 2019.
- Appraisal & Statutory & Mandatory training compliance remain below target
- At the end of Q3 2019/20, 21 organisations have achieved a Small Workplace Health Award from an annual target of 100 (21% attainment).

By 2030, we will:

- have a learning environment in schools and other educational settings that better improve health
- have established the sustainable development principle as a way of working and we are enabling high quality Health Impact Assessment across Wales
- have influenced the main employers in Wales to create good work, maintain employment and invest in staff health and well-being
- be a leading source of advice and evidence on the wider determinants of health to key decision makers
- have improved the quality and accessibility of housing in Wales through an innovative health and housing partnership
- have worked with partners to maximise the potential of the built and natural environment to improve health and well-being

Summary of performance – December 2019



Annual Plan 2019/20

Good progress continues to be reported, of the 34 actions 19 have been completed with the remainder being on target for completion by the end of the year. Of those reported as completed in December, these included:

- proposals were developed for new Healthy Working Wales online assessment tools for employers (OP/16)
- priority areas for collaborative health and housing action were identified (based on learning from the Making a Difference Report) (OP/21)
- engagement with key partners was completed in relation to the *Joint Action for Health Equity Europe Country Assessment* –(OP/24)

Performance indicators – Quarter 3 2019/20

Healthy Working Wales

	Q1	Q2	Q3	Target
Organisations completing a CHS mock assessment	1	2	3	25
Private sector organisations completing mock assessment	0	1	2	5
Organisations completing a full assessment	2	5	3	25
Private sector organisations	0	1	1	5
Organisations achieving a Small Workplace Health Award	1	10	10	100

Further information available [here](#)

Performance indicators – Quarter 3 2019/20

Cause:

- Service delivery affected as HWW is not at full capacity to meet targets.
- During a period of 3 months there was only 1.3WTE covering whole of Wales.

Action:

- Interviews took place in October 2019 but staff will take time to be fully trained.
- Recruitment of 3 further posts (covering 2.6WTE) will start in January 2020.
- Once WG confirmed funding and approval for new delivery model, this will include appointment of more HWW staff.

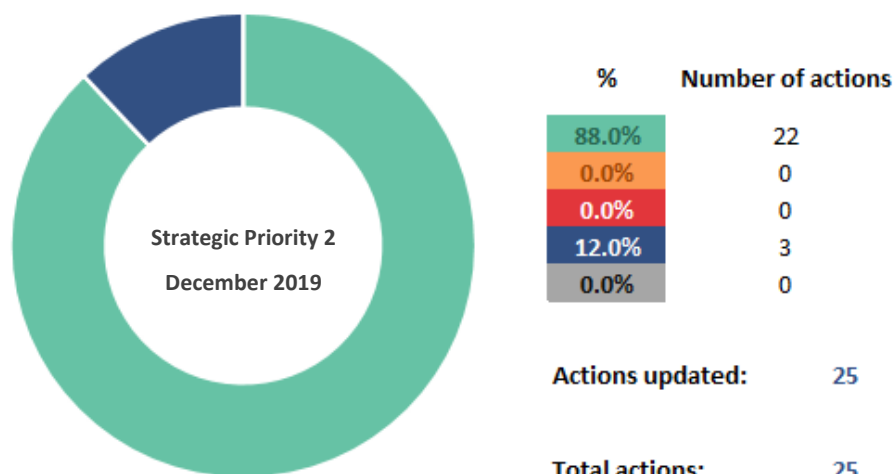
Improving mental well-being and resilience



By 2030, we will:

- be leading an ongoing national conversation on what is important to the public and what helps us to attain better mental well-being
- be responding to the ever changing social and economic environment and working with our partners to stimulate collective action to improve outcomes
- be actively monitoring the mental well-being of the population and are using this to influence policy, strategy and programmes
- have supported partners in promoting mental well-being and resilience including reducing the impact of ACEs / trauma
- have facilitated a trauma and resilience informed Wales – aiming to break generational cycles of poor mental and physical health outcomes

Summary of performance – December 2019



Annual Plan 2019/20

Good progress continues across four strategic objectives which comprise 25 actions. Of these nine have been completed, including in December:

- Recommendations to inform the roll out for the evaluation of education training in secondary schools (OP/53)

Progress affected by external dependency

As previously reported in November 2019, progress on activities across three areas has stalled, namely:

- Welsh Network of Healthy School Schemes (OP/41, OP/42)
- Employer support activity (OP/44)

The slippage is attributed to delays in Welsh Government decision making.

Performance indicators – Quarter 3 2019/20

Welsh Network of Healthy Schools	Q1	Q2	Q3	Target
Schools achieving level 1 – 5 award (78% attainment)	45	54	41	180
Schools achieving the National Quality Award (42% attainment)	17	2	2	35

Further information available [here](#)

Performance indicators – Quarter 3 2019/20

Cause:

- Demands on schools due to preparation for the new curriculum make this an exceptional year. There are 5 NQA assessments scheduled for Quarter 4, which will bring performance to 74% over the academic year.

Action:

- Support pioneer schools over the roll out of the curriculum from January 2020 and we anticipate the demand from other schools will then resume over 2020-21 as they seek to implement a whole school approach to health and wellbeing.

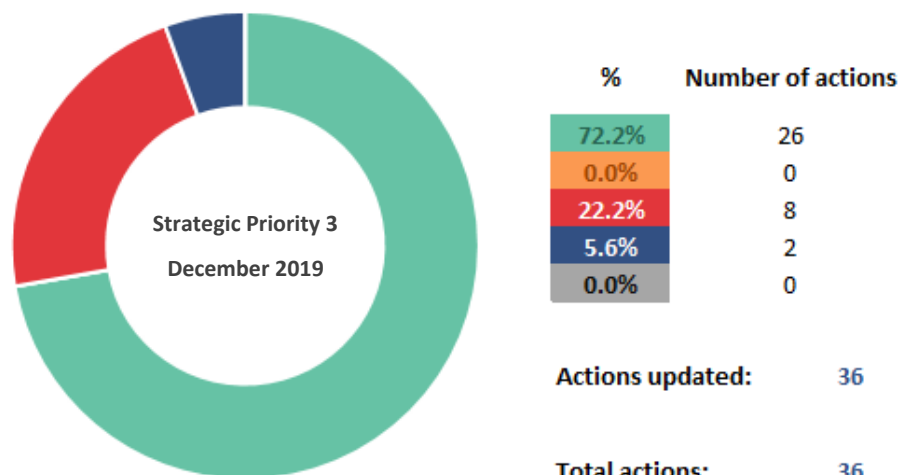
Promoting healthy behaviours

Promoting
healthy
behaviours

By 2030, we will:

- work with Welsh Government and others to deliver year on year increases in the proportion of children and young people who are smoke free and help an increasing number of smokers to quit
- have significantly increased the proportion of children and young people in Wales who are a healthy weight when they start school and into adulthood
- work to create co-ordinated action across the whole system to support healthy food choices and promote a more active Wales
- have changed social norms about the acceptability of a range of health harming behaviours

Summary of performance – December 2019



Annual Plan 2019/20

Of the 36 actions, reported progress across the strategic objectives has been variable. 17 actions have been completed, including during December:

- the completion of the *Hands Up Survey* scale up study and recommendations produced (OP/71).

Reported Slippage

As reported to the Board in November 2019, programmes on alcohol and drugs use have been suspended owing to a combination of the complexity of the initial work involved and workforce issues (OP/74-OP/80). Work is ongoing as part of the IMTP development process, to avoid these issues going forward.

In addition the Operating Model for the establishment of a Behaviour Change Support Unit (OP/89) has been delayed owing to exploratory discussions with partners taking longer than anticipated. It is planned that this will be delivered in January 2020.

Progress affected by external dependency

The procurement of a *Help Me Quit* client management system (OP/60) has been delayed owing to the need to secure agreement on requirements for the new system with the Welsh Government's Smoking Cessation Subgroup. The expected completion date is unknown.

An agreed evaluation framework produced for the Healthy Weight: Healthy Wales strategy (OP/63) has been delayed owing to the publication of the Welsh Government Healthy Weight: Healthy Wales Strategy Delivery Plan being delayed until February 2020.

Performance indicators – Quarter 3 2019/20

Smoking Prevention Programme	Q1 19/20	Q2 19/20	Q3 19/20	Target
Number of secondary schools targeted (65% attainment – expected to reach target by the end of academic year, July 2020)	16	0	23	60

Further information available [here](#)

Securing a healthy future for the next generation



By 2030, we will:

- seek to ensure that every child has the best start in life and will have promoted and supported an integrated population based support system for all parents and families
- have increased the proportion of settings that take action to promote health in early years
- have worked with partners to reduce abuse and neglect of children

Summary of performance – December 2019



%	Number of actions
100.0%	22
0.0%	0
0.0%	0
0.0%	0
0.0%	0

Actions updated: 22

Total actions: 22

Annual Plan 2019/20

Very good progress continues to be reported. Of the 22 actions, ten are reported as completed to date and the remainder are reported as being on track for completion by the end of the year. In December the following activity was completed as planned:

- National activity of the '10th Anniversary' of Designed to Smile engagement campaign was overseen and co-ordinated (OP/108)

Protecting the public from infection and environmental threats to health



By 2030, we will:

- have contributed significantly to reductions in morbidity and mortality linked to infections
- be collating and utilising health data sourced across the health and care system to direct prevention activities and identify earlier opportunities for intervention (timely diagnosis and appropriate treatment)
- have established strengthened capacity in Wales for early warning, risk reduction and management of national and global health risks
- be recognised as system leaders for healthcare associated infections and antimicrobial resistance
- have worked with partners to reduce mortality and morbidity attributed to factors such as the impact of climate change and air pollution

Summary of performance – December 2019



%	Number of actions
93.8%	30
0.0%	0
3.1%	1
3.1%	1
0.0%	0

Actions updated: 32

Total actions: 32

Annual Plan 2019/20

Good progress continues to be made. Of 32 actions, 20 have been completed on target including four in December:

- implementation of the *Linked Environment for Prevention of Opioid Related Death Research* project initiated to reduce future morbidity and mortality (OP/133),
- Contributed to Welsh Government Clean Air Plan (OP/141),
- Supported Welsh Government to draft tender invitation for the Air Quality Evidence, Innovation and Improvement Project (OP/142)
- Workforce development / education scoping exercise undertaken and report published (Microbiology Transformation Plan) (RO/9).

Reported slippage

Report on feasibility of whole-genome sequencing of Enterovirus isolates in Wales (Subject to funding) (OP/129) delay caused by significant health protection service issues which has led to delay generating required data. This will be reviewed in three months and a limited report will be submitted if capacity is still not available.

Performance indicators – December 2019

Healthcare Associated Infections

Clostridium difficile rate	26.0 per 100,000	↓ 4.3	Above ≤25 target
Staph aureus rate	27.5 per 100,000	↑ 3.8	Above ≤20 target
E.Coli bacteraemia rate	74.9 per 100,000	↓ 0.5	Above ≤67 target

Full suite of data on HCAI, Vacc & Imms & Microbiology is available [here](#)

ACTION

- Team continues to provide significant support to Swansea Bay UHB including epidemiological support, attendance at outbreak meetings and support for new healthcare epidemiologists
- Support requested by Aneurin Bevan UHB in relation to Klebsiella BSI increases
- Data prepared for Drug-Resistant Surveillance for UK 4-Nations level meeting held on 15 January 2020
- Paper submitted to UK AMR National Action Plan oversight board regarding data sets collected on HCAI & AMR data sets.

Further information available [here](#)

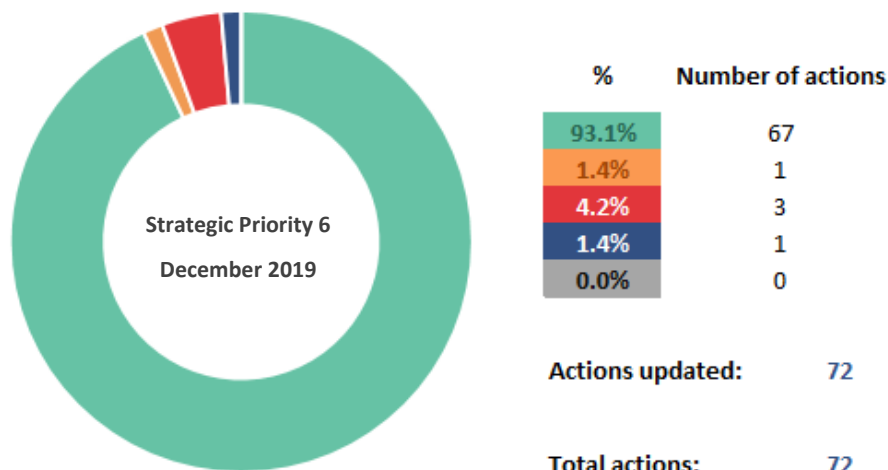
Supporting the development of a sustainable health and care system focused on prevention and early intervention

Supporting the development of a sustainable **health and care system** focused on **prevention** and **early intervention**

By 2030, we will:

- maximise opportunities to prevent disease through health service interactions with patients
- increase disease prevention and earlier intervention through approaches to maintain and improve focus on national population-based screening programmes. When disease is detected, pathways of care will be seamless
- reduce variation and inequality in care and harm in its deliver
- support care moving closer to the home and centre it round patients and carers

Summary of performance – December 2019



Performance indicators: highlights

Cervical Screening Wales – Waiting time from sample to screening test result (4wks)

97.5% ↑ 0.7% Above 95% standard

Diabetic Eye Screening Wales – Results letters printed within 3 week of screen date

99.9% ↓ 0.1% Above 85% standard

Abdominal Aortic Aneurysm Screening Wales – Surveillance uptake (medium)

97.9% ↑ 7.4% Above 90% standard

Full suite of screening data available [here](#)

Annual Plan 2019/20

Of the 72 actions, 35 have been delivered on time with the following being reported as delivered in December:

- Two year Frequent Attender programme completed (OP/145)
- Safeguarding Maturity Matrix - Peer Review event taken place and Peer Review Report co-produced. (OP/170)
- All Wales Framework for prevention in clinical settings agreed and tested using hypertension as the first example (OP/194 and OP/195)
- Knowledge, skills and competencies required for National Exercise Referral Scheme staff identified (RO/12)

Reported slippage

Three areas of slippage have been reported. All expect to have revised completion dates within the next three months.

Strategy for the management of hypertension in clinical settings agreed (OP/196) delayed owing to workforce issues.

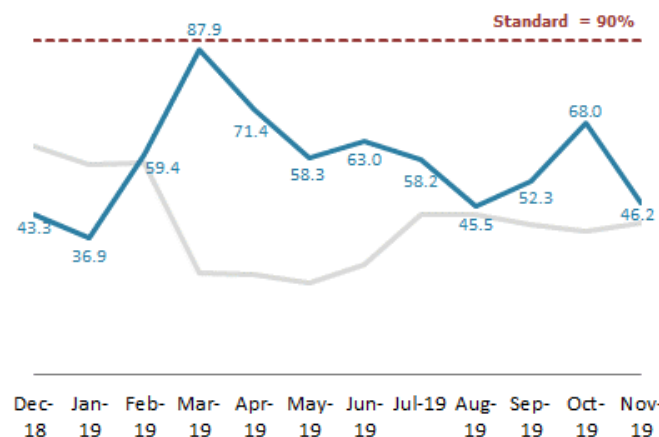
Evidence review conducted to identify which target groups have the greatest capacity to benefit from the National Exercise Referral Scheme (NERS) (OP/199) affected by other priorities in the Programme and limited team capacity.

