



PUBLIC HEALTH WALES

PERFORMANCE AND INSIGHT REPORT

FEBRUARY 2023



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WALES

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Public Health
Wales

Key Performance and Insight Summary

Theme 1: Maintaining a healthy and sustainable workforce – Pages 3 to 7

- Sickness absence for February 2023 was 3.69%, a decrease from 4.51% in the previous month, with the rolling 12-month figure at 4.48%. Short term sickness absence accounts for 71% of absences in February, The People & OD Directorate will be working with Directorates with the highest levels of short-term absence to identify additional support or interventions in reducing short term absences.
- Around 51% of Public Health Wales staff have received the flu vaccine with uptake among front-line staff slightly higher at 53.5% (up from 47% and 46.4% respectively last month). Approximately 53% of staff have received the COVID-19 booster with uptake at over 59.3% for front-line staff.
- Appraisal compliance decreased from 72.1% to 71.5% in January 2023, following a slight increase in January 2023. Compliance remains below the 85% WG target.
- Compliance with the core suite of statutory and mandatory training remains above the 85% Welsh Government target at 89.6% (down 1.8% in-month). E-learning queries are being directed to the ESR All-Wales Support Team, in addition to the People and OD team carrying out two ESR drop-in sessions per month.
- The Gender Pay Gap Report has been published and shows the mean pay gap has reduced from 16.1% in 2021 to 11.8% in 2022, in line with the objective set in our Strategic Equality Plan.

Theme 2: Achieving value and impact – Pages 8 to 9

- The cumulative reported position for Public Health Wales at month 11 2022/23 is a net surplus of £132k (£162k in-month). The surplus is a combination of variances across a number of Directorates associated with the movement against spending plans, with the main under spend in Health Protection and Screening.
- Public Health Wales' forecast year-end revenue position is a surplus of £0.150m which represents less than 0.1% of total annual budget. This is after the return of non-recurrent benefits of £2.487m to Welsh Government.
- Our capital funding for 2022/23 totals £5.679m with year to date spend at £4.126m. Capital funding is made up of £1.142m discretionary funding and £4.537m strategic funding. Of the £1.552m remaining £1.470m of additional orders have already been placed. There remains a focus to achieve a break-even capital position
- Performance for our year-to-date Public Sector Payment Policy remains above the statutory target at 96.17% (95.66% in month 11).
- Year to date agency spend as a percentage of total pay equates to 3.3% with a year-end forecast of 3.3%.

Theme 3: Organisational quality and access to high quality services – Pages 10 to 19

- COVID-19 and influenza incidents levels remain relatively stable with no significant COVID-19 incidents or outbreaks reported this month. However, multiple Omicron variants are co-circulating with XBB.1.5 the most frequent in the most recent week. Testing numbers remain relatively consistent and driven by symptomatic requirements. Turnaround compliance for non-rapids and rapids in hot labs were over 90% and 95%, respectively.
- Delivery of screening programmes continue despite the challenges of ongoing strike action. Snow conditions in March 2023 meant that screening clinics had to be cancelled where local conditions were difficult. The AAA Screening programme continues to focus on reducing backlogs and undertook a high number of screens in February 2023, and plans are progressing well with the new screening site in Cardiff. The programme has fully recovered by the end of March 2023 as planned.
- Latest childhood vaccination data showed that for children aged 1, uptake of the "6 in 1" vaccination remained below the 95% target, down 0.1% to 94.6%.
- One No Surprises Incident reported in February related to taking forward actions to address recommendations from the external review of the TB outbreak in 2010.

Theme 4: Improved population health and well-being – Page 20

- Over 96% of IMTP milestones were reported as on track or complete in month 11. With 131 milestones to be delivered by year-end (38.97% of all milestones), these will be monitored closely since previous data shows that a green milestone has 33% chance of changing directly to red. 10 milestones were completed this month.
- Five requests for change are submitted for approval in month 11, includes requests to roll-over into the 2023/24 plan regarding dates (4), and scope change (1).

Theme 1: Maintaining a healthy and sustainable workforce

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

Sickness Absence

Sickness absence for February 2023 was 3.69% which is a decrease from 4.51% in the previous month, with the rolling 12 month figure at 4.48%.

