



PUBLIC HEALTH WALES

PERFORMANCE AND INSIGHT REPORT

APRIL 2022



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Public Health
Wales

Key Performance and Insight Summary

Theme 1: Maintaining a healthy and sustainable workforce – Pages 3 to 6

- Staff sickness absence continues to decline since the start of the year (3.7% in-month), with 12-month rolling sickness absence at 4.3%. Health Improvement (5.7%), Screening (5.6%) and Microbiology (5.1%) continue to report the highest absence rates. Work has been undertaken with Microbiology Swansea and Diabetic Eye Screening Wales to identify and put in place measures to aid compliance with return to work and sickness review meetings.
- There were 22 staff leavers and 48 new starters in April 2022. A quarter of the leavers were due to promotion, with half moving to another NHS organisation.
- Latest time to hire performance has again improved and is achieving the 44 day target in March 2022 at 33.3 days.
- Appraisal compliance for April continues to decline at 52.7%. With pay progression coming into force in October 2022, part of the criteria to be put forward for an increment is staff needing to have an appraisal date entered into ESR within the last 12 months. Communication is being issued to staff over the coming weeks.

Theme 2: Achieving value and impact – Pages 7

- The reported position for Public Health Wales at month 1 2022/23 is a net surplus of £39k, with an anticipated breakeven position at year-end. Our revenue position is being supported by £2.211m of non-recurrent COVID-19 funding.
- Our capital funding for 2022/23 totals £8.212m with year to date spend at £0.051m. Capital funding is made up of £1.202m discretionary funding and £7.010m strategic funding. The Capital Planning Group have met to review the Statement of Needs provided by the organisation, with proposed use of our Capital Discretionary allocations being submitted to our Board for approval.
- Performance for our year to date Public Sector Payment Policy is above the statutory target at 97% in month 1.

Theme 3: Organisational quality and access to high quality services – Pages 8 to 13

- The 7-day COVID-19 incidence in Wales is 21.9 cases per 100,000, which is a reduction of 10.5 cases per 100,000 compared to the prior 7 days. The 7-day positivity in Wales is 10.3%, 2.3% lower than the prior 7 days. Testing activity is currently ~1300 tests per day across all Public Health Wales laboratories with average in-lab turnaround times at 6 and 2 hours for main and hot lab functions, respectively.
- Screening performance continued to be positive over the latest period with programmes implementing screening in line with current Infection Prevention and Control guidance which includes PPE, enhanced cleaning and at least 1 metre social distance. Screening will start at the new screening venue in Mountain Ash in June 2022 which will enable improved availability for programmes. Additional screening staff are in post and completing training which will support recovery.
- Microbiology testing activity remained positive in Q4 2021/22 with all reported indicators remaining above or within 10% of target levels. Turnaround time compliance for Bacteriology/Virology and the Annual Urgent Sample Turnaround Time fell short of target due to delays in transportation and workload pressures.
- One No Surprises Incident (NS) was reported to Welsh Government in April 2022 related to an administrative error made on the survey request letter that was incorrectly addressed. No clinical information was contained in the letter but the incident was reported to the Information Commissioner office in April 2022.
- The Strategic Risk Register details the six new strategic risks that have been approved by the Board. Work is ongoing to determine the risk scores, controls and actions to work towards the target risk. Further updating of the corporate risk register will be completed following the completion of this work.

Theme 4: Improved population health and well-being – Page 14

- Following a successful 2021/22, April saw the beginning of our reporting cycle against our Strategic Plan (2022-2025) that was approved by our Board on 31 March.
- Our Strategic Plan contains 382 milestones. At month one, 1% of milestones were reported as complete, 94% of milestones reported as on track, and 5% of milestones flagged as having the potential to fall behind schedule.

Theme 1: Maintaining a healthy and sustainable workforce

Theme 1A: Reducing staff sickness and improving well-being

Sickness Absence

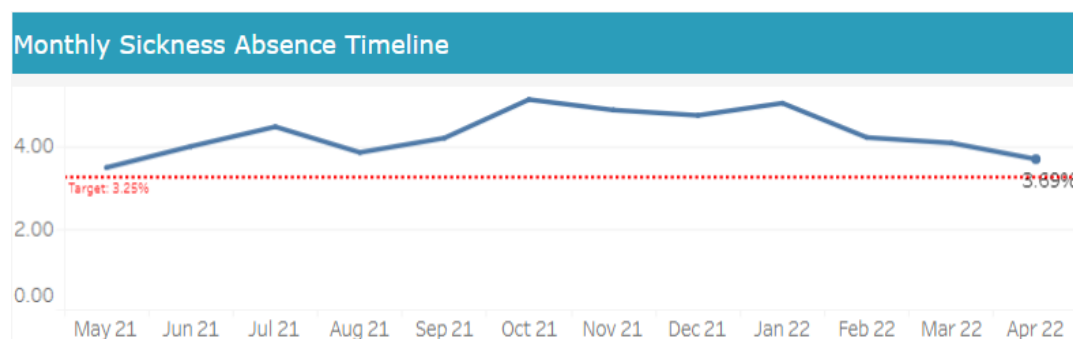
Sickness absence for April 2022 was 3.69% which is a decrease from 4.09% in the previous month, with the rolling 12 month figure at 4.33%.