Diabetic Eye Screening Wales: Complete process of outsourcing of results and invitation letters OP/181) delay while awaiting agreement of specification and timescales with IT supplier.

Performance indicators: challenges

Bowel Screening Wales

Percentage waiting time for colonoscopy within 4 weeks of booking appointment



ACTION

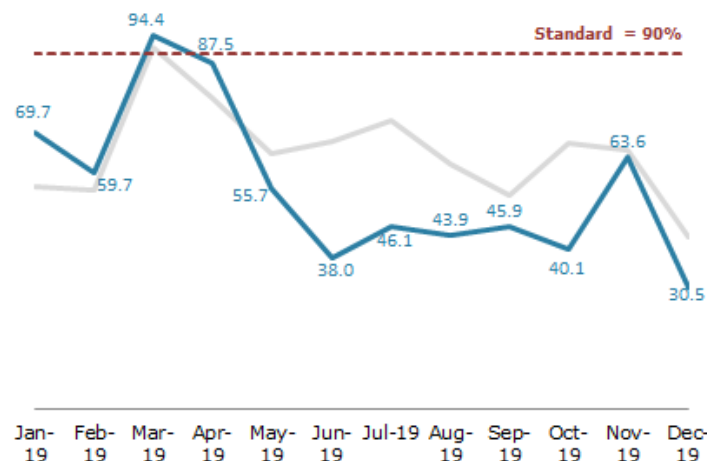
- Actively monitoring the three Health Boards that have had continuous poor performance and have submitted recovery plans.
- Recovery plans typically entail the use of insourcing, cross health board cover, and the provision of additional screening lists.
- Accreditation of additional screening colonoscopists (two due to undertake the assessment process in March 2020).
- Implementation of the new BSG surveillance guidelines is now being seen, with a reduction in surveillance demand freeing up slots for index procedures.

A media campaign is being launched on 1st February for 6 weeks with the aim of increasing bowel screening participation. Activities include TV, social media, press adverts and leaflet drops with elements of the campaign targeting audiences where lower uptake is seen.

Further information available [here](#)

Breast Test Wales

Percentage of assessment invitations given within 3 weeks of scan



ACTION

- Additional assessment clinics commenced in West Wales region with the aim of reducing overall waits
- Breast Clinician based in Cardiff has moved their job plan to Swansea to provide further on-site support (December 2019 – February 2020)
- Weekly escalation meetings underway in West Wales Centre to further actively manage the assessment pathway
- Job plans of clinicians have been re worked in West Wales region to provide further cover
- North Wales region will be providing film reading support from January 2020 to West Wales to further support waits
- A Health Inspectorate Wales review is being planned in 2020 on this pathway with scope and timescales confirmed in January 2020
- Recruitment of medical specialist medical staff to fill vacancies will be the long term goal for sustainable provision

Further information available [here](#)

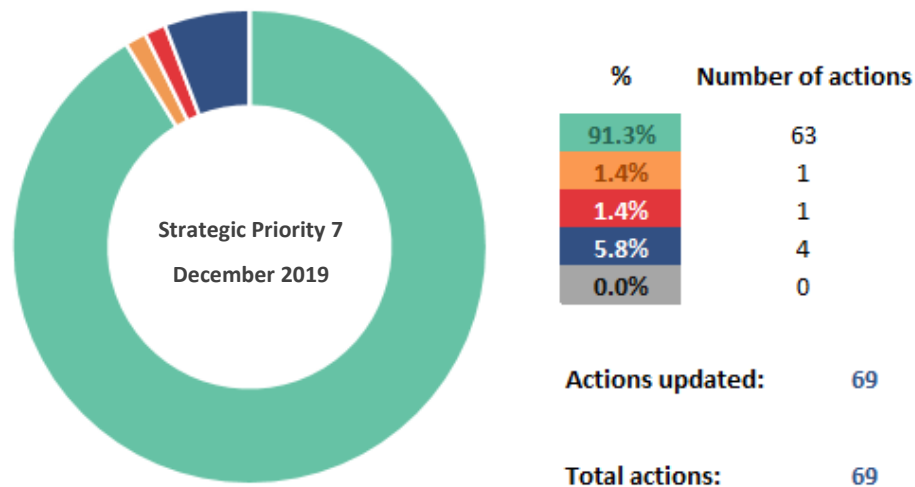
Building and mobilising knowledge and skills to improve health and well-being across Wales



By 2030, we will:

- have a thriving research and development environment, drawing from and contributing to the best international evidence, attracting diverse investment and employing research talent from around the world
- be an international exemplar and trusted national resource in the use of evidence and intelligence to inform decision making for health
- be a recognised lead in the mobilisation of knowledge for population health, through system wide leadership
- have influenced key decision makers through a knowledge - informed, health impact, future-focused and sustainable approach

Summary of performance – December 2019



Annual Plan 2019/20

Good progress continues across the strategic objectives within this priority area. Of the 69 actions, 30 are reported as being complete, including seven in December:

- Development of business case to support investment in operational model Sustainable Development tools and resources for an international audience to meet the commitments to the WHO Collaborating Centre (OP/232)
- A report on using technology to prevent violence and its impact on health and well-being (OP/236)
- Contribution to MPH Global Health module with Cardiff University established (OP/256)
- Awareness raising workshop for Health visitors/midwives and asylum seeker support workers (OP/258)
- Asylum seekers and refugees 'Treat me Fairly' online module for NHS Staff launched (OP/259)
- Assess need for expansion to programme to support new operational model re: SO 7.2 and develop plan for knowledge mobilisation (OP/268)
- Business case approved for NHS Wales Awards 2020 (OP/276)

Reported Slippage

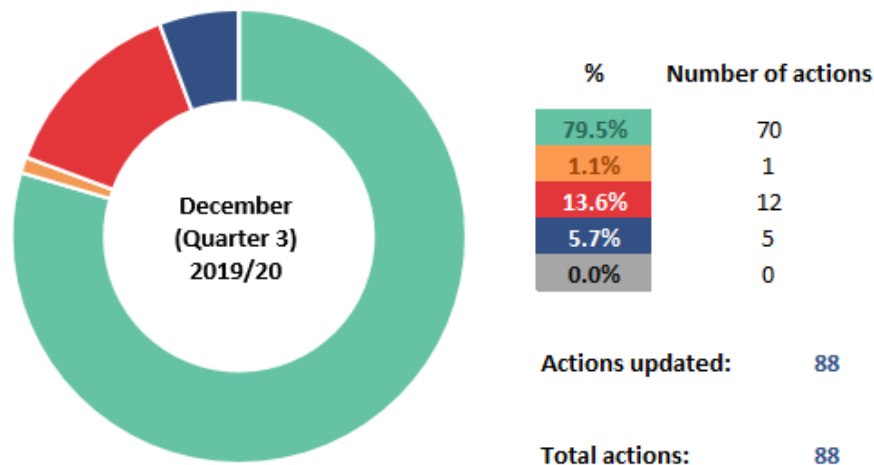
Webinar held to engage with WHO member states to understand their training needs (OP/223) – revised timescale of March 2020.

Enabling delivery of our strategic priorities

We are supported by a number of internal enabling functions whose work is critical to delivering our seven strategic priorities. The enabling functions support the organisation through:

- Developing a future operating model for the organisation
- Supporting the implementation of the Well-being of Future Generations Act
- Promoting knowledge and intelligence
- Developing our digital and information systems
- Ensuring that we have a safe and appropriate environment
- Developing our people and organisation
- Transforming planning and implementation of change
- Delivering quality and measuring our impact
- Ensuring our financial behaviours encourage, incentivise and add value
- Communicating effectively with our people, partners and the public

Summary of performance – December 2019



Annual Plan 2019/20

Steady progress has been across the enabling functions. Of the 88 actions 56 are completed including 11 in December.

- Completed phase 2 firewalls (OP/290)
- Implementation plan developed following informatics review (OP/299)
- Scope developed for Our Space North Wales (OP/303)
- Framework pilot started for recruitment & development processes (OP/311)
- Organisational approach to talent management developed (OP/316)
- Integrated governance approach for PHW approved (OP/331)
- Full savings identified to support the recurrent investment bid (OP/338)
- A plan for Value in Finance developed and used to develop a budgetary framework (OP/340 and OP/341)
- Awareness campaigns guidance committee established (OP/356)
- Three year Corporate Workforce plan developed (OP/358)
- Supported mapping and assessing “quality” of the sources of assurance (RO/19)

Reported Slippage

Slippage has been reported in the following areas:

Several Informatics deliverables have been delayed and will be considered at the Strategic Priorities Coordination group on 6 January 2020 (OP/295,296,297,298,)

Several Quality, Nursing & Allied Health Professionals deliverables have been delayed. Delivery is expected to be completed by March 2020. (OP/288,330,332,334)

Reported Slippage (continued)

Scope & design financial analytics to operations and business functions (OP/335)

Set out strategy for national events (OP/346) delay caused by challenges in gathering data from across the organisation

Several Governance deliverables have been delayed (RO/20,21) – requests for change will be considered at the SPCG on 6 January 2020

1. Introduction and Context

The purpose of this report is to outline to the Executive Team and the Board the revenue and capital position for Public Health Wales as at 31 December 2019 (M09), which is also circulated to the Audit and Corporate Governance Committee. The content of this report is reflected in the Director of Finance commentary that has been submitted to Welsh Government on 14 January 2019 as part of the full financial monitoring return for Month 9.

2. Summary of Key Financial Performance

The cumulative reported position is a net surplus of £52k, and is summarised in the table below:

Target	Current Month	Year to Date	Year-end Forecast
Revenue financial target Deficit/(Surplus)	20K	(52K)	Breakeven
Capital financial target	(33K)	(533K)	Breakeven
Public Sector Payment Policy	96%	96.61%	>95%

Cumulative Position

-£52K Surplus

Income £'000

-£115K

Annual Budget	-£150.21M
YTD Budget	-£110.55M
YTD Actual	-£110.67M

Pay £'000

-£1,252K

Annual Budget	£94.30M
YTD Budget	£69.69M
YTD Actual	£68.44M

Non-Pay £'000

£1,315K

Annual Budget	£55.91M
YTD Budget	£40.86M
YTD Actual	£42.18M

2.1 Key Actions

- The month-end position for Public Health Wales is a surplus of £52k. This consists of variances across Public Health Wales that will be monitored as part of our ongoing budgetary control process.
- Directorate forecast positions for year-end have been completed and agreed with Executive Directors as part of the mid- year reviews. Assurance has been received to confirm that Directorates have robust spending plans in place for Quarter 4 in order to deliver the agreed year-end forecast of break-even. Details of this are included in section 8 of this report.

3. Financial Performance by Directorate

Financial Position By Directorate £'000

Directorate	Annual Budget	YTD Budget	YTD Actual	YTD Variance	% YTD Var / YTD Bud
Public Health Services Directorate	51,444	37,360	37,781	422	1.13%
Central Budgets Directorate	-96,550	-70,668	-70,511	157	-0.22%
Operations and Finance Directorate	8,156	6,149	6,160	11	0.18%
NHS Quality Imp Division	3,721	2,829	2,834	5	0.17%
Board and Corporate	1,962	1,466	1,469	3	0.22%
ACE's Hub Directorate	100	54	54	0	0.00%
Hosted Directorate	-1	-99	-99	-0	0.00%
WHOC Collaborating Center Directorate	2,140	1,484	1,477	-8	-0.52%
Workforce & Org Develop Directorate	1,617	1,214	1,179	-35	-2.87%
Quality Nursing & Other Allied Profs Direc	2,285	1,703	1,564	-139	-8.19%
Knowledge Directorate	4,014	2,835	2,688	-147	-5.20%
Health & Wellbeing Directorate	21,113	15,673	15,353	-321	-2.05%
Grand Total	0	0	-52	-52	0.00%

Financial Position By Income Pay Non Pay £'000

Directorate	Income	Pay	Non Pay	Grand Total
Public Health Services Directorate	-118	-380	920	422
Central Budgets Directorate	12	-44	189	157
Operations and Finance Directorate	-2	-73	87	11
NHS Quality Imp Division	-1	5	1	5
Board and Corporate	-1	-25	29	3
ACE's Hub Directorate	0	0	-0	0
Hosted Directorate	-0	-0	-0	-0
WHOC Collaborating Center Directorate	0	-21	14	-8
Workforce & Org Develop Directorate	-2	-33	-0	-35
Quality Nursing & Other Allied Profs Directorate	-2	-127	-10	-139
Knowledge Directorate	-1	-180	34	-147
Health & Wellbeing Directorate	0	-372	52	-321
Grand Total	-115	-1,252	1,315	-52

3.1 Key Actions

Key overspends reported in Month 9:

- Public Health Services Directorate – Over spend of £422k is after the release of funding as agreed as part of the mitigating actions against spending pressures within Microbiology and after reflecting the outcome of the November stock take. **ACTION:** After the release of funding and stock take adjustments a breakeven position was anticipated for month 9. Work is ongoing to investigate the non-pay position within Microbiology, the main reason for the deviation from the plan, and to identify further mitigating actions to deliver a breakeven position.
- Central Budgets – Over spend of £157k is predominantly due to Public Health Wales contribution to the increased costs of the Welsh Risk Pool.

Key underspends reported in Month 9 are all in respect of vacancies and delayed recruitment plans within the following Directorates:

- Health & Wellbeing Directorate – Under spend of £321k is mainly due to Local Public Health Team vacancies plus the vacant Deputy Director post.
- Knowledge Directorate – Under spend of £147k is due to vacancies within most of the divisions across the Directorate.
- Quality, Nursing & Other Allied Professionals – Under spend of £139k. This relates predominantly to pay underspends due to a number of vacancies

ACTION: recruitment plans are constantly being revised and monitoring will continue to ensure an accurate reflection within the Directorates year-end financial positions.

4. Savings

Recurrent Savings By Directorate £'000

Directorate	Annual Savings £'000
Public Health Services	472
Organisational Efficiency	458
Health & Wellbeing	247
Ops & Finance	77
NHS Quality Improvement	36
Policy, Research & International Development	24
Quality, Nursing & Other Allied Health Professionals	23
Board & Corporate	18
Workforce & OD	15
Ace's Hub	1
Grand Total	1,371

The savings target needed in order to deliver the full investment programme on a recurrent basis is £1.371m. However, due to the profiling of the expenditure plans of the investment bids then the savings achieved for 2019/20 are £1.177m.

Of this, £913k relates to the 1% savings target assigned to each Directorate. £257k of which was met by increased vacancy factors. Based on the Month 9 pay position the increased vacancy factors are being achieved and will continue to be monitored on a monthly basis. The remaining element of £656k was met by changes within staffing establishments and non-pay efficiencies. Whilst the relevant budgets have been reduced by the associated efficiencies, we need to monitor whether actual savings have been achieved as proposed.

ACTION: Continue to work with Directorate leads to ensure that the efficiencies are being delivered on an ongoing basis.