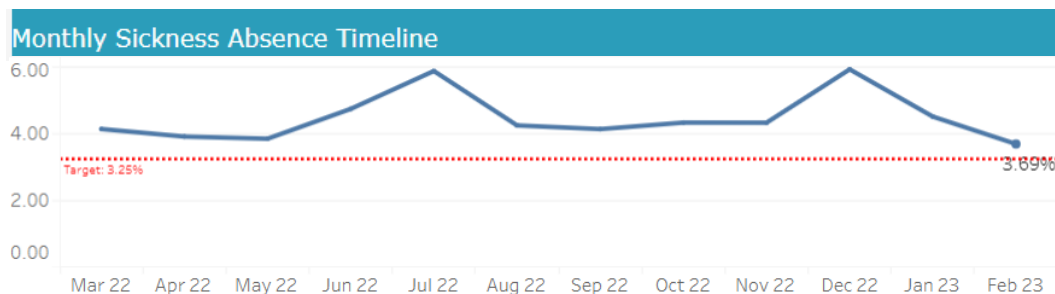
Short term sickness absence accounts for 71% of absences in February. The People & OD Directorate are currently reviewing the occurrence of short term absences across the organisation and will be working with those Directorates with the highest levels of short term absence to identify what, if any, additional support or interventions might be helpful in reducing short term absences where possible.

COVID-19 Absence

The latest available data indicates that we currently have 5 staff absent due to COVID. Absences related to COVID continue to be closely monitored.

The number of new COVID related absences remains relatively low but the POD Advisory team continue to support the management of cases of long term absence as a result of COVID.

Sickness absence monthly trend (%)



Theme 1: Maintaining a healthy and sustainable workforce

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

Staff Flu and COVID-19 Vaccine Uptake

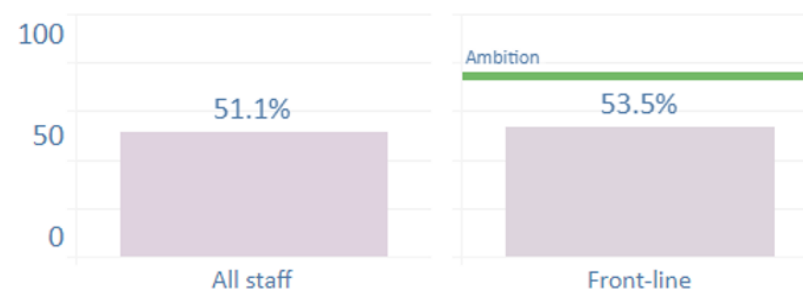
The Influenza and COVID-19 autumn booster vaccine uptake dashboard in Public Health Wales staff has been developed by the Health Protection Division. Latest available data shows:

Influenza vaccine uptake – As of 6 March 2023, 51% of Public Health Wales staff have received the flu vaccine (1,238 out of 2,422 staff), up from 47% reported in the previous month. Uptake for front-line staff was slightly higher at 53.5% (633 out of 1,240 staff) against a target ambition of 75% (up from 46.4%). Flu vaccine uptake was highest amongst Operations and Finance, Quality Nursing & Allied Professionals and People & OD directorates.

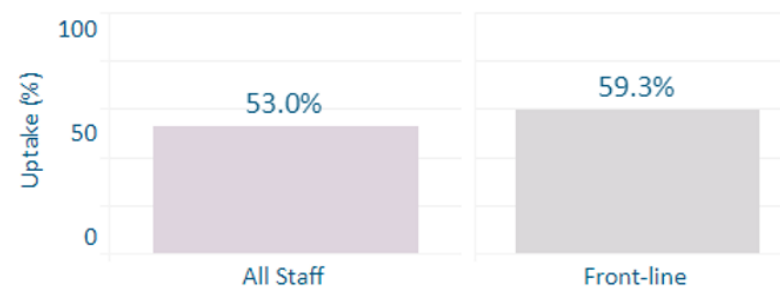
COVID-19 vaccine uptake – Around 53% of Public Health Wales staff have received COVID-19 vaccine, with uptake at 59.3% for front-line staff (up from 58.2%). COVID-19 vaccine uptake is highest amongst Quality Nursing & Allied Professionals and Health Protection & Screening Services Directorates.

Please note that the dashboard is based on staff who are employed by Public Health Wales, 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.

Influenza vaccine uptake




COVID-19 vaccine uptake



Theme 1: Maintaining a healthy and sustainable workforce

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

Statutory measures		Target	2021/22	December 2022	January 2022	February 2023	Link to PAD
	Statutory and Mandatory compliance	85%	87.1%	90.1%	90.4%	● 89.6%	
	Appraisal compliance	85%	56.9%	69.1%	72.1%	● 71.5%	

**Interactive dashboards to be developed as part of future iterative developments to the Performance & Assurance dashboard*

Statutory and Mandatory Training

Compliance with the core suite of statutory and mandatory training has slightly decreased this month but still remains above the Welsh Government target of 85%

Any e-learning queries can be directed to the ESR All Wales Support Team, in addition the People and OD are carrying out two ESR drop in sessions per month, for anyone experiencing issues accessing e-learning.

The new welsh language awareness e-learning course was introduced to all staff on 16th November, meaning current compliance has dropped to 57.43% from October's reporting compliance of 92.33% (NHS Wales Shared Services has started reporting this from March 2023).