'Anxiety/stress/depression/other psychiatric illnesses' remains as the most frequent sickness absence reason (highest number of FTE days lost) and accounted for over 2,287 FTE days lost during quarter 4. The second highest recorded absence reason during quarter 4 is 'Infectious Diseases' which accounts for 1,159 FTE days lost.

The highest rates of sickness absence for April 2022 are within Health Improvement (5.7%), Screening (5.6%) and Microbiology (5.1%)

The People and OD Advisory team have undertaken work with Microbiology Swansea and Diabetic Eye Screening Wales to identify and put in place measures to aid compliance with return to work and sickness review meetings.

Sickness absence monthly trend (%)



Long and Short term sickness

For April 2022, of those staff absent due to sickness, 19% of staff were absent with long term sickness and 81% absent with short term sickness.

COVID-19 Absence

The number of COVID-19-related absences at the end of April have decreased to 11. The majority of those absences are for staff who are unfit for work due to COVID-19, with a small number of staff recorded as self-isolating (<5). More than half of the absences that are related to COVID-19 are from Health Protection and Screening Services.

COVID-19 sickness absence arrangements have been extended until 30 June 2022. Full pay including enhancements will continue to be paid from the first day of COVID-19 sickness absence for up to six months. In addition the arrangements for individuals on long term absence have also been extended meaning that any half pay provisions will not now come into effect from today and arrangements for full pay have been extended until 30 June 2022. Guidance documents have been produced to support with the management of long COVID-19.

A further communication will be going out in May 2022 reminding Line Managers of the need to appropriately record COVID-19 related absences in ESR.

Theme 1: Maintaining a healthy and sustainable workforce

Theme 1A: Reducing staff sickness and improving well-being

Staff COVID-19 Vaccination

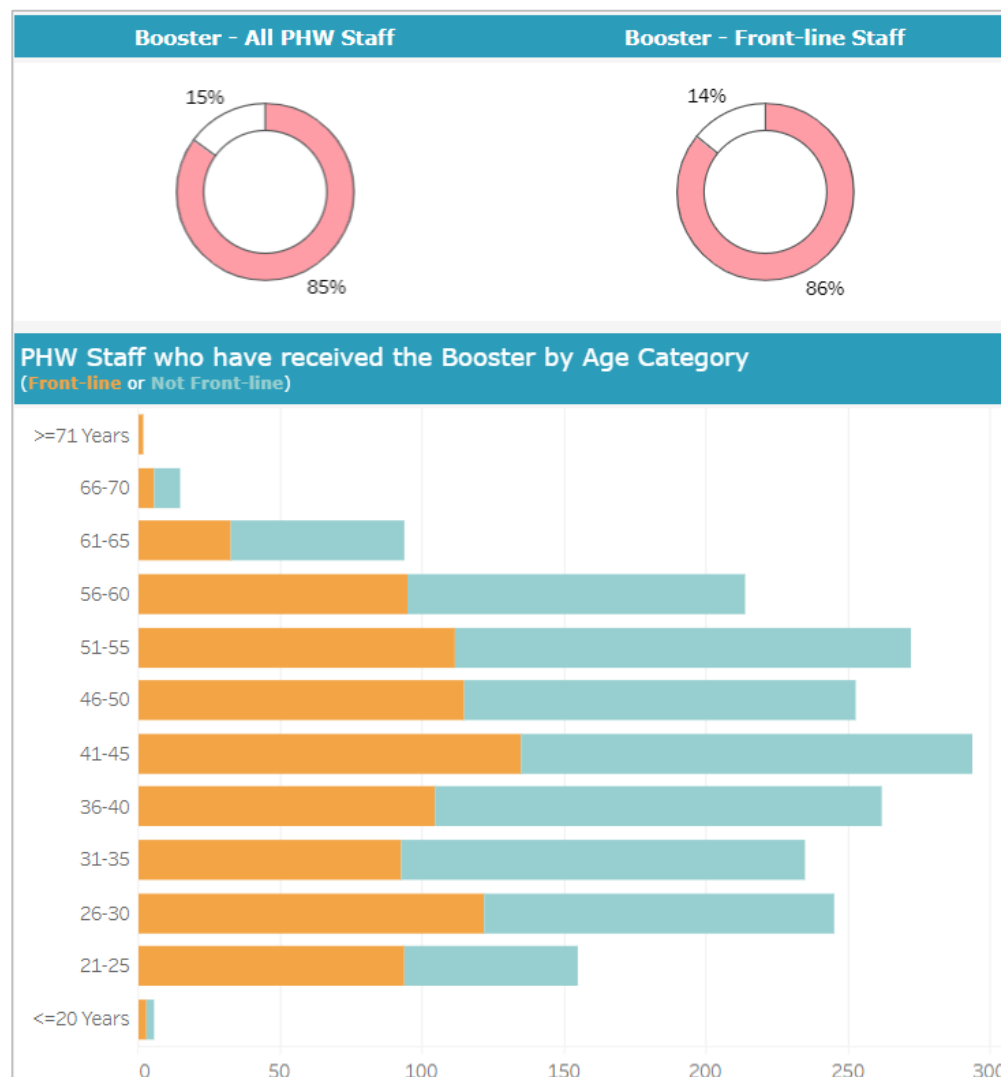
The updated staff COVID-19 vaccination dashboard shows that 2,266 current Public Health Wales employees have been given their first dose, which is 94% of our total workforce. 2,243 members of staff are now fully vaccinated (93%).