4.1 Key Actions

We currently have £0.293m of unidentified recurrent savings (2020/21) associated with the Organisational Efficiency work streams. A detailed report on the progress of each of the Organisational efficiency work streams has been completed and shared with Executives. A monthly update report is submitted to Executives each month on the current position on the individual schemes.

Organisational Work Stream	2019/20 Target £	2019/20 Plans £	2019/20 +/- £	Recurrent Target £	Recurrent Plans £	Recurrent +/- £
Workforce	50	51	1	261	7	-254
Estates and Accommodation	50	89	39	65	59	-7
Procurement	65	37	-28	131	144	13
Total	165	177	12	457	210	-247

The latest update confirms that the Trust has met the Organisational efficiency target of £165k for 2019/20. Further work is required to ensure that 2020/21 all work streams deliver the recurrent position.

ACTION: Continue to work on the 2020/21 efficiency savings. Audit Corporate Governance Committee will receive a detailed report at the next meeting to be held on the 19th March 2020.

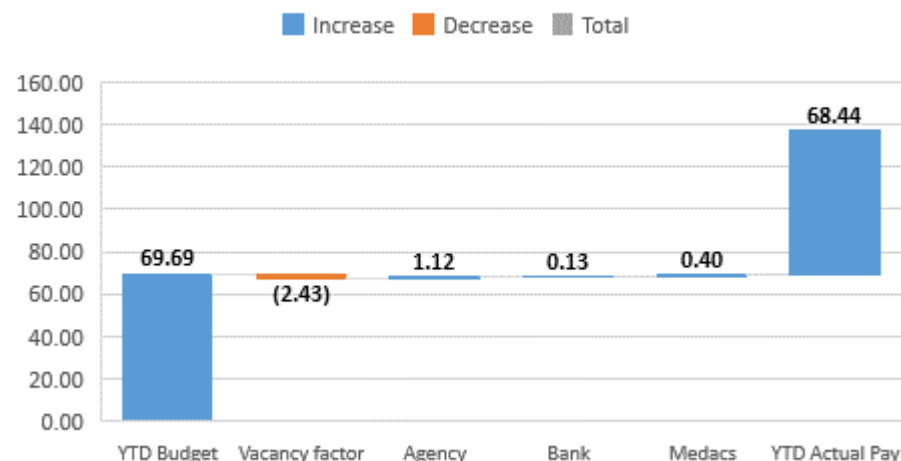
5. Pay Analysis

Further information on Agency Spend can be viewed [here](#)

Pay Position By Directorate £'000

Directorate	Annual Budget	YTD Budget	YTD Actual	YTD Variance	% YTD Var / YTD Bud
NHS Quality Imp Division	4,114	3,033	3,038	5	0.17%
ACE's Hub Directorate	377	291	291	0	0.00%
Hosted Directorate	9,608	7,050	7,050	-0	0.00%
WHOC Collaborating Center Directorate	2,884	2,145	2,124	-21	-1.00%
Board and Corporate	1,911	1,426	1,401	-25	-1.77%
Workforce & Org Develop Directorate	1,536	1,173	1,140	-33	-2.79%
Central Budgets Directorate	947	684	640	-44	-6.46%
Operations and Finance Directorate	5,210	3,784	3,710	-73	-1.93%
Quality Nursing & Other Allied Profs Dir	2,146	1,594	1,467	-127	-7.97%
Knowledge Directorate	3,951	2,905	2,725	-180	-6.21%
Health & Wellbeing Directorate	16,883	12,747	12,374	-372	-2.92%
Public Health Services Directorate	44,737	32,861	32,480	-380	-1.16%
Grand Total	94,303	69,691	68,439	-1,252	-1.80%

Cumulative Pay Bill - Workforce Trends



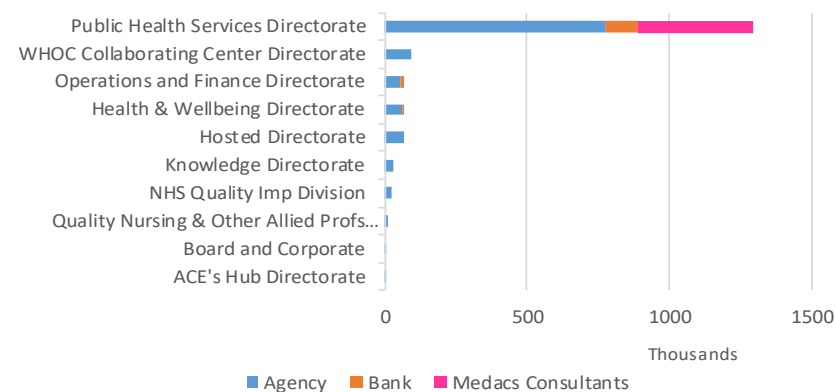
5.1 Key Actions

The overall pay position for Public Health Wales at month 9 is an underspend of £1,252m, this is after taking into account £2.43m negative budget for vacancy/turnover factor. Agency costs in month 9 are lower than the trend of 2018/19, equating to 1.6% (2018/19 – 2.6%) of total pay expenditure. This is mainly in respect of the way we are now reporting the two microbiology consultants employed to work in North Wales, which are now directly engaged.

As at month 9 Public Health Services are underspending on pay by £380k mainly as a result of Screening under spending by £270k. This is due to vacancies within Breast Test Wales and Diabetic Eye Screening. Recruitment is continuing within both these Programmes. There are also vacancies within Specialty Registrars and Health Protection that are contributing £86k to the position. Release of agreed funding to mitigate pressures in Biomedical Scientists and Consultants workforce within microbiology has offset previous pay overspends. **ACTION:** Continue to monitor Directorate vacancies and recruitment plans to ensure an accurate reflection within the year-end financial position.

Health & Wellbeing, Knowledge and Quality, Nursing and Other Allied Professions are underspending by £372k, £180k and £127k respectively. Please refer to 3.1 for details. **ACTION:** As per 3.1

Variable Pay By Directorate

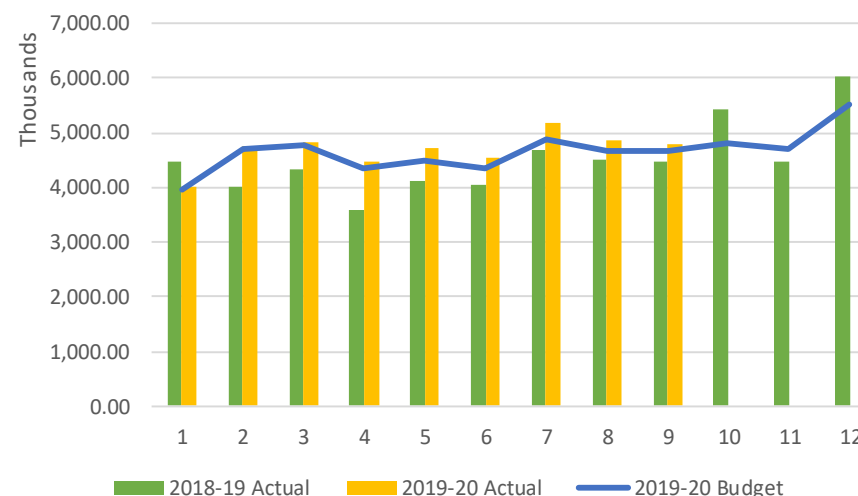


6. Non Pay Analysis

Non-Pay Position By Directorate £'000

Directorate	Annual Budget	YTD Budget	YTD Actual	YTD Variance	% YTD Var / YTD Bud
Public Health Services Directorate	28,866	21,196	22,116	920	4.34%
Central Budgets Directorate	3,791	2,824	3,013	189	6.71%
Operations and Finance Directorate	3,525	2,670	2,756	87	3.25%
Health & Wellbeing Directorate	7,177	5,181	5,233	52	1.00%
Knowledge Directorate	521	314	348	34	10.96%
Board and Corporate	158	121	150	29	24.01%
WHOC Collaborating Center Directorate	691	420	434	14	3.23%
NHS Quality Imp Division	1,291	940	940	1	0.07%
ACE's Hub Directorate	123	63	63	-0	0.00%
Hosted Directorate	9,235	6,722	6,722	-0	0.00%
Workforce & Org Develop Directorate	342	267	267	-0	-0.11%
Quality Nursing & Other Allied Profs Directori	185	143	134	-10	-6.87%
Grand Total	55,905	40,861	42,176	1,315	3.22%

Non Pay Run Rates



6.1 Key Actions

Non-pay has been profiled according to expenditure plans received to date. As at month 9 the key areas of overspend are:

- Public Health Services – Over spend of £920k. Within Microbiology the non-pay over spend is £680k. This is predominantly due to £174k over spend on North Wales courier costs, £75k on equipment maintenance costs and £245k on laboratory consumables. Within the Screening Division Breast Test Wales are reporting an over spend of £267k against non-pay due to increased running and maintenance costs for the ageing mobile units as well as the British Telecom costs and equipment maintenance costs. **ACTION:** As per 3.1 above, further work is being undertaken to investigate the Microbiology non-pay position and to identify further mitigating actions to deliver a breakeven position. As per 5.1 Directorate vacancies and recruitment plans will be monitored to ensure they are accurately reflected within the year-end financial position and contribute to delivering a breakeven position.
- Central Budgets – Over spend of £189k is mainly due to Public Health Wales contribution to the increased costs of the Welsh Risk Pool.
- Operations and Finance Directorate – Over spend of £87k is predominantly due to increased costs associated with service charges and recharges yet to be actioned relating to mobile phones, postage and printing.

7. Income Analysis

Income Position By Directorate £'000

Directorate	Annual Budget	YTD Budget	YTD Actual	YTD Variance
Central Budgets Directorate	-101,288	-74,176	-74,164	12
WHOC Collaborating Center Directorate	-1,435	-1,081	-1,081	0
Health & Wellbeing Directorate	-2,946	-2,255	-2,255	0
ACE's Hub Directorate	-400	-300	-300	0
Hosted Directorate	-18,844	-13,872	-13,872	0
Board and Corporate	-108	-81	-82	0
Knowledge Directorate	-457	-383	-385	-1
NHS Quality Imp Division	-1,684	-1,143	-1,144	-1
Workforce & Org Develop Directorate	-262	-226	-228	-2
Operations and Finance Directorate	-579	-305	-307	-2
Quality Nursing & Other Allied Profs Dir	-46	-35	-37	-2
Public Health Services Directorate	-22,159	-16,697	-16,814	-118
Grand Total	-150,207	-110,552	-110,668	-115

7.1 Key Actions

- The month 9 position of £115k of over achievement against income relates mainly to Public Health Services and is due largely to Education & Training income being £107k higher than budget across the Microbiology and Screening Divisions.

8. Forecast Position and Investment Status

Directorate	Month 9 Year End Forecasts 19/20 £000's	Remaining investment monies to transfer @ Month 9 £000's
1000 Lives	0	16
Health & Wellbeing	-124	74
Knowledge Directorate	-94	9
Ops & Finance	0	13
People & OD	1	77
Quality, Nursing & Allied Health Prof	-71	3
WHO Collaborating Centre	0	55
Board & Corporate	0	0
Grand Total	-289	246

The Trust is forecasting a year-end breakeven outturn. Following the month 9 Directorate returns, Directors have provided assurance that they have robust spending plans in place for Quarter 4 in order to deliver the agreed year-end forecasts.

In addition to this, Directorates have confirmed a further £246k of investment spend being incurred before the end of the financial year. Following the assurances provided by the Directors that is circa £469k or slippage against investments that is now available to support other priorities. These include;

- Change in the discount rate for Personal Injury Benefit
- Employee related cases that will be settled before year end
- Climate change research project
- Urgent improvements in facilities and estate across the organisation

As reported previously, work is ongoing to determine the level of VER applications to utilise the Directorate forecasted under spend of £289k.

9. Balance Sheet

	Opening Balance 1/4/2019 £000s	Movement £000s	Closing Balance 31/12/19 £000s
Non-Current Assets			
Property, plant and equipment	11,352	437	11,789
Intangible assets	913	(1)	912
Trade and other receivables	327	465	792
Non-Current Assets sub total	12,592	901	13,493
Current Assets			
Inventories	569	237	806
Trade and other receivables	11,372	5,517	16,889
Cash and cash equivalents	5,146	12,060	17,206
Current Assets sub total	17,087	17,814	34,901
TOTAL ASSETS	29,679	18,715	48,394
Current Liabilities			
Trade and other payables	(12,219)	(19,045)	(31,264)
Provisions	(1,284)	916	(368)
Current Liabilities sub total	(13,503)	(18,129)	(31,632)
NET ASSETS LESS CURRENT	16,176	586	16,762
Non-Current Liabilities			
Trade and other payables	(1,004)	(283)	(1,287)
Provisions	(1,672)	(251)	(1,923)
Non-Current Liabilities sub	(2,676)	(534)	(3,210)
TOTAL ASSETS EMPLOYED	13,500	52	13,552
FINANCED BY: Taxpayers'			
PDC	12,469	0	12,469
Retained earnings	567	52	619
Revaluation reserve	464	1	465
TOTAL TAXPAYERS' EQUITY	13,500	52	13,552

The Balance Sheet, or Statement of Financial Position, reports the assets, liabilities and reserves of the organisation at a specific point in time.

Current trade and other receivables has increased by £5.517m. £4.647m of the variance relates to accrued income and prepayments for the NHS Wales Health Collaborative over several programmes. Income due is mostly made up of Macmillan Cancer Support (£1.842m) and other NHS bodies and WG (£2.633m).

Cash and cash equivalents has increased by £12.060m. £8.173m of this relates to Welsh Government M10 core income received in advance per agreed invoicing arrangements. The remainder is mainly as a result of the timing of our tax and NI payments (£1.727m), which are paid a month in arrears in year but settled in full by year end, and timing of NERS and WNHSS grant payments (£1.757m).

Current trade and other payables has increased by £19.045m since the beginning of the year. This increase is predominantly related to advance payment of M10 core income as mentioned above (£8.173m). Accrued expenditure for capital depreciation charges from Welsh Government makes up £2.554m of the variance, and £1.722m of month 10 core income has been treated as deferred and will be held on the balance sheet until required in month 10. Most of the remaining variance relates to accrued pay and non-pay expenditure for the Health and Wellbeing programmes. £1.076m relates to accrued expenditure for National Exercise Referral Scheme (NERS) and £0.395m Welsh Network of Healthy Schools Schemes (WNHSS) grants. £1.727m of the variance relates to timing of tax and NI payments as mentioned above.

Current provisions have reduced by £0.916m due to the settlement of clinical negligence claims and an HR case in year and movements between current and non-current provisions as a result of changes in the estimated settlement date of clinical negligence cases.

10. Capital

Capital KPIs: To ensure that costs do not exceed the Capital resource limit set by Welsh Government	Value £'000
Current reported year end forecast - deficit/(surplus)	Breakeven
Reported in-month financial position - deficit/(surplus)	(£533k)

Public Health Wales capital funding for 2019/20 totals £2.56m, split as follows:-

- Discretionary £1.181m
- Strategic £1.378m, which is in respect of CSIMs year 4 plus Digital Priorities Investment Fund

Excluding the Strategic projects, 25 bids totalling £1.181m for discretionary funding have been approved. Of these,

- £0.337m has been spent YTD
- £0.468m committed with purchase orders
- £0.096m still in the tender process
- £0.248m Procurement input received, no purchase orders raised as at month 9 but expected by month 10
- £0.032m completed and will be transferred to relevant Health Boards in month 9.