Appraisal and Development Reviews

The 12-month rolling compliance for My Contribution appraisals is currently at 71.5% against the Welsh Government target of 85%.

Pay Progression was reintroduced in October 2022, and part of the criteria put forward for an increment is staff needing to have an appraisal date entered into ESR within the last 12 months. We have seen that this is having a positive impact on appraisal compliance figures.

Entering pay progression and appraisal dates into ESR are covered in the twice monthly ESR drop in session.

Theme 1: Maintaining a healthy and sustainable workforce

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

Staff Turnover

Staff Turnover for February 2023 was 0.81%. The rolling 12-month turnover to 28 February 2023 was 11.6%.

In addition to ESR data, we have now tested our survey data for new starters and leavers, this will allow additional data and intelligence from April 2023 which will support Directorates in decision making and monitoring trends.

Our approach to starters and leavers data will allow us to produce dashboards that will enable us to further examine and identify correlations in the data.

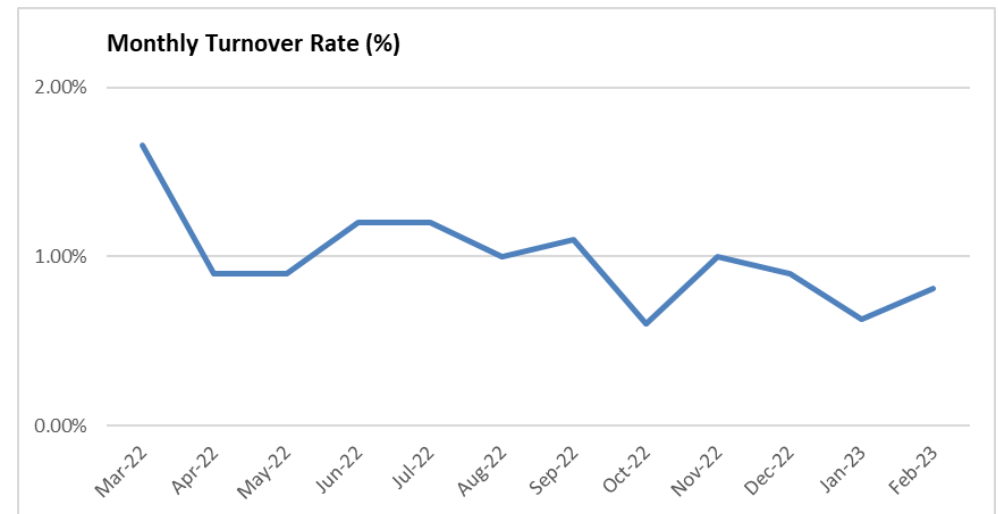
Our partnership with Arden University is also providing further analysis and data which will be available July 2023.

Staff Movements

For February 2023, there were 18 leavers and 35 new starters. In terms of internal promotions in February, there were 5 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.

Work has commenced with Dragonfish Consultancy to understand more about our current Employee Value Proposition (EVP) and our aspirational EVP. A credible EVP or our 'People Promise' will enable the organisation to build a brand which will in turn positively impact upon those who choose to join, leave and think about working with our organisation in the future.

The team at Dragonfish began the validation piece in March and will be providing outputs for consideration later this month.



Theme 1: Maintaining a healthy and sustainable workforce

Theme 1C: Supporting Equality, Diversity and Inclusion

Diversity

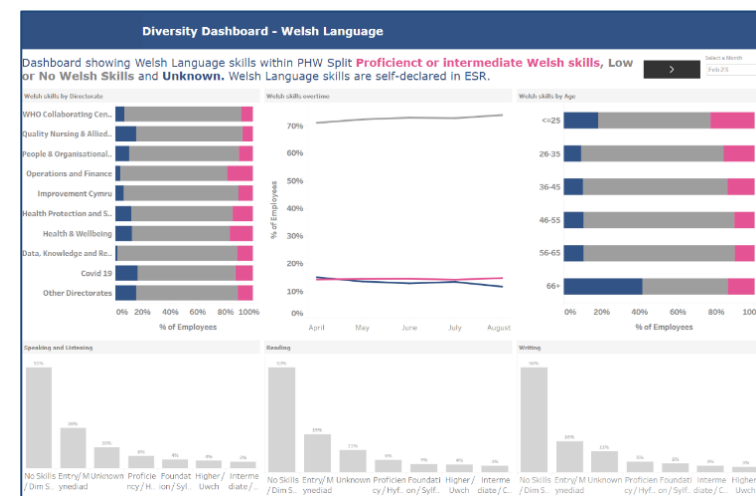
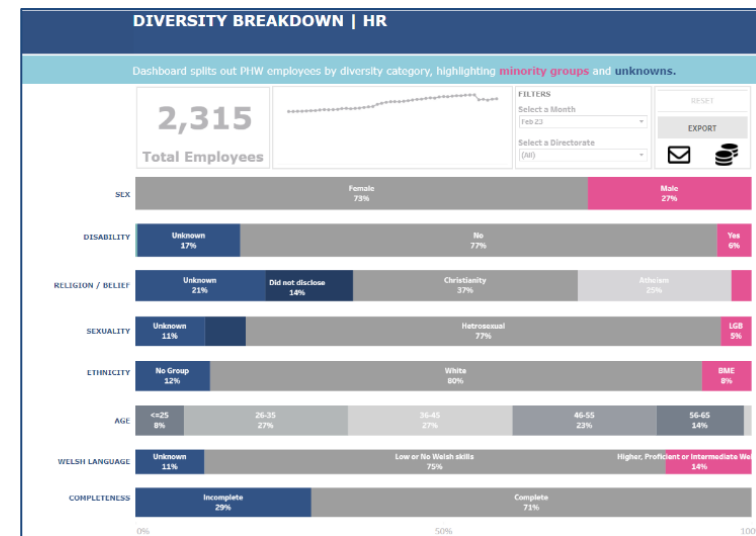
The Gender Pay Gap Report has been published and shows the mean pay gap has reduced from 16.1% in 2021 to 11.8% in 2022 which is in line with the objective set in our Strategic Equality Plan.