Front-line workers – Based on the refreshed front-line list, 1,020 have been given their first dose, which is 96% of our front-line workers. 1,012 front-line workers are now fully vaccinated (95%).

Booster vaccinations – Latest available data shows that 2,047 current Public Health Wales employees have been given the booster (85%). In terms of front-line workers, 915 staff members have been given the booster vaccination (86%).


Please note that the dashboard is based on staff who are employed by Public Health Wales as reported on 9 May 2022, so the total number of staff vaccinated will fluctuate as new starters join the organisation as well as when employees leave the organisation.

Ongoing data entry means that the true number of vaccinations given is likely to be higher.



Theme 1: Maintaining a healthy and sustainable workforce

Theme 1B: Our staff are highly trained and feel supported

Statutory measures		Target	2021/22	Feb 2022	Mar 2022	Apr 2022	Link to PAD
	Statutory and Mandatory compliance	85%	87.1%	87.1%	87.1%	● 87.1%	
	Appraisal compliance	85%	56.9%	58.9%	56.9%	● 52.7%	

Statutory and Mandatory Training

Compliance with the core suite of statutory and mandatory training remains just above the Welsh Government target of 85% and continues to be at risk of falling below, as well as not showing any significant improvement.

People and OD are carrying out two ESR drop in sessions per month, for anyone experiencing issues accessing e-learning, the next session is due to take place on 19 May 2022 and dates have been communicated via our SharePoint pages and weekly e-mails to staff and managers.

Appraisal and Development Reviews

The 12-month rolling compliance for My Contribution appraisals is currently at 52.7% against the Welsh Government target of 85%.

With pay progression coming into force in October 2022, part of the criteria to be put forward for an increment is staff needing to have an appraisal date entered into ESR within the last 12 months, this should therefore have a positive impact on appraisal compliance figures.

Communication is being issued to staff and managers over the next few weeks in preparation for this and entering pay progression and appraisal dates into ESR will also be covered in the ESR drop in sessions.

Theme 1: Maintaining a healthy and sustainable workforce

Theme 1B: Our staff are highly trained and feel supported

Staff Turnover

Staff Turnover for April 2022 was 0.9%, compared with 1.7% in March 2022. The rolling 12-month turnover to 30 April 2022 was reported as 12.9%.

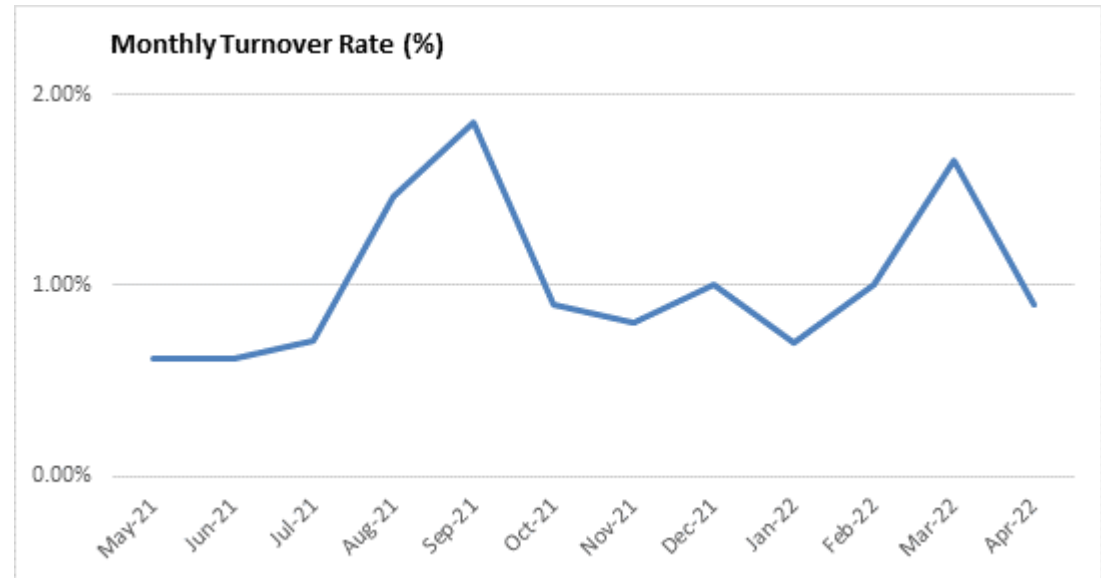
In Quarter 4 2021/22, the most frequently reported reason for leaving was identified as 'Promotion' with 19 staff citing this as their reason for leaving, this is extremely positive as we continue to support our workforce to develop and progress.