ACTION: Capital team to work closely with Project managers and Procurement to ensure Capital schemes are delivered within the financial year and their capital allocations.

11. Recommendations

The Board is asked to note the following:-

- financial position reported at month 9;
- the agreed forecasts and position on investments;
- status of the Capital Programme for 2019/20.

12. Action Register

The following action register lists the open actions with previous actions closed and removed to a closed action register, which is available on request.

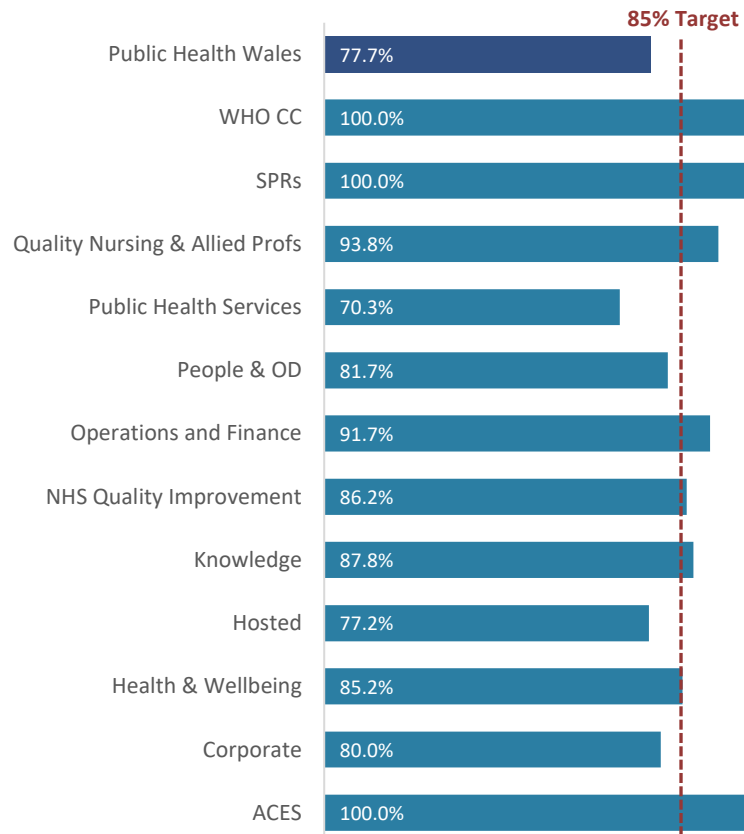
Posted On	ID ref	Area	Actions	Due Date	Update	Status
M03	3.1	Public Health Services Directorate	The dedicated monthly finance meetings have been established and a detailed action plan produced which focuses on those key areas of increasing spend.	Ongoing	After the release of funding and stock take adjustments a breakeven position was anticipated for month 9. Work is on-going to investigate the non-pay position within Microbiology, the main reason for the deviation from the plan, and to identify further mitigating actions to deliver a breakeven position	Open Ongoing review
M03	4.1	Savings Plans – Organisational Efficiencies	Senior Leadership Team to take a lead role in delivering the ongoing work programme and continue to actively pursue savings so we can invest recurrently as planned.	Ongoing	Monthly progress reports continue to be provided to the Executives for consideration Continue to work on the 2020/21 efficiency savings. Audit Corporate Governance Committee will receive a detailed report at the next meeting to be held on the 19 th March 2020.	Open
M03	5.1	Pay – Public Health Services Directorate	As per 3.1 above, agency expenditure is included within the action plans that forms part of the dedicated monthly finance meetings with Public Health Services Directorate.	Ongoing	Continue to monitor Directorate vacancies and recruitment plans to ensure an accurate reflection within the year-end financial position	Ongoing review and monitoring

Posted On	ID ref	Area	Actions	Due Date	Update	Status
M05	3.1	Quality, Nursing, Allied Health Professionals Health and Wellbeing Directorate Knowledge	Monitor recruitment plans through to year-end to ensure accurately reflected in overall financial position of Directorate.	Ongoing	Recruitment plans are constantly being revised and monitoring will continue to ensure an accurate reflection within the Directorates year-end position	Ongoing
M09	10.1	Capital	Capital team to work closely with Project managers and Procurement to ensure Capital schemes are delivered within the financial year and within their capital allocations.	Ongoing		Open

Overview of People Performance

Full People dashboard can be viewed [here](#)

Appraisal compliance



Summary

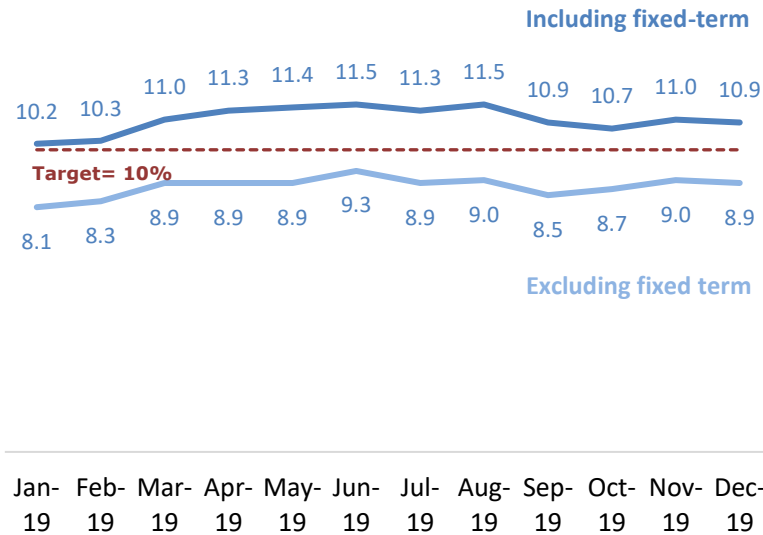
- As set out in the NHS Wales Delivery Framework 2019/2020 (outcome 87), 85% of staff must have participated in an appraisal/medical appraisal in the preceding rolling 12 month period, with the data sources being ESR and MARS respectively. Public Health Wales has set an internal target of 90%.
- As at the end of December 2019, ESR data shows that 77.7% non-medical staff had participated in an appraisal and 100% medical staff had participated in a medical appraisal.
- This provides an overall appraisal rate of 78.9%, which, whilst improved, is still significantly below the Welsh Government target of 85%.

Key actions

- The Assistant Director of OD and Learning wrote to each Executive in December with a list of staff with no recorded appraisal and asked for targeted interventions.
- Quarter 3 breakdowns will be sent by the middle of January.

Overview of People Performance

Staff turnover, annual rolling rate (%)



Summary

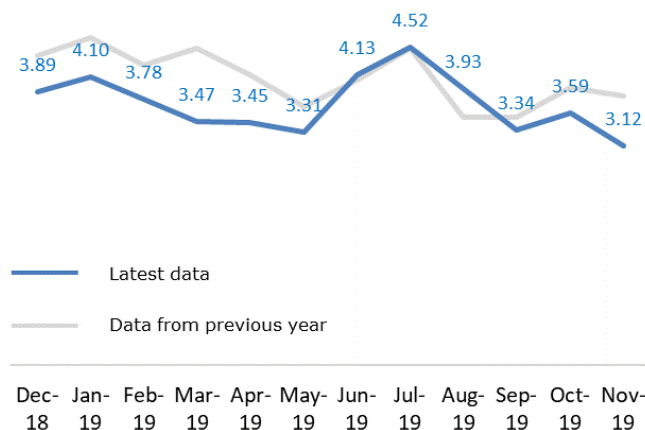
- Staff turnover for the rolling 12 months to 31 December 2019 is 10.9%, which is an improvement from the previous month.
- When fixed-term contracted staff and dismissals related to the end of fixed-term contracts are excluded, the rolling 12-month turnover figure for December 2019 is 8.9%, which is below the NHS best practice figure of 10%.
- The Regrettable Turnover rate for the rolling 12 months to 31 December 2019 is 6.1%
- There were 22 leavers in December, which is more than the number of leavers from the previous month (16 leavers in November) but less than the same period in 2018 (23 leavers in December 2018).

Key actions

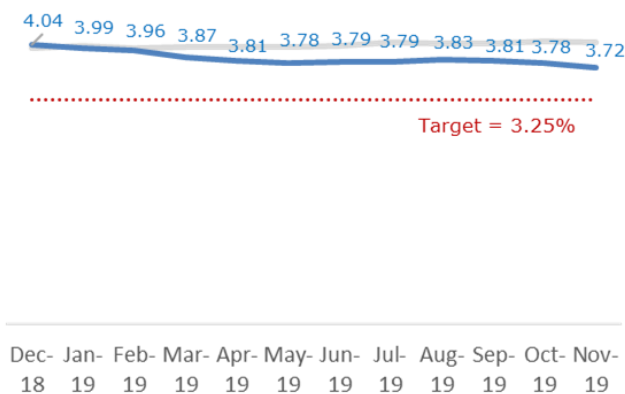
- To support the drive for organisational efficiencies, the People Business Partners have been actively working with their Directorates to identify potential VER opportunities.
- Despite our regrettable turnover rate being below the overall turnover target of 10%, we continue to see a high level of staff leaving PHW within the first three years of service. Work continues to improve our recruitment and assessment processes and on our Employee Value Proposition.
- All exit interviews are being scrutinised to help identify any areas of concern within specific directorates/divisions.

Overview of People Performance

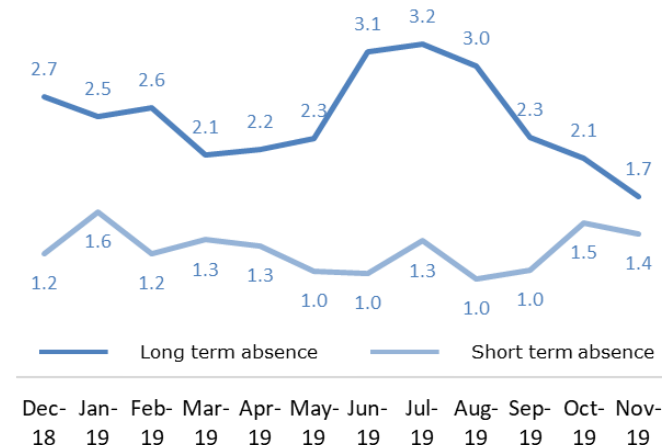
Sickness absence (%FTE), monthly rate



Sickness absence (%FTE), annual rolling rate



Long term and short term sickness absence (%FTE)



Summary

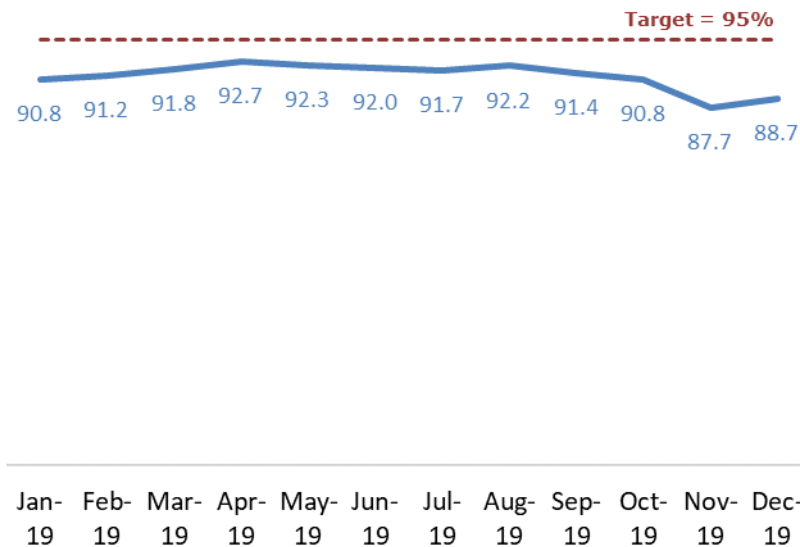
- The sickness absence figure for the rolling 12 months to 30 November 2019 was 3.72% FTE. The rate of absence over a rolling 12 month has steadily improved over the past year and this is the lowest rolling sickness absence figure since April 2017.
- For the month of November 2019, the monthly sickness absence rate was 3.12% FTE, compared to 3.83% FTE from the same period last year. This month's figure is the lowest monthly sickness absence rate since May 2016.
- Short-term sickness was 1.38% in November 2019; compared with 1.48% in October 2019.
- Long-term sickness was 1.74% in November 2019; compared with 2.11% in October 2019.
- The new monthly all-Wales target for November 2019 is 4.17% FTE and the 12-month rolling target is 4.65%. Therefore, in November 2019 the Trust achieved the all-Wales monthly and 12-month rolling targets, as well as the internal monthly target.

Key actions

- The HR operational team are continuing to take further case reviews and develop action plans with those areas of the business consistently showing high levels of sickness absence.
- Email reminders will be sent to all Line Managers regarding the correct recording of absences, including the recording of the reasons for absence.

Overview of People Performance

Statutory & Mandatory Training Compliance (%)



Summary

- Compliance with level one core statutory and mandatory training subjects is set as a minimum of 85% in the NHS Wales Delivery Framework 2019/2020 (outcome 90). This has been increased to an internal target of 95% against all statutory/mandatory training.
- The compliance rate as at end of December 2019 is:
 - 88.67% compliance with level one core subjects
 - 89.27% compliance including extended mandatory training
- Both data sets show a small increase from the end of November.