Following a successful recruitment process, a new Welsh Language Manager and Equality, Diversity and Inclusion Manager will be joining us in April 2023.

Welsh Language

As part of the Diversity Dashboard, we have developed further insight on Welsh Language data. The latest available data shows that 17% of our staff have recorded their Welsh Language Listening/Speaking skills at Level 2 (Foundation) or above.

Our new Welsh Language network, which is called Ymlaen launched on the 1st March. Approx 30 individuals joined the meeting and feedback has been positive. We anticipate that the network will encourage and support staff to develop their Welsh Language skills, as well as promote our cultural heritage.



Theme 2: Delivering Value and Impact

Theme 2: Delivering against our agreed budgets

Statutory measures

	Month 9	Month 10	Month 11	YTD 2022/23	Year-end forecast	Link to PAD
Revenue financial target	(£35k)	(£33k)	(£162k)	(£132k)	(£150k)	GO
Capital financial target	£6.827m	£5.679m	£5.679m	£4.126m	Breakeven	GO
Public Sector Payment Policy (PSPP)	96.13%	95.16%	95.66 %	● 96.17%	>95%	GO
Agency Spend as a % of Total Pay	3.3%	3.7%	3.4%	3.3%	3.3%	GO

Financial Summary – Month 11 2022/23

- The cumulative reported position for Public Health Wales is a net surplus of £132k (£162k deficit in month), with an anticipated year-end surplus of £150k.
- The surplus at Month 11 is a combination of variances across a number of Directorates associated with the movement against spending plans at Month 11, with the main under spend in HPSS Directorate.
- The month 11 revenue position is being supported by £15.055m of non-recurrent COVID funding as shown in the table opposite.
- Our capital funding for 2022/23 totals £5.679m with year to date spend at £4.126m. Capital funding is made up of £1.142m discretionary funding and £4.537m strategic funding. £3.104m of Strategic capital relates to Public Health Wales with the remaining £1.433m relating to our Hosted Organisation, namely The NHS Collaborative.
- Major capital schemes include Breast Screening Imaging Equipment £2.657m and The NHS Collaborative LINC System £1.356m.
- Performance for our year to date Public Sector Payment Policy remains above the statutory target at 96.17% (95.66% in month 11).
- 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 11 Position

Funding Item	Actual Apr-22 to Feb-23 £'000
Additional Operational Expenditure	
Test	13.072
Trace	0.592
Vaccination Programme	1.042
PPE	0.049
Covid Recovery App – Long Covid	0.300
Total Operational Expenditure	15.055
Funding	
Assumed Welsh Government Funding	-15.055
Total Funding	-15.055

- Since the submission of our Month 1 return, the full-year forecast for Welsh Government funding for Covid-19 has changed from £48.314m to £16.411m reflecting revised forecast costs for 2022/23.

Theme 2: Delivering Value and Impact

Theme 2: Delivering against our agreed budgets

Revenue Forecast – Month 11

- Public Health Wales' forecast year-end revenue position is a surplus of £0.150m which represents less than 0.1% of total annual budget. This is after the return of non-recurrent benefits of £2.487m to Welsh Government.
- The following Welsh Government COVID funding is anticipated within the forecast:

PHW - COVID-19 Summary	Actual Apr-22 to Feb-23 £000	Forecast Mar-23 £000	TOTAL 2022/23 £000
Additional Costs			
Test Trace Protect			
COVID-19 Laboratory Testing	11,434	896	12,330
Genomics Sequencing	764	61	825
TAT & Resilience - Non COVID-19 Rapid Testing	456	47	503
TAT & Resilience - Platform Maintenance	418	42	460
TTP Contact Tracing	592	18	610
TOTAL TTP	13,664	1,064	14,728
Other			
Vaccination Programme	1,042	288	1,330
PPE	49	4	53
Covid Recovery App – Long Covid	300	0	300
Total Gross Additional Cost	15,055	1,356	16,411

- Further information on our latest financial position can be found in the accompanying 2022/23 Finance Position report.