To ensure we have a further level of detail about those who join, continue to work and leave PHW, we are currently undertaking additional analysis of this data as well as the labour market more broadly. This will further help shape our employee value proposition with the aim of becoming an employer of choice.

Staff Movements

For April 2022, there were 22 leavers and 48 new starters. A quarter of the leavers were due to promotion, and half have moved to another NHS organisation.


In terms of internal promotions in April 2022, there were 16 employees who moved to a higher pay band. The majority of those were promoted within their own team, with a small number moving to other teams across the organisation.



Theme 2: Delivering Value and Impact

Theme 2: Delivering against our agreed budgets

Statutory measures

	Month 1	YTD 2022/23	Year-end forecast	Link to PAD
Revenue financial target	(£39k)	(£39k)	Breakeven	Link
Capital financial target	£8.212m	£0.051m	Breakeven	Link
Public Sector Payment Policy (PSPP)	97%	 97%	>95%	Link

Financial Summary – Month 1 2022/23

- The reported position for Public Health Wales is a net surplus of £39k, with an anticipated breakeven position at year-end.
- The month 1 revenue position is being supported by £2.211m of non-recurrent COVID-19 funding as shown in the table opposite.
- Our capital funding for 2022/23 totals £8.212m with year to date spend at £0.051m. Capital funding is made up of £1.202m discretionary funding and £7.010m strategic funding.
- The Capital Planning Group have met to review the Statement of Needs provided by the organisation and a paper is due to be submitted to Board for approval of the proposed use of our Capital Discretionary allocation.
- Major capital schemes include Breast Screening Imaging Equipment £3.075m, and The NHS Collaborative LINC System £3.618m.
- Performance for our year to date Public Sector Payment Policy remains above the statutory target at 97% in month 1.
- Further information on our latest financial position can be found in the accompanying 2022/23 Financial Position report.

Non-Recurrent Welsh Government COVID-19 Funding Supporting Month 1 Position

Funding Item	Actual Apr- 22 £'000
Additional Operational Expenditure	
Test	2.078
Trace	0.071
Vaccination Programme	0.061
PPE	0.001
Total Operational Expenditure	2.211
Funding	
Assumed Welsh Government Funding	-2.211
Total Funding	-2.211

Theme 3: Organisational quality and access to high quality services

Theme 3A: COVID-19 Update

COVID-19 high level summary

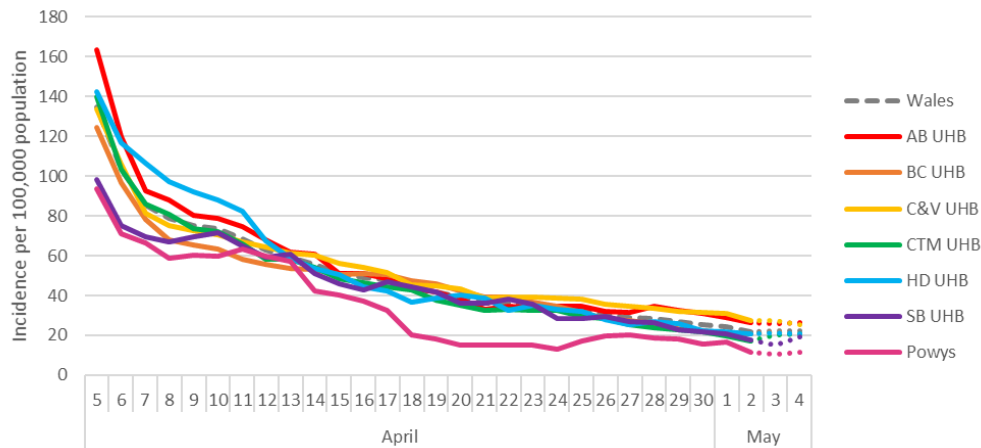
Epidemiology

As at 9am on 6 May (most recent data has a lag of 4 days)

- The 7-day incidence in Wales is 21.9 cases per 100,000, which is a reduction of 10.5 cases per 100,000 compared to the prior 7 days.
- The 7-day positivity in Wales is 10.3%, which is 2.3% lower than the prior 7 days.