Key actions

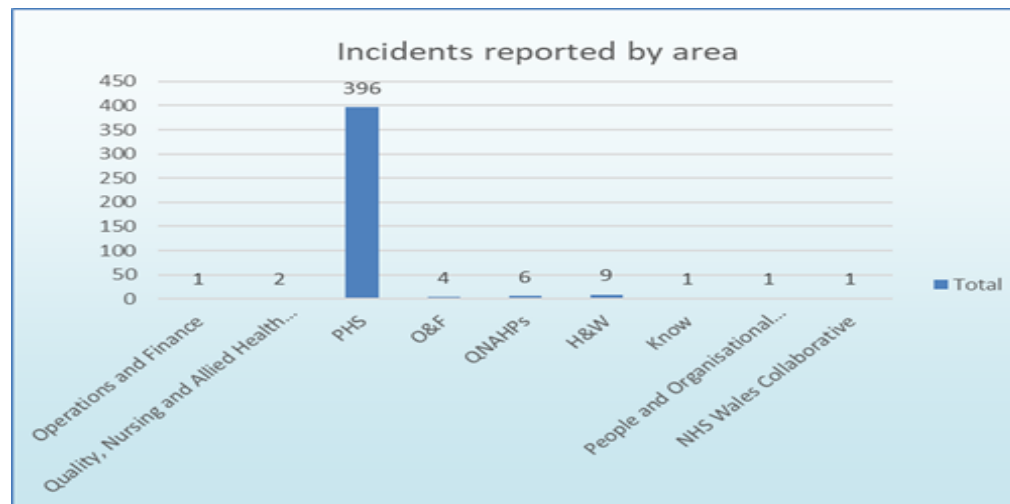
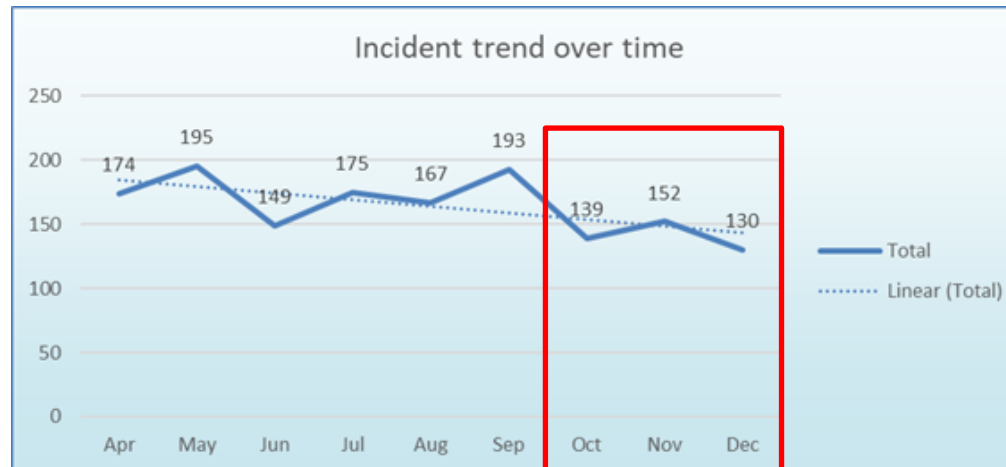
- The business is reminded to pay attention to guidance setting out how to observe future competence requirements; if no action is taken the 2000+ competencies due to expire before the end of March 2020 (as well as those currently out of date), compliance across all core subjects will fall to 82.5% - comfortable below the WG target.
- My Contribution audit processes – approved within People and OD and included in the revised policy, workshop scheduled January 2020.
- Revised National Pay Progression Framework – Colleagues starting (or moving band) from 1st April 2019 may be impacted from 1st April 2020, with all colleagues affected from April 2021.

Putting Things Right – Performance against tier 1 targets

Complaints	Target	Quarter 3 2019/20
Total number of formal complaints received for the period 1 October – 31 December 2019	-	15
Number (%) of complaints acknowledged within 2 working days	95% (PHW)	15 (100%)
Number (%) of complaints responded to within 30 working days of receipt	75% (WG) 95% (PHW)	14 (93.3%)
Number (%) of complaints responded to Within a period exceeding 30 working days but within 6 months	-	1 (6.7%)
Number of informal complaints (on the spot) received	-	13
Serious Incidents		
Number of serious incidents reported	-	4
Number of serious incidents not closed within 60 days	0%	0
Summary <ul style="list-style-type: none"> During the reporting period, a total of 15 formal complaints were received and all were acknowledged within the target time of 2 working days. Furthermore all bar one were responded to within the target time of 30 working days, the one outstanding being the result of a technical problem within Datix. The complaint has now been resolved and the technical problem is still under investigation with Datix. Additionally 13 'on the spot' complaints were received and dealt with. Four serious incidents were reported to Welsh Government, and none of them are overdue for closure. 		
Compliments <ul style="list-style-type: none"> For the period 1st October – 31st December 2019, a total of 93 compliments were received. The ratio of compliments to complaints for this period was 6:1. 		
Action <ul style="list-style-type: none"> The responsibility for reporting compliance against tier 1 targets has now been delegated to the Chief Risk Officer, and is reported in full in the Quarterly Putting Things Right report. 		

Incident Reporting activity

- During Quarter 3 2019/20, there were a total of 421 incidents reported. The first chart below shows the incident reporting trend over the financial year with the current reporting period (Q3) highlighted. The second chart shows the incidents reported by Directorate for the current reporting period.



Summary

- It will be noted that almost all of the incidents occur within Public Health Services, which is to be expected due to the clinical nature of their activities.
- The total number of incidents reported each quarter has remained fairly static over the past few years but it is anticipated that there may be an increase in total number of incidents reported due to the new Datix reporting forms now in use and the changes to user permissions. Such an increase is to be welcomed as a positive step as it will signal that training and awareness of the need to report incidents and near misses in the context of our aspiration to be recognised as a leading learning organisation is having an impact on our staff.

Action

- Work is being undertaken with Directorates to close overdue incidents
- A network of super users has been established to support incident management

Claims

	Quarter 3 2019/20
Current number of confirmed claims	9
Current number of potential claims	8
Current number of redress cases	0
New claims received in Quarter	0
Number of claims closed in Quarter	2
New redress cases received in Quarter	0
Number of redress cases closed in Quarter	0
Number of Settled Claims in this reporting period	1
Aggregate value of confirmed claims in progress	£4,043,511.18
Aggregate value of potential claims	£475,000.00
Aggregate value of confirmed and potential claims	£4,518,511.18
Anticipated Public Health Wales Liability in respect of confirmed claims	£225,000

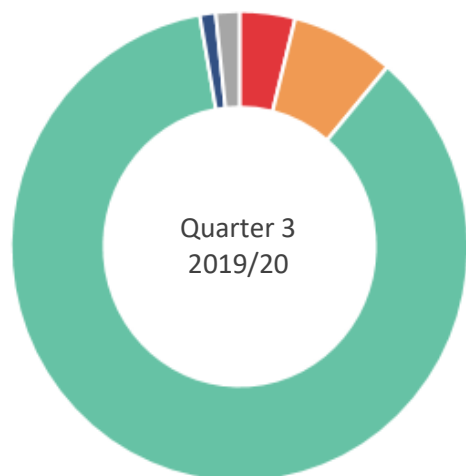
Summary

- At the end of December 2019 the total number of confirmed and potential clinical negligence claims is 17.
- The aggregated value of the confirmed claims is £4,034,511.18.
- The anticipated Public Health Wales liability in respect of both confirmed and potential claims is £225,000.00
- Internal Audit provided substantial assurance for the Financial Management of Claims

Action

- Lessons learnt relating to any settled claims are shared via the Service User Experience and Learning Panel and the Quality, Safety and Improvement Committee via the quarterly claims report.

Summary of performance



RAG status at Quarter 3:

%	Number of actions
86.0%	154
7.3%	13
3.9%	7
1.1%	2
1.7%	3

Actions updated: 176

Total actions: 179

Progress

At the end of Quarter 3 of the 179 actions identified as part of the 2019/20 Health and Care Standards Self-Assessment:

- 85.5%(153 actions green) were on track or completed;
- 7.3% (13 actions amber) were behind schedule but are due to be completed within the agreed timescale;
- 1.1% (2 actions blue) were not progressed as identified outside of Public Health Wales remit;
- 1.7% (3 actions) were not completed. Reminders have been sent. 1 action not completed due to staff absence and Quality Team unable to establish from other team members);
- 3.9% (7 actions red) were identified as behind schedule/will not be completed to timescale.

Slippage

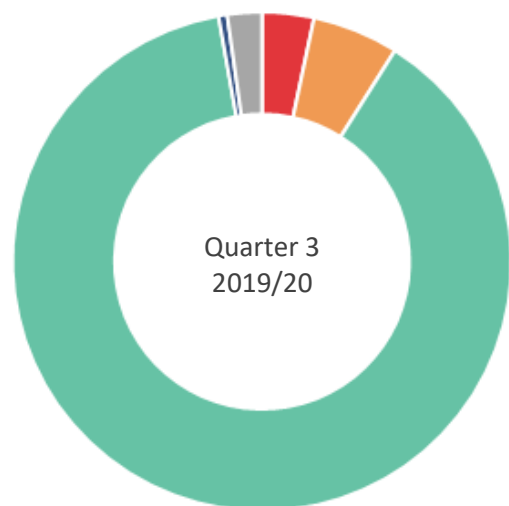
The reasons identified by Directorates for actions that are unlikely to be completed within the agreed timeframe include:

- insufficient Welsh speaking staff to meet targets
- delays in appointing staff to positions
- extended staff absence
- training packages requiring ratification
- awaiting resources procurement
- limited progress with competency assessments

Key Actions

How the slippages will be addressed will be followed up with Directorates.

Summary of performance



RAG status at Quarter 3:

%	Number of actions
78.3	18
13.0	3
0	0
0	0
8.7	2

Actions updated: 21

Total actions: 23

Progress

At the end of quarter 3 2019/20 progress against the 23 actions identified is as follows:

- 78.3% (18 actions green);
- 13.0% (3 actions amber);
- 8.7% (2 actions incomplete). Actions were not updated despite reminders being sent

Slippage

No significant risks were identified in relation to the slippages with the 3 amber actions.

Key Actions

A refresh of the approach to KPI's is being progressed between the planning team and the quality team with the aim of having new KPIs for the new financial year.

Annex A

Annual Plan 2019/20 – Change Requests (December 2019)

Change scheduled for discussion at Strategic Priority Group		
Reference	Item	Who
OP/74 and OP/75	Priority areas for action to prevent alcohol related harm agreed with partners - suspended	Strategic Priority 3 Back to SP3
OP/76	Resource needs identified to deliver a programme of work for the prevention of population harm from alcohol, and a business case developed to secure them - suspended	Strategic Priority 3
OP77, OP/78 and OP/79	Priorities for action to prevent the use and harm from drugs agreed - suspended	Strategic Priority 3
OP/80	Business case produced to secure resources for the delivery of priority actions to prevent substance related harm - suspended	Strategic Priority 3
OP/89	Operating model agreed to establish a Behaviour Change Support Unit	Strategic Priority 3
OP/181	DESW: Complete process of outsourcing of results and invitation letters	Strategic Priority 3
OP/196	Strategy for the management of hypertension in clinical settings agreed	Strategic Priority 6 Back to SP6
OP/199	Evidence review conducted to identify which target groups have the greatest capacity to benefit from the National Exercise Referral Scheme (NERS)	Strategic Priority 6
OP/223	Webinar held to engage with WHO member states to understand their training needs	Strategic Priority 7 Back to SP7

Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
OP/63	An agreed evaluation framework produced for the Healthy Weight: Healthy Wales strategy	Strategic Priority 3	The delay is currently beyond the control of PHW. The publication of the Welsh Government (WG) Healthy Weight: Healthy Wales Strategy Delivery Plan has	For discussion at SPCG 06.01.2020 Back to SP3

Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
			been delayed until February 2020, following a meeting of the Implementation Board in January 2020. A Measurement and Evaluation group will be convened by WG as a sub group of the Implementation Board, with a view to publishing an implementation plan and supporting metrics by the end of February. PHW's contribution is ready for consideration by the Measurement and Evaluation group once it is established i.e. draft indicators and a logic model have been scoped to inform the evaluation framework.	Back to SP3
OP/85	Launch completed of tobacco web-based resource including patterns of consumption and harm and interactive evidence map	Strategic Priority 3	The tobacco web based resource contains information on smoking cessation rates and is therefore considered politically sensitive; we have therefore been advised not to publish the resource during the Purdah period. We have also been advised that the second half of December is a poor time for publication so have opted for January.	For discussion at SPCG 06.01.2020
OP/87 and 88	Applied behavioural science training needs for Public Health Wales described / Knowledge and skills development plan to increase behaviour change capability in Public Health Wales produced	Strategic Priority 3	Completion of OP88 was dependent upon completion of OP87, which was also subject to an approved Change Request. A further delay has been caused by 1) unplanned work from work responding to the Prevention funding and 2) personal circumstances requiring Special Leave for a key member of the delivery staff.	For discussion at SPCG 06.01.2020 Back to SP3

Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
OP/91	Quality standards for health promotion information for the Welsh public agreed	Strategic Priority 3	Limited evidence for specific processes and arrangements found through original search, search approach was amended and re-run causing a delay. A further delay has been caused by 1) unplanned work from work responding to the Prevention funding and 2) personal circumstances requiring Special Leave for a key member of the delivery staff.	For discussion at SPCG 06.01.2020
RO/7	Tobacco Control evidence reviews completed for the Tobacco Control Delivery Plan	Strategic Priority 3	The initial timeframe for the reviews aligned to Welsh Government requirements, which have not been pursued. Divisional capacity to undertake the three reviews has been greatly limited. The value of the work remains, and can inform future policy development. The work comprises of three separate evidence reviews, one of which is in the final draft stage and two have had initial scoping work undertaken.	For discussion at SPCG 06.01.2020 Back to SP3
OP/180		Strategic Priority 6	Wales Abdominal Aortic Aneurysm Screening Programme has participated in an English NHS Framework tendering process and a preferred supplier has been identified together with a “direct order” route to market. Order raising has been delayed to ensure clarification on Capital funding source. This has been identified from within PHW funds, but there is a potential that central Welsh Government Funding will be	For discussion at SPCG 06.01.2020 Back to SP6

Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
			allocated. PHW is awaiting the outcome of the 2019/20 Imaging Fund bid which is due to be announced in Nov/Dec. Once the outcome is known, Wales Abdominal Aortic Aneurysm Screening Programme will raise orders with preferred suppliers and commence receiving and implementing the equipment. No procurement lead time risks are anticipated.	Back to SP6
OP/226	Sustainable development tools and resources for an international audience to meet the commitments of the WHO CC. Collation of case studies and inform draft toolkit.	Strategic Priority 7	This resource will also incorporate case studies from European countries. One route for gathering these is to recruit interested countries through a Webinar being planned via WHO Venice Office (being discussed at the moment).	For discussion at SPCG 06.01.2020
OP/271	Develop and test Leadership for Improvement	Strategic Priority 7	Further discussions required with HEIW to scope this work and ensure it is in line with their developing leadership strategy for Wales. Timescale for this work yet to be determined.	For discussion at SPCG 06.01.2020
OP/272	Develop and publish a revised Quality Improvement Guide	Strategic Priority 7	Delay in receiving the Welsh Government funding for the design and print of the guide.	For discussion at SPCG 06.01.2020
OP/273	Support hubs to develop their maturity matrix action plans	Strategic Priority 7	Delay in receiving the Welsh Government funding to enable staff recruitment to support the hubs	For discussion at SPCG 06.01.2020
OP/274	Support hubs to deliver their maturity matrix action plans	Strategic Priority 7	Delay in receiving the Welsh Government funding to enable staff recruitment to support the hubs	For discussion at SPCG 06.01.2020

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Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
OP/284	"Be the change" campaign rolled out across the whole of PHW. Events and resources to support the delivery of Be the Change Campaign.	Enabling Function	The Biodiversity e-guide is taking slightly longer as we are awaiting comments from Welsh Government on the guide. Other guides (Organisation of Sanctuary and Global Citizenship) are still on track for delivery in January and March.	For discussion at SPCG 06.01.2020
OP/295 and 296	Innovation / First tranche for Office 365	Informatics	OP-295 refers. Transition to Office 365 is part of a national (Wales) initiative which has an overarching Wales-wide Programme Board to oversee the local delivery of Microsoft Office 365 products through local programme boards in each Health Board and Trust. Additional funding is to be allocated for local implementation. Delays at the national level in building the common infrastructure and service support, and delays in allocating funding to local organisations, means that there are consequential delays in plans to implement in Public Health Wales.	For discussion at SPCG 06.01.2020
OP/297	Innovation / Develop plans to migrate from GroupWare	Informatics	Discover stage for the scale of Groupware applications in Public Health Wales has revealed a much larger base than was anticipated. Requirements gathering is a bigger task than originally scope out.	For discussion at SPCG 06.01.2020
OP/298	Re-plan 2nd Phase of Screening Information Management Systems (SIMS) project	Informatics	Delays to the Cervical Screening Information Management System (CSIMS) project has shifted the focus on planning subsequent migrations. Request for change: August 2019 to February 2020	For discussion at SPCG 06.01.2020 Back to Enablers