Capital Forecast – Month 11

Capital Category	Total YTD Apr-22 to Feb-23 £m	Forecast Mar-23 £m	Total 2022/23 £m
Discretionary	0.748	0.394	1.142
Strategic - PHW	1.946	1.158	3.104
Strategic - Hosted	1.433	-	1.433
Total	4.127	1.552	5.679

- Our current capital allocation is £5.679m pending an adjustment to reflect the transfer of the LINC and RISP programmes to DHCW on 1st January 2023 totaling £1.433m.
- Expenditure to date totals £4.127m
- Of the £1.552m remaining £1.470m of additional orders have already been placed.
- There remains a focus to achieve a break-even capital position

PSPP Forecast – Month 11

- The PSPP target has been consistently achieved for the year to date and is expected to continue to exceed the 95% target for the remainder of the year.

Agency Spend as a % of Total Pay

- Year to date agency spend as a percentage of total pay equates to 3.3% with a year-end forecast of 3.3%

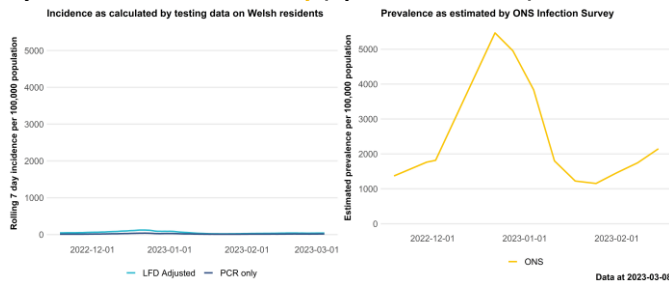
Theme 3: Organisational quality and access to high quality services

Theme 3A: COVID-19 Summary

COVID-19 high level summary

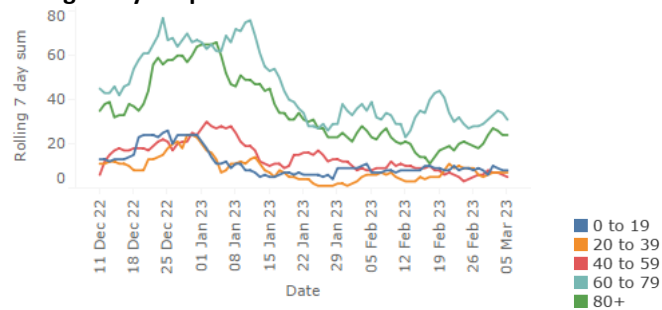
Epidemiology

Adjusted case episode rates (PCR and LFD, up to 4 March 2023), compared with cases estimated by the ONS infection survey (up to 15 Feb 2022)



- The adjusted case rates show a small increase in the most recent week

Rolling 7-day hospital admissions of COVID-19 cases in Wales, by age group, up to 1 March 2023



- A slight rise in the 80+ age groups in the past two weeks, but overall at relatively low levels

Variants: Of sequenced cases, % typed as each variant (data up to week 8, ending 26 Feb 2023)

Proportion of sequenced cases typed as each variant in the past six months in Wales

sequencing lag- interpret with caution

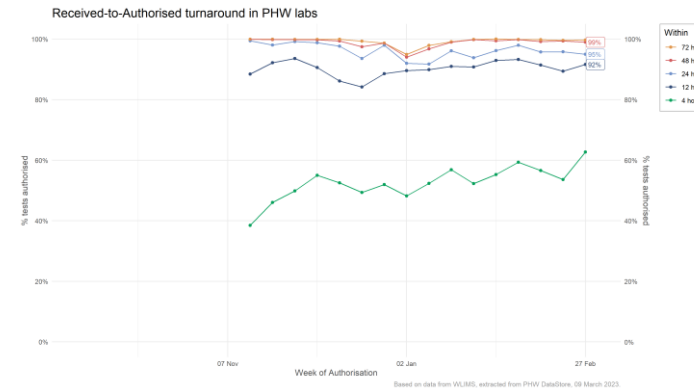
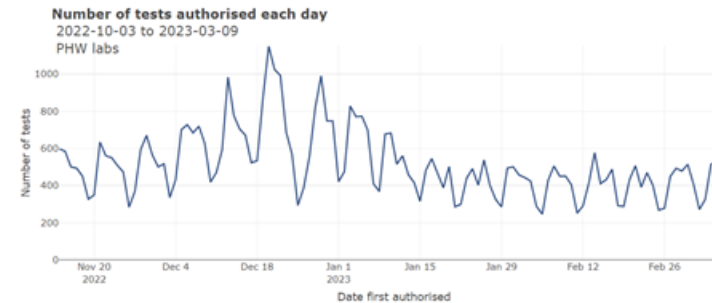
Number of COVID-19 cases