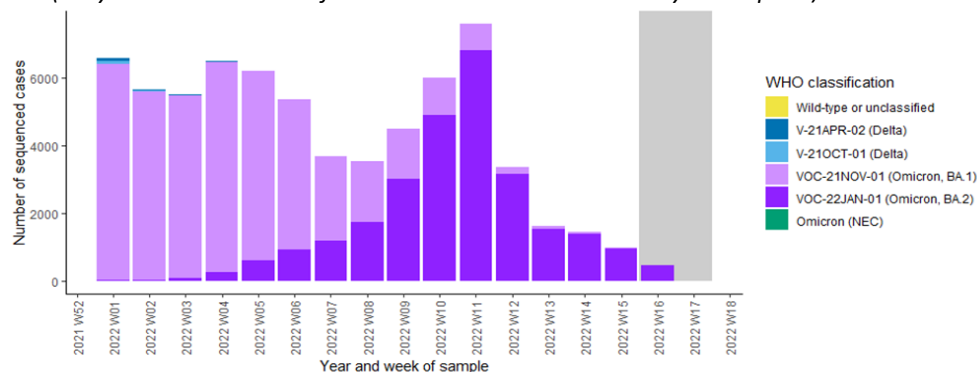
Confirmed cases of COVID-19 per 100,000 population in the previous 7 days, by sample date and Health board – as at 9am on 6 May 2022

- Interpret with caution, due to changes in testing (policy updated on 1st April 2022) – testing is not currently available at a high level

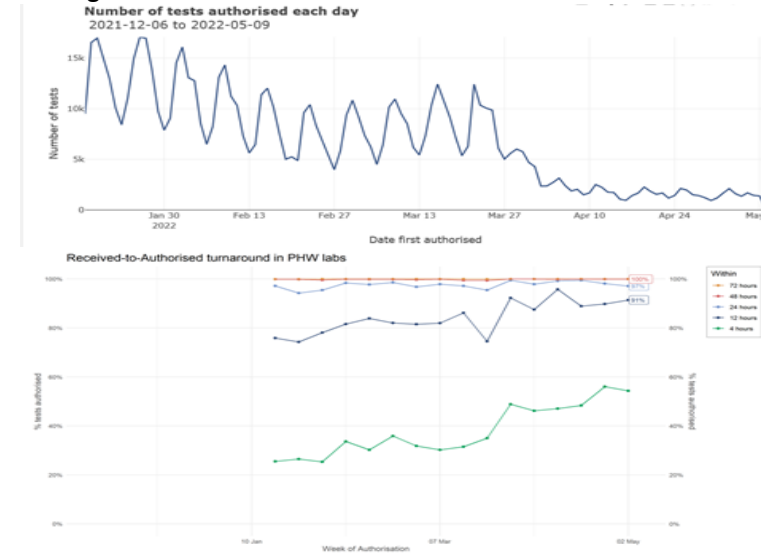


Variant summary up to 3 May 2022

- The Omicron BA.2 subvariant is very dominant
- (Grey shaded area: Data for the most recent weeks is not yet complete)



Testing



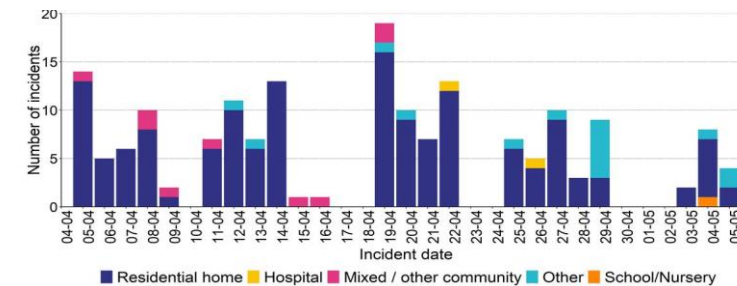
Summary

Activity is currently ~1300 tests per day across all PHW labs.

Average in-lab turnaround times (TATs) are 6 and 2 hours for main and hot lab functions respectively.

Individual Health Board levels are consistent in pattern and trend as All Wales.

Incidents and Outbreaks



New acute respiratory/suspected COVID-19 outbreaks and incidents logged in Tarian as at 9am 05/05/2022.

Summary of significant incidents and outbreaks

Incidents of COVID-19 continue to be reported in closed settings, albeit in fewer numbers than the previous month. At present there are no large-scale incidents of note.

Developments

- The COVID Transition Group will consider a draft plan for endemic COVID response in late May.
- A four-nations discussion has been held to discuss COVID surveillance, offering the opportunity to develop consistent approaches and economies of scale across the UK.
- A business plan is being prepared for submission in early June to Welsh Government to fund the COVID/Respiratory illness surveillance plan.
- Good progress is being made to agree revisions to the All Wales Outbreak Control Plan, which will incorporate the learning from COVID response – this is due end June. The revisions are being made in conjunction with partners.

Theme 3: Organisational quality and access to high quality services

Theme 3B: Access to high quality services

Screening Services

All of the Screening programmes continue to be delivered across Wales. Recovery plans continue to be progressed and active management undertaken to maintain all possible clinics. Programmes continue to implement screening in line with current IPC guidance which includes PPE, enhanced cleaning and at least 1 metre social distance. The removal of restrictions has been made in non-clinical areas and in venues that participants do not attend for screening. The new screening venue that has been progressed in Mountain Ash is near completion and screening planned to start in June 2022. This will enable improved availability for screening for DESW, WAAASP and NBHSW programmes.