Change scheduled for consideration / information at Strategic Priorities Coordination Group				
Reference	Item	Who	Detail	Status
RO/20	Decision Making Framework / Interactive version of the framework developed	Governance	Request to suspend Further work will impact upon the decision making framework, such as the review of the scheme of delegation and a potential change decision making arrangements to reflect a scheme of escalation / de-escalation. To create an electronic version of this document at this point would likely duplicate work.	For discussion at SPCG 06.01.2020
RO/21	Policies, Procedures and Other Written Control Documents Management Procedure	Governance	The policy in is in final draft, it has been out for the appropriate consultation, endorsed by BET and will be submitted to the Board in January for approve. The Procedure was drafted and put out for consultation. As part of the feedback from the consultation it was agreed that a further redraft was necessary. Request extension to March to allow time for a redraft, re-consult (4 weeks) and appropriate approval at March BET.	For discussion at SPCG 06.01.2020 Back to Enablers

Potential change		
Reference	Item	Who
OP/288	Organisational approach to engagement / Youth ambassadors programme established and implemented	Quality, Nursing & Allied Health Professionals
OP/330	Develop quality indicators aligned to the strategic priorities	Quality, Nursing & Allied Health Professionals
OP/332	Risk appetites developed for each Directorates/ Strategic Priority	Quality, Nursing & Allied Health Professionals
OP/334	Review of the procedures for release of information completed and new corporate approach developed.	Quality, Nursing & Allied Health Professionals
OP/335	Scope and design financial analytics to operations and business functions	Finance
OP/346	Set out strategy for national events	Communications Back to Enablers

Performance data

Influencing the wider determinants of health

>10% below target

Within 10% of target

Achieving target

Not applicable

Healthy Working Wales	Annual Target	Q1 19/20	Q2 19/20	Q3 19/20
Organisations completing a CHS mock assessment	25	1	6	3
Private sector organisations completing a mock assessment	5	0	2	2
Organisations completing a full assessment	25	2	5	3
Private sector organisations completing a full assessment	5	0	1	1
Organisations achieving a Small Workplace Health Award	100	1	10	10

Improving mental well-being and resilience

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Welsh Network of Healthy Schools	Annual Target	Q1 19/20	Q2 19/20	Q3 19/20
Schools achieving level 1 - 5 award	180	45	54	41
Schools undertaking National Quality Award	50	17	2	2

Promoting healthy behaviours

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Help Me Quit	Annual target	Q3 18/19	Q4 18/19	Q1 19/20
% smoking population treated by smoking cessation services	5.0%	0.7%	1(YTD=3.2%)	0.95%
Stop Smoking Wales	Quarterly target	Q4 18/19	Q1 19/20	Q2 19/20
% of treated smokers who are carbon monoxide validated as successful	40%	48.7	44.5	47.1
% of treated smokers who have a carbon monoxide reading at 4 weeks	80%	65.8	61.6	63.7
% of treated smokers that quit smoking at 4 weeks (self reported)	50%	73.4	72.2	74.2
Average waiting time for an appointment in this month (days)	14	10	10	9
Smoking Prevention Programme	Annual Target	Q1 19/20	Q2 19/20	Q3 19/20
Number of secondary schools targeted	60	16	0	23

YTD = Year to date

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Securing a healthy future for the next generation - No performance indicators currently being reported.

Performance data

Protecting the public from infection and environmental threats to health

■ >10% below target

■ Within 10% of target

■ Achieving target

■ Not applicable

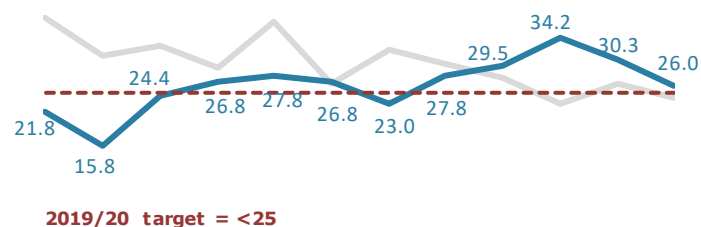
Vaccination and Immunisation		Target ¹			
Influenza vaccination uptake among those aged 65+	70.2%	at 24 Apr 2019 68.2%	at 5 Dec 2019 63.6%	at Jan 2020 67.6%	
Influenza vaccination uptake among the under 65s in high risk group	49.5%	44.0%	33.7%	40.7%	
Influenza vaccination uptake among pregnant women	N/A	12,440	6,987	Not available	
Influenza vaccination uptake among healthcare workers	60.2%	55.5%	34.2%	56.1%	
Influenza vaccination uptake among Public Health Wales staff	N/A	Not available	Not available	63.8%	
Influenza vaccination uptake among Public Health Wales front line staff	70%	Not available	Not available	66.8%	
Percentage of children who received 3 doses of the '6 in 1' vaccine by 2 years	96.3%	Q4 18/19 95.3%	Q1 19/20 95.8%	Q2 19/20 95.1%	
Percentage of children who received two doses of the MMR vaccine by 2 years	90.8%	92.4%	92.4%	92.4%	
Healthcare Associated Infections		Target ¹	Oct	Nov	Dec
Clostridium difficile rate (per 100,000 population)	25	34.2	30.3	26.0	
Staph aureus bacteraemia rate (per 100,000 population)	20	27.5	23.7	27.5	
E. Coli bacteraemia rate (per 100,000 population)	67	73.4	75.4	74.9	
Klebsiella sp bacteraemia rate (per 100,000 population) ⁵	10% annual reduction	18.1	22.9	18.8	
P. aeruginosa bacteraemia rate (per 100,000 population) ⁵		8.7	5.4	7.2	
Microbiology		Target ¹	Q3 18/19	Q4 18/19	Q1 19/20
UKAS status of accreditation to ISO 15189:2012	Accredited	Accredited	Accredited	Accredited	
EQA performance (Bacteriology)	95%	97%	89%	98%	
EQA performance (Virology)	95%	97%	100%	98%	
EQA performance (Specialist and reference units)	95%	100%	96%	98%	
EQA performance (Food, Water and Environmental Laboratories)	90%	100%	100%	98%	
Turnaround time compliance (Bacteriology)	95%	94%	95%	94%	
Turnaround time compliance (Virology)	95%	99%	94%	92%	
Turnaround time compliance (Specialist and reference units)	95%	98%	98%	98%	
Turnaround time compliance (Food, Water and Environmental Labs)	95%	98%	98%	97%	
Turnaround time compliance urgent samples (Bacteriology/Virology)	95%	Reported annually	93%	Reported annually	

4. Klebsiella sp and P. aeruginosa Blood Stream Infections included following the release of the Welsh Government AMR & HCAI Improvement Goals for 2019-20 (WHC/2019/019).

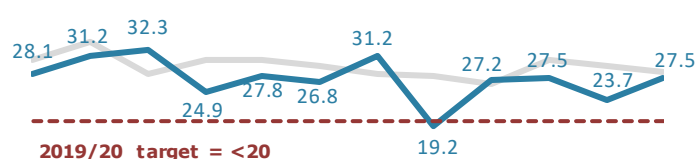
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Healthcare Associated Infections

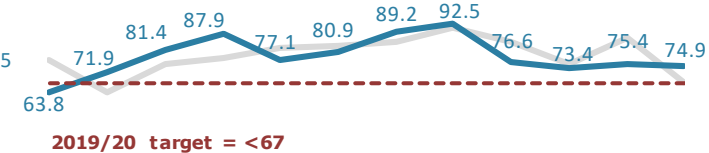
All-Wales *Clostridium difficile* rate per 100,000 population



All-Wales *Staphylococcus aureus* rate per 100,000 population



All-Wales *E. coli* bacteraemia rate per 100,000 population



Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Nov-19 Dec-19

Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Nov-19 Dec-19

Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Nov-19 Dec-19

Summary

- The All-Wales *Clostridium difficile* rate improved for the second consecutive month and currently stands at 26 per 100,000 in December 2019. Only Aneurin Bevan UHB is on target to deliver their *C. difficile* goal.
- Following a small improvement in Staph. Aureus rates last month, latest figures for December 2019 show an increase in rates (from 23.7 to 27.5 per 100,000).
- All-Wales *E. coli* bacteraemia rates continue to remain relatively stable between September (76.6 per 100,000) and December 2019 (74.9 per 100,000).
- Although *C. difficile*, Staph. Aureus, and *E. coli* bacteraemia rates continue to fall short of achieving national targets for 2019/20, year on year comparisons to date shows a more positive picture for Staph. Aureus (10% fewer cases), *C. difficile* (1%), and *E. coli* (1%).

Key actions

- Team continues to provide significant support to Swansea Bay UHB including epidemiological and specialist AMR / genome sequencing support, attendance at outbreak meetings and support for new healthcare epidemiologists engaged in this work
- Team member has joined the *C. difficile* improvement group and support provided in relation to *C. difficile* data analysis
- Support requested by Aneurin Bevan UHB in relation to increases seen in *Klebsiella* BSI – currently developing plan
- Data prepared for Drug-Resistant Surveillance for sharing at UK 4-Nations level – meeting held on 15 January 2020.
- Paper submitted to UK AMR National Action Plan oversight board regarding data sets collected on HCAI & AMR data sets.
- Updates on code of practice, dress code and mobile device policy presented at the HCAI delivery board on 14 January 2020.

Supporting the development of a sustainable health and care system focused on prevention and early intervention

National Exercise Referral Scheme		Target ¹	Q4 18/19	Q1 19/20	Q2 19/20
Number of referrals		5,875	8,601 (YTD=32,691)	7,890	8,083
Number of 1st consultations		4,075	5,314 (YTD=19,312)	4,822	4,872
Number of 16 week consultations		1,625	2,646 (YTD=10,284)	2,445	2,582
Breast Test Wales		Target ¹	Oct	Nov	Dec
Assessment invitations given within 3 weeks of screen		85%	40.1%	63.6%	30.5%
Normal results sent within 2 weeks of scan		95%	95.4%	81.9%	79.4%
% women invited within 36 months previous screen		90%	88.5%	88.7%	77.2%
Cervical Screening Wales					
Waiting time from sample being taken to screening test result being sent (4 weeks)		98%	97.3%	96.8%	97.5%
Coverage ²		80%	73.6%	Not available	Not available
Bowel Screening Wales					
Coverage		60%	56.5%	56.6%	56.9%
Waiting time for colonoscopy		65%	68.0%	46.2%	Not available
Abdominal Aortic Aneurysm Screening Wales					
Small AAA surveillance uptake		90%	94.8%	93.2%	88.9%
Medium AAA surveillance uptake		90%	93.3%	90.5%	97.9%
Newborn Hearing Screening Wales					
% of babies who complete programme (within 4 weeks)		98%	98.4%	98.9%	Not available
Babies completing assessment procedure (by three months of age)		85%	92.3%	89.2%	Not available
Newborn Bloodspot Screening Wales					
Coverage (newborns)		95%	95.2%	95.8%	94.2%
Avoidable repeat rate		4.0%	3.4%	3.5%	4.4%
Diabetic Eye Screening Wales ³					
Coverage-Reported Result in the Last 12 Months		67%	68.3%	66.8%	66.1%
Results Letters Printed Within 3 Weeks of Screen Date		70%	99.0%	100.0%	99.90%

1. Data reported against 2019/20 targets, or where a performance trajectory has been agreed to facilitate reaching the target, the trajectory has been used as defined within the IMTP 2018-2021.

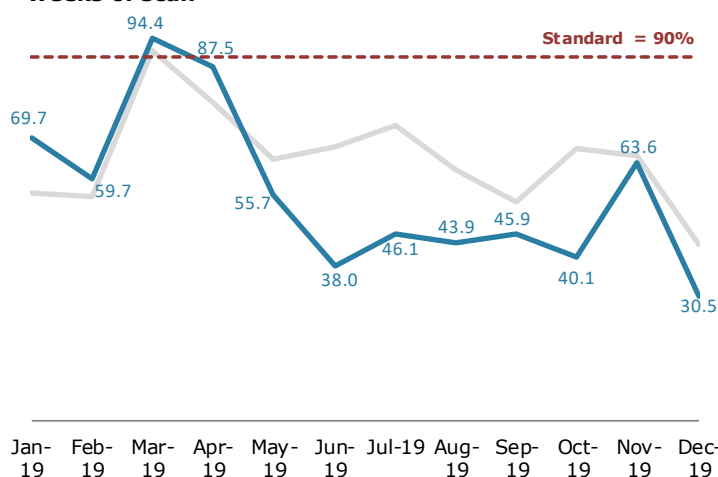
2. Cervical Screening Coverage is calculated at a fixed point in time (Jan 1st, Apr 1st, Jul 1st and Oct 1st). Due to a lead time in processing data, latest data is unavailable for two months following the fixed calculation dates aforementioned.