WHO classification

- Omicron (NEC)
- VOC-22JAN-01 (Omicron, BA.2)
- V-22JUL-01 (Omicron, BA.2.75)
- VOC-22APR-03 (Omicron, BA.4)
- V-22SEP-01 (Omicron, BA.4.6)
- VOC-22APR-04 (Omicron, BA.5)
- V-22OCT-01 (Omicron, BQ.1)
- V-22OCT-02 (Omicron, XBB)
- V-22DEC-01 (Omicron, CH.1.1)
- V-23JAN-01 (Omicron, XBB.1.5)

- Multiple Omicron variants are co-circulating – XBB.1.5 most frequent in the most recent week

Testing



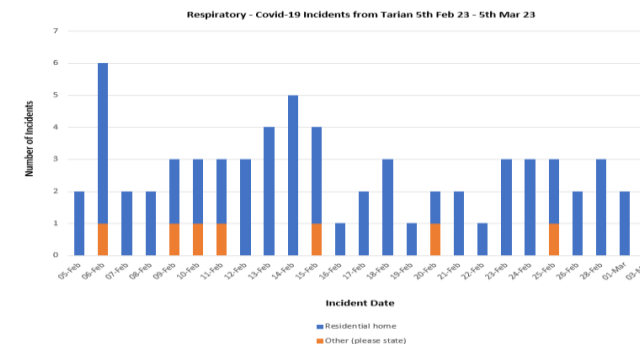
Summary

Testing numbers have been relatively consistent and driven by symptomatic requirements.

Standards for TAT % compliance:

- Over 90% for 12 hours for non-rapids achieved.
- 95% within 4 hours for rapids achieved in hot labs

Incidents and Outbreaks



COVID-19 and influenza incidents levels remain relatively stable.

Summary of significant incidents and outbreaks

- No significant COVID-19 incidents or outbreaks reported this month.

Developments

- TTP continues to support closed settings with incidents of COVID-19 with the workforce previously focused on mass contact tracing.

Theme 3: Organisational quality and access to high quality services

Theme 3B: Access to high quality services

Screening Services

Recovery plans continue to be progressed and active mitigation undertaken to maintain service provision despite issues such as postal strikes, train strikes and health care staff strikes. Snow conditions from 8-10 March 2023 meant that screening clinics had to be cancelled where local conditions were difficult.

Breast Screening has continued to implement the equipment replacement programme as planned with the remaining two mobiles to be received by end of March 2023. This is continuing to support recovery as this reduces the breakdown of old mobiles which was significant. The standard for normal results was met in February 2023 at 96.7% of results within 2 weeks and number of screening undertaken was high at 11,413. The timeliness of the reading and assessment will remain challenging and the standard was not met in February with 21.3% of participants having assessment within 3 weeks of screening. This is due to high screening activity and staff constraints, plans are in place in the South East region which will improve short and medium term. The average round length remains at about 44 months and 4.6% of participants are being screened within 36 months. Detailed round length plans are in place and there is expected to be significant improvement in the round length timeliness in next 6 months but the programme will take a long time to fully recover the round length of 3 years [estimated at April 2025 but aimed to be earlier].

Cervical Screening The timeliness of results remains good but was just below standard in February 2023 at 88.2% results being sent within expected timescales. Work continues to manage re-procurement of equipment in the laboratory and is progressing to plan. This is planned to be implemented at end of March and will impact on timeliness of results for few weeks as move to new equipment but impact is being mitigated.

The number of **Bowel Screening** kits being returned continues to be good with uptake continuing at a high level and timelines of results is excellent. The coverage of the programme is 65% at the latest report in February. The programme implemented GP endorsed invitation for those GP practices that opted in (78%) in March which is expected to reduce inequity of uptake and increase uptake. The optimisation of the programme with the invitation of 55, 56 and 57 is going well. Waiting times for the Specialist Screening Practitioner assessment is within standard for five of the seven health boards (range 3-33 days) and colonoscopy component of the pathway is under active review and the range is 4-15 weeks (discussion ongoing with HBs). Colonoscopy timeliness standard is not being met with 23.7% of colonoscopy within 4 weeks across Wales.

Antenatal Screening continue to be in close contact with maternity services to support around guidance on flexibility in the pathway where possible due to their staffing constraints.