Breast Screening Wales has continued to implement the equipment replacement programme with Wrexham completed and Llandudno site currently underway, with Cardiff planned replacement next. An additional mobile has been provided to support maintained activity over the equipment replacement programme implementation and this has become operational this month. The mobile replacement is progressing as planned with expected new mobiles received from March 2023. Breast screening activity is progressing as expected but due to current issues with NBSS IT system it is not currently possible to update SPARs. This will be resolved by the next report.

Cervical Screening Wales invitations continue to be sent out with no delay and the number of samples being received by the laboratory is at sustained levels. The timeliness of the results process has improved this month as the laboratory and pathways team have recovered a short delay in results caused by supply issue which affected timeliness of laboratory testing. Meetings are continuing with a creative agency who has been commissioned to work with programme and communication leads to undertake a trust-building campaign to ensure the correct messaging about human papillomavirus (HPV), cervical screening and the interval change are being communicated on social media. Planning is underway to implement re-procurement of equipment in the laboratory and working with colleagues to enable this to ensure does not impact timely service to participants. Work is continuing in preparation for implementation of new IT system (CSIMS) with end to end testing planned for week of 16 May 2022.

Bowel Screening - The number of kits being returned continues to be good with uptake continuing high level which 69% in March 2022. Improvement work to reduce reject rate has been successful with this being maintained at less than 2% for the last 4 months.

There continues to be delays in Bowel Screening participants progressing to have their screening colonoscopy but this has shown some improvement in timeliness (range is from 6 to 20 weeks with 10 of the 13 units 11 weeks or less). There remains improvement with the pre-assessment part of the pathway due to increase in staff recruitment and the programme working with health boards to pilot an improved process. Work with Hywel Dda cancer leads and primary care improving uptake of non-responders has recently been presented at Improvement Cymru National Conference. The programme continues to working closely with health board colleagues and the national endoscopy programme for sustainable improvements and is progressing in line with plans for next step in optimisation in October 2022 when 55,56 and 57 years old will be included.

Newborn Hearing Screening has worked hard to maintain continuity throughout the pandemic. Screening continues to be actively managed and timeliness maintained.

Newborn Bloodspot Screening coverage continues has been maintained above standard with over 95% of samples taken between day 4 and 6 of life and avoidable repeat rate remaining very low which is remarkable with our colleagues in midwifery under considerable pressure.

Diabetic Eye Screening remains the most challenging programme to recover backlog due to it being annual screening and a very large eligible population which continues to increase by about 1,000 participants each month. The novel optometry pathway that was undertaken from November 2021 to March 2022 is currently being evaluated. . The programme is starting scoping work around transformation and is working with colleagues in Public Health Knowledge and Research and commissioned company to undertake discovery work. This has been completed and will inform the transformation work. Screening will start at the new screening venue in Mountain in June 2022 and this will enable improved availability. Additional screening staff are in post and completing training which will support recovery.

Wales Abdominal Aortic Aneurysm Screening continue to explore with partners options around increasing clinic locations which will aid recovery. Additional screening will be undertaken on Tenovus vans in Cardiff to reduce backlog. Compared to pre pandemic, activity is higher, uptake is higher and DNA is lower. All additional screening staff as set out in the recovery plan and completely training which will support recovery. Screening will start at the new screening venue in Mountain Ash in June 2022 and this will enable improved availability.

Theme 3: Organisational quality and access to high quality services

Theme 3B: Access to high quality services

Microbiology – Non-COVID-19 activity

At the end of the 2021/22 reporting period, performance for agreed Microbiology indicators continues to be strong overall with only small variations evident in Quarter 4 2021/22. All reported indicators remain above or within 10% of respective target levels.

Whilst performance in the lead up to the final quarter of the financial year was encouraging, especially in light of the enhanced pandemic response, latest figures in Quarter 4 2021/22 highlight a small number of areas where challenges remain with performance being actively monitored.

These include turnaround times for Bacteriology and Virology, as well as the Annual Urgent Sample Turnaround Time:

Turnaround Time – Bacteriology (92%)

Three low priority sample types continue to affect compliance in Cardiff, Swansea and Rhyl over weekends, resulting in minor delays in results for non-urgent work. Containment Level 3 (CL3) facilities are not in use in Swansea and therefore some samples have needed to be transferred to the University Hospital of Wales, Cardiff for processing and reading. Issues with analyser software has also been experienced in Rhyl. Weekend work depends on the availability of trained staff and the workload of the other benches. Some work has also required extended incubation as per guidelines.

Performance will be monitored on a quarterly basis with CL3 being reinstated in Swansea and switchover due for Rhyl. Ongoing progress with training and competency for trainee staff will also support improvement.

Turnaround Time – Virology (90%)

Prioritisation of COVID-19 work at a particularly busy period has had a significant impact on CT/NG (Chlamydia trachomatis/Neisseria gonorrhoeae) testing capacity in Cardiff. Delays relating to transport arrangements from North Wales remain.

These tests will continue to miss the 95% target for the expected turnaround time until either the transport is changed or the turnaround time compliance is raised to accommodate the transport delays. The Microbiology team will continue to monitor compliance for these areas. No changes to transport or expected turnaround times to be made currently.