3. Diabetic Eye Screening Wales indicators reported from 2018/19.

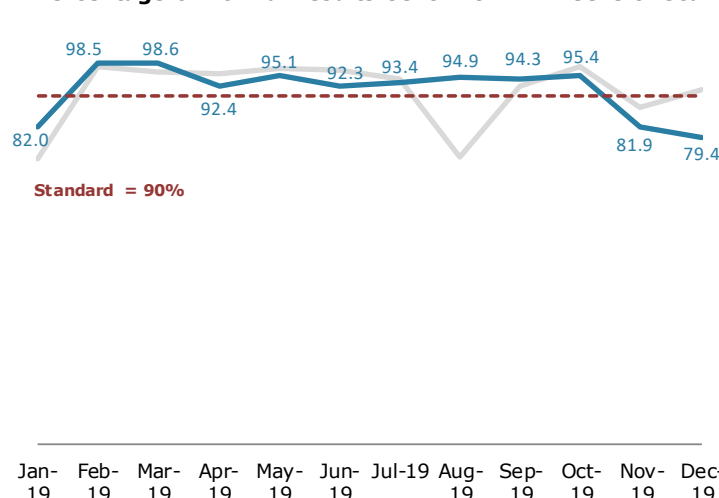
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Breast Test Wales

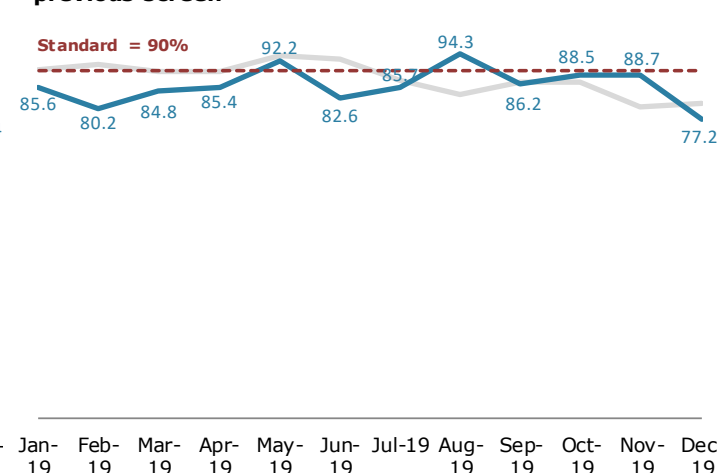
Percentage of assessment invitations given within 3 weeks of scan



Percentage of normal results sent within 2 weeks of scan



Percentage of women invited within 36 months of previous screen



Summary

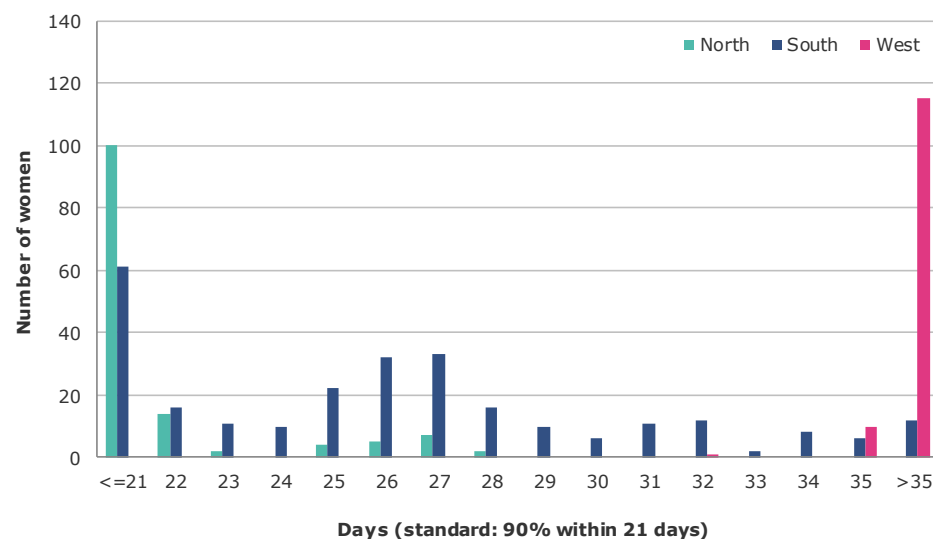
- Latest performance for the Percentage of assessment invitations given within 3 weeks of scan has declined by over 33% between November (63.6%) and December 2019 (30.5%) and is now at its lowest position for a number of years. Performance remains a priority for the programme. Medical staffing shortages remain across all regions but is acute in West Wales where readings of mammograms is taking longer due to staff capacity which has impacted on the waits to be offered assessment. In addition, there remains a longstanding medical vacancy in West Wales which despite several recruitment attempts has remained unfilled.
- The *Percentage of normal results sent within 2 week of scan* has declined for the second consecutive month at 79.4% in December 2019 and remains below standard. The lack of medical staffing capacity in West Wales is also having a direct impact on turnaround times with latest performance in the region at 38.6% compared to North Wales (97.8%) and South Wales (88.9%) regions.
- Following a gradual improvement over the last two months, the Percentage of women invited within 36 months of previous screen has declined by over 11% in December 2019 at 77.2%. Mobile Breast Screening units have suffered multiple breakdowns over the reporting period, this has affected the South Wales region especially.

Key actions

- Additional assessment clinics commenced in West Wales region to reduce overall waits. Breast Clinician based in Cardiff has moved their job plan to Swansea for the period December 2019 – February 2020 to provide further on-site support.
- Weekly escalation meetings are underway in West Wales Centre to further actively manage the assessment pathway.
- North Wales region will be providing film reading support from January 2020 to West Wales to further support waits.
- A Health Inspectorate Wales review is being planned in 2020 on this pathway with scope and timescales confirmed in January 2020.
- Additional activity on weekends will be utilised if necessary to allow mobiles to move to the next location in line with new plan.

Breast Test Wales (cont'd)

Number of days from screen to assessment appointment by region – December 2019



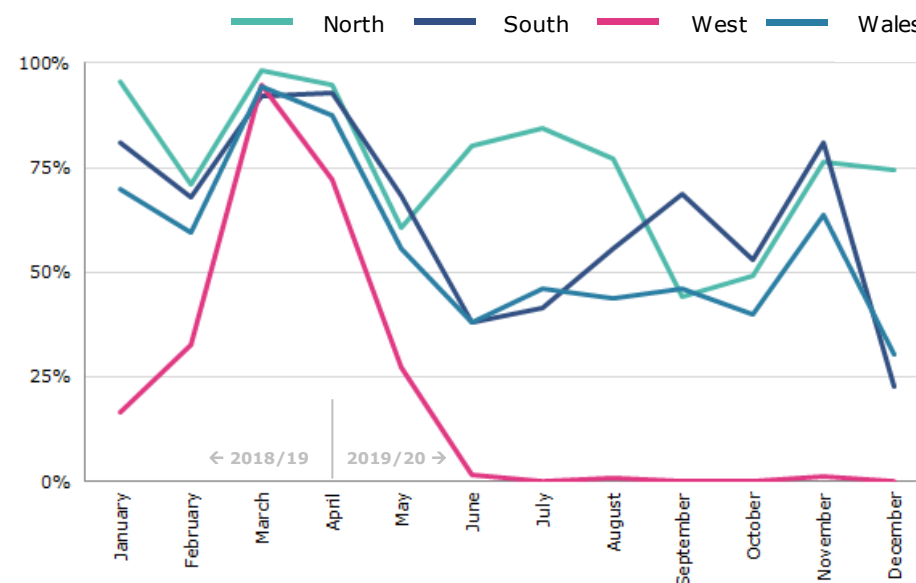
Summary of performance – December 2019

Data for December 2019 shows that at the national level, 30.5% of assessment invitations were given within 3 weeks of scan, a marked decrease from last month (45.9%).

At the regional level this varies from 75% in North Wales (n=134), compared to **0%** in the West Wales region due to very low medical staffing levels.

Over 36% of assessment waits took longer than 28 days (**100%** in West Wales), with the longest having to wait over 35 days (**n=127; up from 73** last month).

Percentage of assessment invitations given within 3 weeks of scan, by region

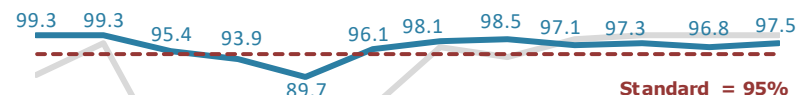


Assessment wait (days) by region							
Area	Total Assess	<=21	%	>21	%	>28	%
North	134	100	74.6%	34	25.4%	0	0.0
South	268	61	22.8%	207	77.2%	67	25.0
West	126	0	0.0%	126	100.0%	126	100.0
Wales	528	161	30.5%	367	69.5%	193	36.6

Number of days from screen to assessment appointment by region																
Area	<=21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	>35
North	100	14	2	0	4	5	7	2	0	0	0	0	0	0	0	0
South	61	16	11	10	22	32	33	16	10	6	11	12	2	8	6	12
West	0	0	0	0	0	0	0	0	0	0	0	1	0	0	10	115
Wales	161	30	13	10	26	37	40	18	10	6	11	13	2	8	16	127

Cervical Screening Wales

Percentage waiting time from sample being taken to screening test result being sent (4 weeks)



Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18

Cervical Screening Age Appropriate Coverage, 25-64 years



Jan-19 Apr-19 Jul-19 Oct-19

*Cervical screening coverage is measured quarterly (Jan 1st, Apr 1st, Jul 1st and Oct 1st) and reported in three month arrears

Summary

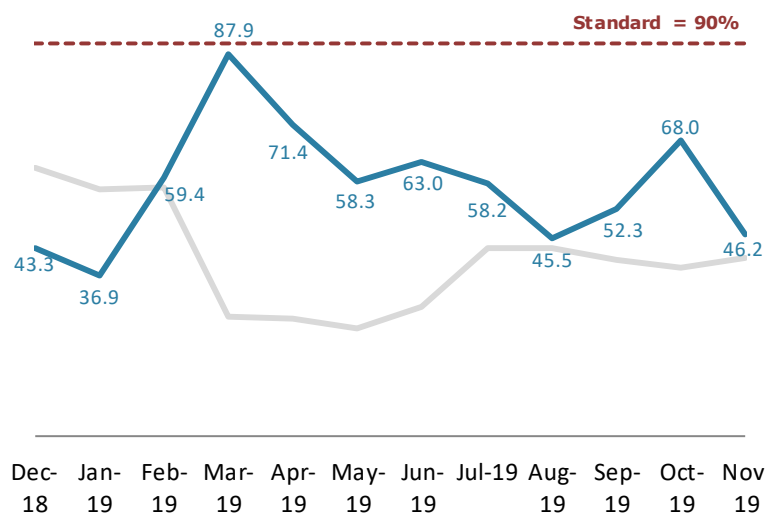
- The *Percentage waiting time from sample being taken to screening test result being sent (4 weeks)* saw a small improvement between November (96.8%) and December 2019 (97.5%). Performance remains above the 95% standard and continues to be in line with activity levels seen at the same period last year.
- Cervical Screening Age Appropriate Coverage has remained relatively static over the latest reporting period at 73.6% (down 0.1%) and remains below the national standard. As part of the programme's 2019/20 operational plan, work continues to increase screening coverage. A social media campaign #loveyourcervix ran from March to June 2019, with the objective of increasing the percentage of women aged 25 to 30 in Wales who will have, or intend to have, their smear test. The campaign was delivered, in the main, digitally.

Key actions

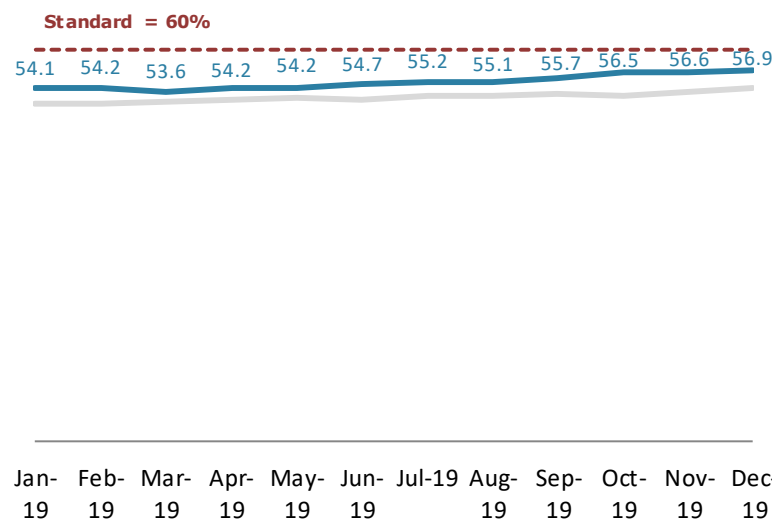
- Working with the Wales Federation of Women's Institutes in support of their 'Year of the Smear' campaign.
- Dedicated Coverage group has been formed composed of relevant stakeholders, who are pulling together all the streams of coverage work being undertaken in the programme, and learning from best practice elsewhere.
- Local initiatives and those recommended by the UK National Screening Committee and the NHS Cervical Screening Programme continue to be implemented.

Bowel Screening Wales

Percentage waiting time for colonoscopy within 4 weeks of booking appointment



Bowel Screening coverage



Summary

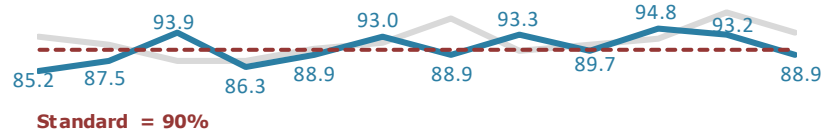
- Following recent improvements, the percentage waiting time for colonoscopy within 4 weeks has seen a near 22% decline between October (68%) and November 2019 (46.2%). Performance remains below the 90% national standard for over two years with four of the seven Health Boards out of standard. Recruitment to fill consultant posts in Health Boards remains challenging, this has had an impact on the number screening colonoscopists available to undertake screening endoscopy lists. The initiatives to increase capacity will start to become evident from March 2020 (e.g. adoption of new guidelines and additional screening colonoscopists). However, the optimisation of the bowel screening programme between 2020 and 2024 will result in additional demand on endoscopy services across Wales.
- Latest data for December 2019 shows that there continues to be marginal improvement (0.3%) in Bowel Screening coverage and currently stands at 56.9%. Performance remains below the 60% standard due to suboptimal response to invitation. The full impact of the new screening test and other initiatives on coverage and uptake rates will not be evidenced for another 6 months.

Key actions

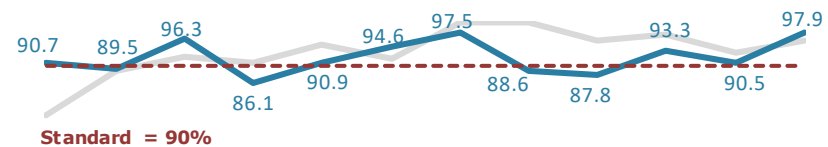
- Media campaign to be launched on 1st February for 6 weeks with the aim of increasing participation. Activities include TV, social media, press adverts and leaflet drops and elements of the campaign will target audiences where lower uptake is seen.
- Ongoing work with three Health Boards that have had continuous poor performance and have submitted recovery plans. These entail the use of insourcing, cross health board cover, and the provision of additional screening lists.
- Accreditation of additional screening colonoscopists (2 due to undertake the assessment process in March 2020).
- Implementation of the new BSG surveillance guidelines is now being seen, with a reduction in surveillance demand freeing up slots for index procedures.

Abdominal Aortic Aneurysm

Percentage of Small Abdominal Aortic Aneurysm surveillance uptake



Percentage of Medium Abdominal Aortic Aneurysm surveillance uptake



Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18

Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18

Summary

- The *Percentage of Small Abdominal Aortic Aneurysm surveillance uptake* declined by 4.3% between November (93.2%) and December 2019 (88.9%) and is now slightly below standard. The reduction in surveillance uptake was based on a small number of cases (<10 from a total of 72 cases) which has a direct impact on monthly fluctuations.
- The *Percentage of Medium Abdominal Aortic Aneurysm surveillance uptake* saw a 7.4% increase during the latest period (from 90.5% to 97.9%) and remains above the national standard for the third consecutive month.

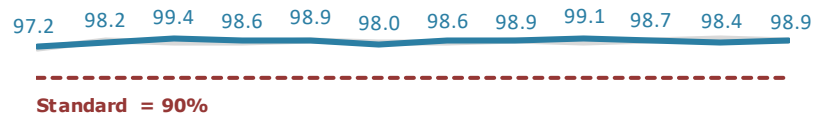
Key actions

The following actions are ongoing where performance falls outside of standard:

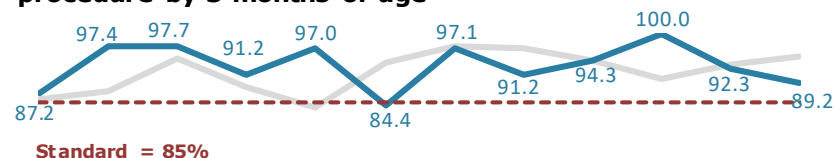
- Regional co-ordinators are informed of any men missing surveillance appointments and make contact if an appropriate appointment cannot be arranged ASAP.
- Planned Abdominal Aortic Aneurysm Information Management System (ASIMS) improvement to ensure automatic recall for service users on surveillance within the acceptable tolerances.