Newborn Hearing Screening - The timeliness of newborn babies completing the screening programme is met at 97.4% and the timeliness of newborn babies who need assessment is just below standard at 82.6%. The IT systems that ensures failsafe for the programme needs upgrading and is down for periods of time which is impacting workflows and this has been escalated and timescales for resolution discussed.

Newborn Bloodspot Screening coverage has been maintained and above standard at 95.6% and avoidable repeat rate remains low, although just above standard at 3.3%. The programme has worked to put in place an alternative delivery method to mitigate risk of a delay in identifying a newborn baby with a clinically significant condition due to planned Royal Mail strikes. This has improved timeliness of card receipt at the laboratory and being explored to be extended due to continued risk of postal strikes.

Diabetic Eye Screening remains the most challenging programme to recover the 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 coverage remains significantly lower than the standard at 31.1%. The programme is using a mobile to provide services in areas that are difficult to identify venues to improve timeliness in those areas which is progressing well. The programme is taking forward the transformation work plan. Plans are progressing well with the new screening site in Cardiff which will support recovery [implementation from May 2023]. The timeliness of the results letters is 87.9% within 3 weeks of screen.

Wales Abdominal Aortic Aneurysm screening - The programme undertook a high number of screens in February, 1,925, and has fully recovered the programme by end of March 2023 as planned. The programme has focused work to reduce backlog with additional clinics in specific areas. Plans are progressing well with the new screening site in Cardiff [implementation from May 2023]. Surveillance uptake is nearly within standard for small aneurysms at 89.8% and within standard for medium aneurysms at 91.5%.

Theme 3: Organisational quality and access to high quality services

Theme 3B: Access to high quality services

Healthcare Associated Infections (Health Board/Trust targets)

Latest all-Wales HCAI figures continue to be reported to Welsh Government and our NHS Wales partners in a timely manner. Latest data shows a varied picture across all-Wales rates in 2022/23 with trends continuing to be monitored closely.

All mandated HCAI indicators have seen general increases in rates during the latest quarter, with the exception of *Klebsiella* sp bacteraemia which has seen rates improve from 26.87 to 20.56 per 100,000 since November 2022. With the exception of *E. Coli* bacteraemia, all mandated all-Wales HCAI indicators continue to fall outside respective national reduction expectation targets in February 2023, and all Health Boards/Trusts continue to experience challenges in achieving agreed targets for 2022/23.

Latest surveillance figures reported by Health Boards/Trusts in Wales showed that:

- 1,059 *C. difficile* have been reported since April 2022, approximately 5% more than the equivalent period in 2021/22.
- 801 *Staph Aureus* bacteraemia have been reported since April 2022, approximately 5% more than the equivalent period in 2021/22.
- 1,945 *E. Coli* bacteraemia have been reported since April 2022, approximately 2% fewer than the equivalent period in 2021/22.

- 640 *Klebsiella* sp bacteraemia (includes *E. aerogenes* bacteraemia from April 2019 onwards) have been reported since April 2022, approximately 14% more than the equivalent period in 2021/22.
- 178 *P. aeruginosa* bacteraemia have been reported since April 2022, approximately 1% more than the equivalent period in 2021/22.

The HCAI and AMR Programme (HARP) continues to provide COVID-19 and non COVID-19 related advice and support to partners including Welsh Government and NHS Wales organisations. This includes the production of monthly [HCAI/AMR surveillance data](#) including Health Board/Trust progress against achieving respective [reduction expectation targets](#).

Theme 3: Organisational quality and access to high quality services

Theme 3B: Access to high quality services

Vaccination and Immunisation

Childhood Immunisation

Surveillance of uptake and equality of routine childhood vaccinations in Wales is carried out by Public Health Wales Vaccine Preventable Disease Programme through the national [COVER scheme](#) in Wales (Coverage of Vaccination Evaluation Rapidly). The summary below captures progress made against mandated indicators set out within the NHS Wales Performance Framework.

Latest data reported in the [COVER 145 report](#) (October to December 2022) shows that for children at one year of age, uptake of the “6 in 1” vaccination remained slightly below the 95% target at 94.6%, compared to 94.7% last quarter. Uptake ranged by Health Board from 93.3% (Cardiff and Vale UHB) to 97.1% (Cwm Taf Morgannwg UHB), and by Local Authority from 91.8% (Torfaen) to 98.4% (Bridgend). Three of the seven Health Boards and 12 of the 22 Local Authority areas achieved the target 95% uptake.

In children reaching five years of age this quarter, coverage of two doses of MMR was 90.2%. Coverage of two doses of MMR ranged by Health Board from 87.7% (Powys tHB) to 92.3% (Betsi Cadwaladr Morgannwg UHB), and by Local Authority from 86.1% (Ceredigion) to 94.8% (Caerphilly).