Annual Urgent Sample Turnaround Time (88%)

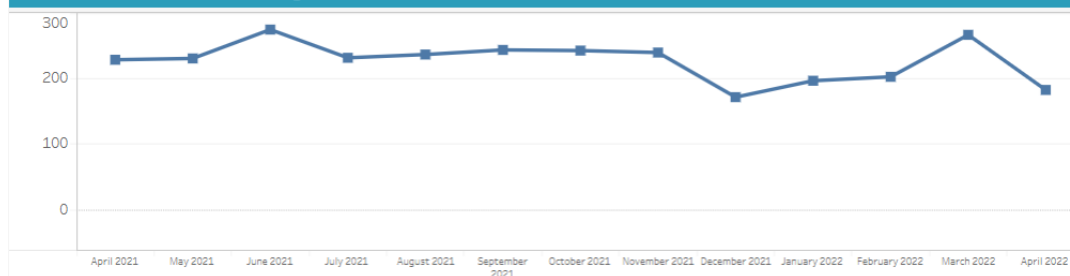
Turnaround time was lower than expected due to delays in the transportation of some samples before arrival at the testing laboratory, from various locations within Morriston hospital, Swansea. Once received the samples were all processed and reported within the stipulated 4 hours.

Further guidance to be issued to users via the Heath Board e-bulletin on the need for appropriate sample transportation within the hospitals. Turnaround time is expected to improve within one month.

Quality and Improvement

Incidents

Incidents Time Series; Rolling 12 Month Period



A total of 182 incidents were reported in April 2022. 98% of these are within the Health Protection and Screening Directorate.

The organisation's investigation and closure target for incidents is set to 30 working days. As such, the incidents reported in April are still within an acceptable open status.

With regards to the closure rate in (March 2022), 8% of incidents are overdue/still open, 82% were closed within the 30 day target and 10% were closed outside the 30 day target.

Incident themes

The majority of incident types in April relate to Microbiology and Cervical Screening, where incidents are predominantly recorded as laboratory incidents and equipment incidents. The second highest recorded incident type is error-non incidents logged by Cervical Screening, which relates to sample taker errors which occur within health boards.

Nationally Reportable Incidents

There were no Nationally Reportable Incidents reported to the Delivery Unit in April 2022.

No Surprises Incidents

There was one No Surprises Incident reported to Welsh Government in April 2022.

On Wednesday 30 March 2022, Diabetic Eye Screening Wales sent out 2,500 letters to randomly selected participants of the service inviting them to participate in a survey about the service as part of discovery work. The following day a number of participants rang in to advise that the Welsh version of the letter was addressed correctly to them but the English version of the letter was incorrectly addressed to someone else. The letters were on two separate A4 sheets. No clinical information was included in the survey request letter. Pathway staff reassured callers (26 in total) that no clinical information was contained in the letter and that the programme was aware of the issue and to request then to dispose the incorrect letter confidentially.

The incident was reported to the information commissioner office on 1 April due to the number potentially affected although information was not sensitive. Review of the incident was undertaken on 7 April 2022 and identified that the issue was auto mailer error and time pressure with staff working under pressure with unfamiliar equipment. Learning identified included adequate time and resources needed for work and tasks to be undertaken by staff familiar with equipment and processes.

Current Incident Numbers

As of 9 May 2022, there were a total of 63 incidents that have been open for more than 30 days. These figures are not reflected in the dashboard due to the retrospective nature of reporting. This figure covers all incidents that have been reported more than 30 days ago and the oldest incident still remaining open was reported on the 5th June 2020.

Work is underway to support the organisation with progressing these incidents within the Health Protection and Screening Directorate, which specifically relate to the COVID-19 pandemic.

The intention is that where possible all overdue incidents will be closed by the end of July 2022. It is now more crucial that closure is achieved prior to the implementation of the new Datix system. Teams have been proactive in the closure of overdue incidents with support from the dedicated resource within the Concerns team.

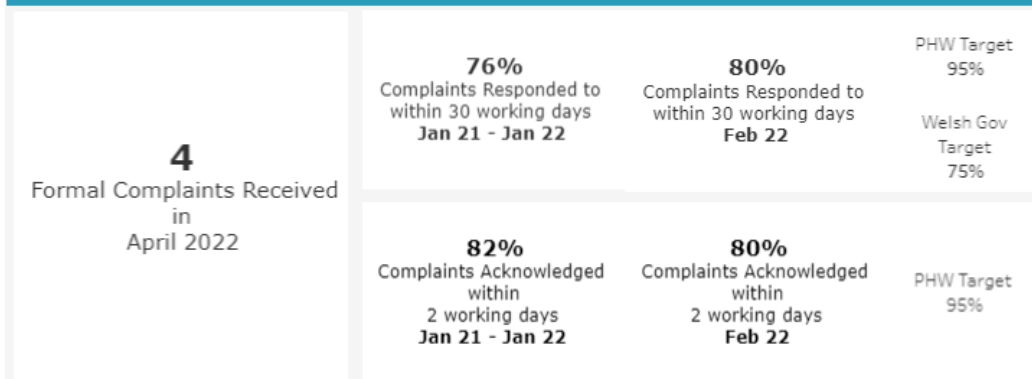
Theme 3: Organisational quality and access to high quality services

Theme 3C: Achieving high quality and risk management in our organisation

Quality and Improvement

Formal Complaints

Formal Complaints - Key Metrics



The latest figures for April 2022 show that four formal complaints were reported, all within the Health Protection and Screening Directorate. This is a decrease from the six complaints reported in March 2022. All four (100%) were acknowledged within the target two working days.