Newborn Hearing Screening

Percentage of well babies who complete screening within 4 weeks



Percentage of babies completing the assessment procedure by 3 months of age



Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Nov-19

Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19 Sep-19 Oct-19 Nov-19

Summary

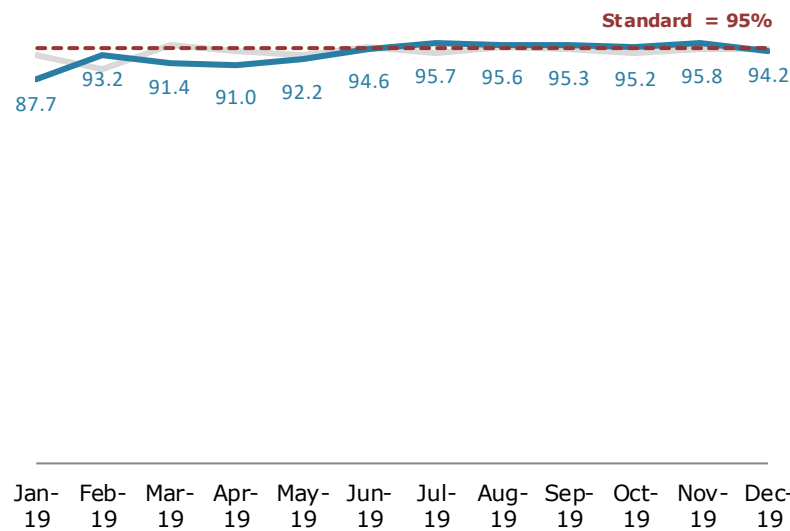
- The *Percentage of well babies who complete screening within 4 weeks* saw a marginal increase of 0.5% in November 2019 and remains above the 90% national standard at 98.9%.
- Performance for *Babies completing the assessment procedure by 3 months of age* has declined for the second consecutive month (from 100% in September to 89.2% in December 2019) but remains above standard.

Key actions

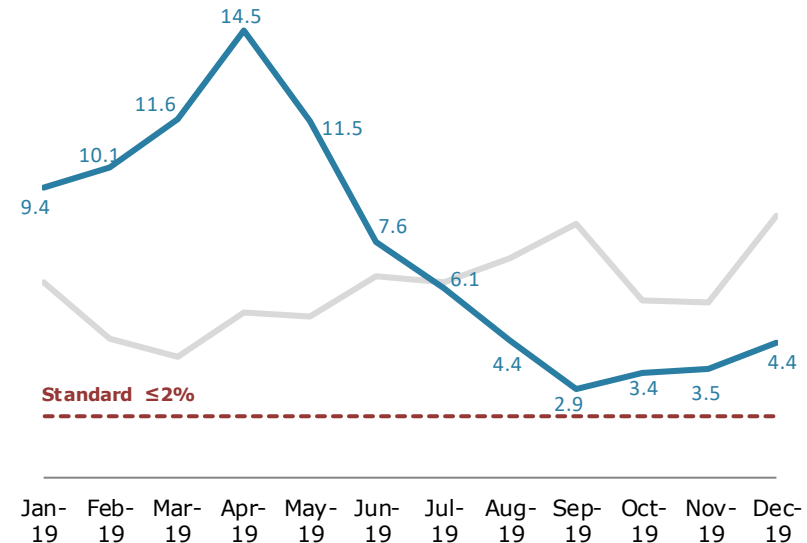
- N/A

Newborn Bloodspot Screening

Newborn bloodspot screening coverage



Newborn bloodspot screening avoidable repeat rate



Summary

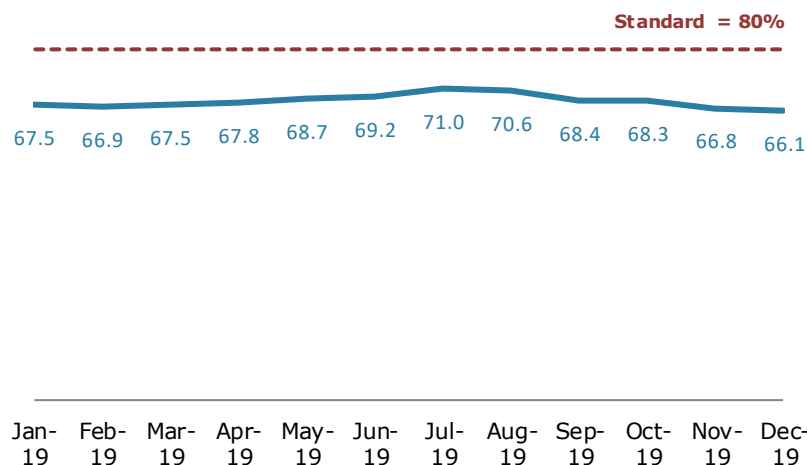
- Newborn bloodspot screening coverage has fallen just below standard in December 2019 (94.2%) following a slight decline from the previous month (95.8%). Performance is below national standard for the first time since June 2019 and remains in line with 2018 figures. Increases in avoidable repeat rates has a direct impact on coverage performance. Factors influencing performance include sample taker competency, equipment, training, postal mail service and human error.
- Following the significant improvement in *Newborn bloodspot screening avoidable repeat rate* between April (14.5%) and September 2019 (2.9%), avoidable repeats have gradually increased with latest data for December 2019 at 4.4%. There is some variation in performance in achieving the standard across Health Boards, however performance remains significantly improved when compared with the same period last year. Insufficient and/or poor quality bloodspots are the main reasons for the avoidable repeats and account for more than two thirds of the repeats requested.

Key actions

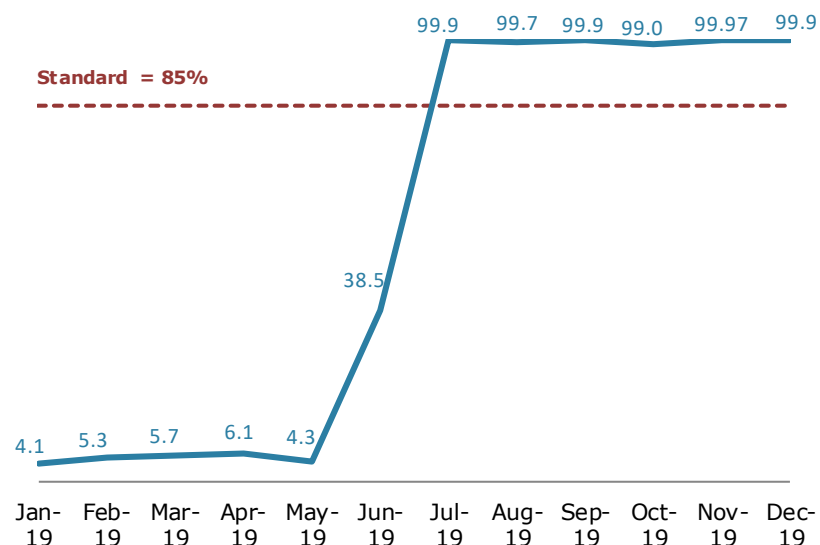
- Poor technique is a major contributory factor and action taken has been focussed on improving sample takers skills in collecting samples, together with ensuring the use of appropriate lancets proven to be effective in obtaining good quality bloodspot samples.
- A paper on bloodspot quality has been submitted to the Chief Nursing Officer.
- A multi-disciplinary task and finish group is established to tackle sample quality and meet monthly. One of the suggestions from the group that has been implemented is the use of a data card with key points to remember.
- Undertaking sample quality training sessions in Health Boards with a focus on special care baby units and ward staff as these areas are having the highest poor quality rates.

Diabetic Eye Screening Wales

Coverage - Reported result in the last 12 months



Results letters printed within 3 weeks of screen date



Summary

- Latest data for Diabetic Eye Screening Coverage shows a gradual decline between July (71%) and December 2019 (66.1%) and remains below the 80% standard. Service pressures have continued, with clinic cancellations or reductions resulting from staff absence and the need to provide cover from staff based across wide geographical areas. Additionally, performance during December is lower than the remainder of the year because screening clinics are not delivered during Christmas/ New Year in response to historically poor uptake levels during this period.
- The percentage of Results letters printed within 3 weeks of screen date has remained above standard in December 2019 at 99.9% (down 0.07%). Performance levels have been sustained over the last six months following significant challenges in meeting standard since the start of 2018/19.

Key actions

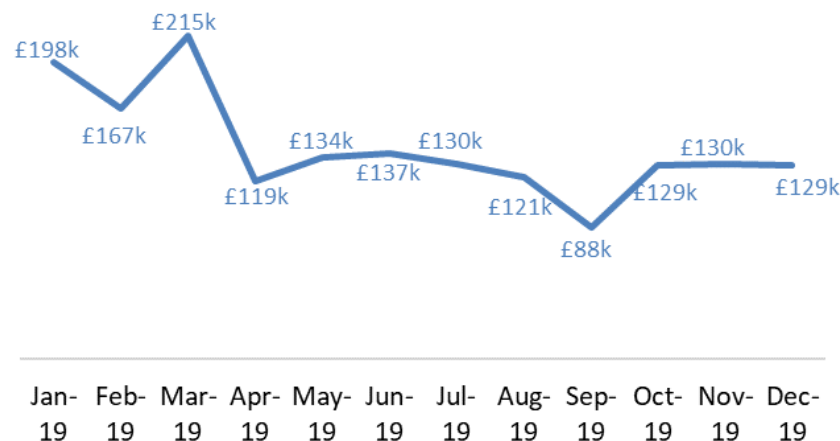
- The planned comprehensive demand and capacity analysis, including reconsideration of clinic venues used and amendments to our service delivery model has started with the commencement in post of the new Programme Manager.
- Anticipated that the work to address demand and capacity and service barriers will take in excess of 12 months.
- The service has concluded a consultation to implement additional posts, substantially strengthen the regional management structure for the service and bolster screening clinic capacity.
- Work to recruit to additional positions has commenced, with interviews planned for January 2020.

Indicator		Timeframe			Target Source (as relevant)
Headcount		Oct-19	Nov-19	Dec-19	
Headcount (does not include Bank and Agency staff)		1,872	1,887	1,887	
Full time equivalents (FTE)		1,674.29	1,690.46	1,689.97	
Contractual Status		Oct-19	Nov-19	Dec-19	
Permanent		1,682	1,700	1,699	
Fixed term contracts		190	187	188	
Bank staff		46	44	43	
Agency workers		36	38	38	
TOTAL		1,954	1,969	1,968	
Staff Turnover		Target	Oct-19	Nov-19	Dec-19
Rolling 12 month staff turnover		10%	10.7%	11.0%	10.9% NHS Best Practice
Rolling 12 month staff turnover excluding Fixed-term staff			8.7%	9.0%	8.9%
Rolling 12 month Regrettable Turnover			6.3%	6.3%	6.1%
Monthly turnover rate			0.8%	0.9%	1.2%
Monthly turnover rate excluding Fixed-term staff			0.8%	0.5%	0.9%
Starters and Leavers			Oct-19	Nov-19	Dec-19
Starters Headcount			34	32	18
Leavers Headcount			14	16	22
Time to Hire		Target	Oct-19	Nov-19	Dec-19
Time from vacancy requested to conditional offer letter issued (days)		44	39.2	39.1	Not available NWSSP Target
Live Vacancies (by days open - November 19 data)		Actual	< 44	44 - 55	> 55
Live Vacancies		38	28	4	6
Sickness Absence		Target	Oct-19	Nov-19	Dec-19
Monthly sickness absence rate (% FTE)		3.25%	3.59%	3.12%	Not available Internal Target
Rolling 12 month period sickness absence rate (% FTE)		3.25%	3.78%	3.72%	Not available Internal Target
Short term sickness absence rate (% FTE)			1.48%	1.38%	Not available
Long term sickness absence rate (% FTE)			2.11%	1.74%	Not available

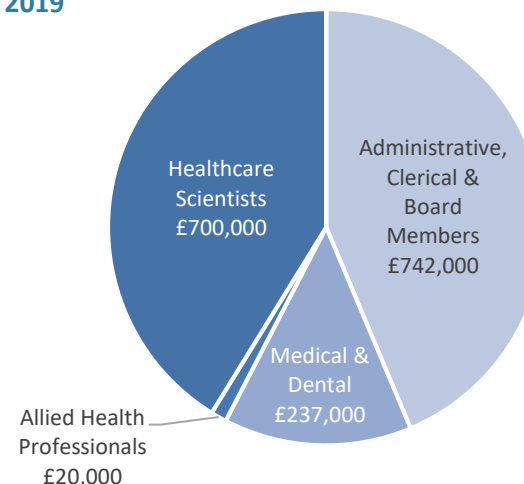
People Dashboard (Continued)

Statutory and Mandatory Training		Target	Oct-19	Nov-19	Dec-19	
Training Compliance with core competencies		95%	90.75%	87.71%	88.67%	Internal Target
Training Compliance including extended competencies			90.43%	88.40%	89.27%	
Appraisals		Target	Oct-19	Nov-19	Dec-19	
My Contribution Appraisal completed within previous 12 months		85%	72.65%	73.70%	77.67%	WG Target
Medical Revalidation Appraisal completed within previous 15 months					100.00%	
Combined Appraisal % (under review)					78.90%	
Employee Engagement - Staff Survey			2013	2016	2018	
Intrinsic psychological engagement			3.88	3.90	3.97	
Ability to contribute towards improvement at work			3.54	3.48	3.77	
Staff advocacy and recommendation			3.70	3.79	3.85	
Overall Engagement Index Score			3.70	3.73	3.86	
Gender				Dec-18	Dec-19	
Male				23%	23%	
Female				77%	77%	
Black, Asian and Minority Ethnic (BAME) Staff				Dec-18	Dec-19	
BAME				4%	4%	
White				76%	77%	
Not Declared/Unspecified				20%	19%	
Disability				Dec-18	Dec-19	
Yes				3%	4%	
No				60%	66%	
Not Declared/Unspecified				37%	30%	
Welsh Language Skill Level Declaration			Oct-19	Nov-19	Dec-19	
Listening/Speaking Welsh			84%	86%	87%	
Reading Welsh			81%	84%	84%	
Writing Welsh			81%	83%	84%	

Monthly agency spend



Rolling 12 months agency spend by category, January 2018 to December 2019



Summary

- Total agency spend has decreased from £130K in November 2019 to £129K in December 2019, with actual costs for the year to date at £1.1m, equating to 1.6% of total pay expenditure (1.7% in-month). This is lower than agency spend in 2017/18 (2.6% of total pay).
- There has been an increase in expenditure in the category 'Healthcare Scientists' from £47K in November to £55K in December.
- There has been a decrease in expenditure in the categories 'Administrative, Clerical & Board Members' from £73K in November to £65K in December, and in 'Medical & Dental' from £10K to £9K.

Key actions

- All agency cases are reviewed by Finance and People Business Partners and only sent through to Establishment Control Panel if there are robust cases for use and then these are scrutinised by the Panel to ensure all possible options have been explored before final approval.
- Due to investment funding up to the end of the financial year, those on fixed term contracts up to the end of the financial year have been actively seeking permanent employment, leaving very short-term vacancies. Due to the short-term vacancies, agency is being utilised in order to ensure continued delivery up to the end of the financial year.
- New investment funding received that runs to the end of the financial year has led to some further agency usage due to the very short timescales, both in enabling individuals to start immediately and due to the length of contract.

END