All four complaints are all currently under investigation and the 30 working day timescale is not yet due.

Themes and trends for April 2022

In April 2022, there has been a slight increase in complaints reported in the Screening Division, with four complaints received in April 2022 compared with the three in March 2022.

A theme was recorded within the Breast Test Wales appointment letters, where two complaints raised dissatisfaction with the sentence 'We will respond in Welsh without delay.' An explanation has been provided stating the requirement to comply with the Welsh language standards.

Compliments

In April 2022 183 compliments were received, which is an increase from 53 in March 2022.

These compliments were in relation to:

- Patient care
- Positive attitude/behaviour of staff

The ratio of compliments to formal complaints has increased from 8:1 in March 2022 to 46:1 in April 2022.

Claims

One new claim was received in April 2022. This claim related to Cervical Screening and is focused on an alleged misreporting of cytology slides dated 2011, 2014 and 2015.

There are currently 18 confirmed claims and four potential claims, 95% relating to the Health Protection and Screening Directorate and 5% relating to the WHO Collaboration Centre.

Theme 3C: Achieving high quality and risk management in our organisation

Risk Management

The Strategic Risk Register details the six new Strategic Risks that have been approved by the Board. There is ongoing work to determine the risk scores, controls and actions to work towards the target risk.

These are the highest level risks that could prevent the organisation from delivering on its strategic priorities:

There is a risk that Public Health Wales will not be sufficiently focused, agile and responsive in discharging our functions, caused by the unpredictable and changing nature of the current and emerging geopolitical, socio-economic and health threats, resulting in an inability to tackle the population health challenges in a sustainable way.

There is a risk that Public Health Wales will not deliver its plans for delivering high quality, safe and effective services for population screening, health protection and infection caused by uncertainty of the impact of current and future health threats and lack of specialist workforce, resulting in inability to prioritise service delivery and transform models of care.

There is a risk that we will not manage organisational change well, caused by multiple change programmes being implemented simultaneously, but in isolation, and insufficient time to effectively engage an exhausted workforce, resulting in high levels of sickness absence, vacancies, staff turnover and stress.

There is a risk that we are unable to attract and retain the required skills, knowledge and experience caused by skill shortages and increased pressures on staff, which has been exacerbated by the Covid-19 pandemic, resulting in there being insufficient capability and capacity to deliver our plans.

There is a risk that we will fail to exploit data to inform and direct public health action and interventions. This will be caused by data being held in silos, difficulty accessing the data and inability to access to provide the impact on public health. This will result in worse public health outcomes in Wales and increased information governance risk within Public Health Wales

There is a risk that Public Health Wales will suffer a cyber-attack on its IT systems of such magnitude that it will be unable to maintain core business and public facing services. This will be caused by our inability to keep pace with the technological advances of cyber criminals and will result in statutory functions not being met and public safety being seriously compromised

At a recent Board Development session, risk appetite statements for each strategic objective were discussed and agreed.

The Corporate Risk Register details the eight highest level operational risks that are being managed on a day to day basis by Executive Directors. Further updating of the corporate risk register will be completed following the approval of the strategic risk register.


Operational Plan Month 1 Summary

April 2022 saw the beginning of our reporting cycle against our Strategic Plan (2022-2025) that was approved by our Board on 31 March 2022. This follows on from the successful delivery of our Operational Plan 2021/22 where we delivered against 86% of our milestones with the remaining milestones forming part of our new Strategic Plan.

The Strategic Plan contains 382 milestones and in month one, 1% of milestones are reported as complete, 94% as on track and 5% as having the potential to fall behind schedule.

As part of the controls and assurance work to support the plan, we will be introducing a request for change process in month two reporting. The process will be shared with planning leads and scrutinised by the Strategy and Planning Division.

Milestones are captured by strategic theme and in addition to this we are also reporting by directorate that feeds into the Performance and Assurance Dashboard.

Further information on our Operational Plan performance can be viewed here 

Operational Plan Month 1 Progress by Directorate

Milestone overview by Directorate			
Directorate (group)	A	C	G
Health and Wellbeing			68
Health Protection & Screening Services	3	1	78
Health Protection & Screening Services / Operations and Finance			3
Improvement Cymru	2		28
Operations and Finance	1		52
People and Organisational Development	3	1	29
Public Health Data, Knowledge and Research	2	1	31
Quality, Nursing and Allied Health Professionals	7	2	27
WHO CC		1	42