As part of the response to the ongoing Vaccine Derived Polio Virus Type 2 (VPDV2) incident in London, the Wales Incident Management Team supported a catchup of missed immunisations for under 5s. This included work to ensure that the child health system was up to date with vaccines delivered in primary care, and also to encourage the call/recall of under vaccinated children across Wales. We have undertaken surveillance on the delivery of catch-up vaccines as part of this programme. This work should impact on the ‘6 in 1’ at 1 year indicator. The number of children who would need to be vaccinated as part of this catch-up in order to return this above 95% is small.

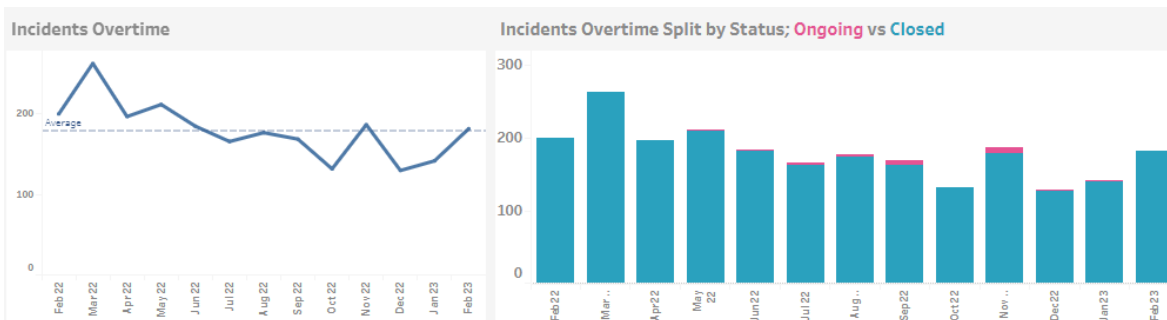
Influenza surveillance

[Influenza and acute respiratory infection](#) surveillance information continues to be reported on a weekly basis with [week 10 2023 reporting](#) influenza as continuing to be confirmed in Wales, although overall activity has decreased.

As at 8 March 2023, latest data shows that for those aged 65 years and older, 77.9% were vaccinated. Latest influenza vaccine uptake for clinical risk groups was 48.1%. Uptake for NHS Wales staff (54.8%) and front-line staff (56.0%) saw modest increases over the latest reporting period.

Quality and Improvement

Incidents



A total of 181 incidents were reported in February 2023, an increase of 40 compared to the 141 reported in January 2023. It should be noted that of the February incidents, 59 related to Cervical Screening Wales (CSW) incidents which are not directly attributable to Public Health Wales direct services but those that are commissioned. These incidents are reported by CSW staff, and relate to smear sample anomalies taken by community providers (error non-incidents). As a result of the level of sustained reporting of these anomalies, improvement work continues to reduce the number and improve the ongoing management of these. If these were excluded, then a total of 122 incidents were reported in February which relate directly to Public Health Wales services.

Cervical Screening Wales (Error non-incidents) breakdown:

- Highest Incident Type: Assessment, Investigation, Diagnosis (58)
- Highest sub categories: Specimen mislabeled or unlabeled (19), No sample taker code on sample form (16)
- In January 2023, the Quality team from Quality Nursing and Allied Health Professionals Directorate (QNAHPs) began working collaboratively with Cervical Screening Wales (CSW) to undertake a review of sample taker errors, the intention being to identify areas for improvement, specifically where we can strengthen sample taker training as part of our contractual agreements between CSW and the Long Term Agreements (LTA's) with health boards.

- As part of this exercise, the Quality team set up a Quality Working Group comprising of Quality Leads in CSW, the Quality Team, and Putting Things Right (PTR) Managers, to review both current and retrospective sample taker errors to identify incidents where reporters have selected 'other' in the incident coding sub sub-types. Identifying more accurate incident types serves to improve data quality, which better informs the themes and trends analysis. The CSW Quality Working Group currently meet on a bi-weekly basis and this work remains on-going to reduce this type of incident.
- In addition, further analysis of the use of the code 'other' is also undertaken by PTR Managers as part of the initial review process for all newly reported incidents, and further information sought from reporters and quality leads, to help improve the internal training offer to reduce the use of this code.

Overall Incidents Breakdown

Of the total number of incidents reported in February, 96% were within the Health Protection and Screening Directorate. The remaining incidents were reported in Health & Wellbeing (1), Improvement Cymru (1) and QNAHP's (5).

Incident Themes

Most of the incidents in this month's Integrated Performance Report (IPR) relate to submissions received from Cervical Screening Wales (38%), Microbiology (30%) and Diabetic Eye Screening services (13%). There were no moderate or severe harm incidents reported this month. The highest incidents by type recorded in Datix for February 2023 for Microbiology and Diabetic Eye Screening were as follows:

Assessment, Investigation, Diagnosis – 38 Incidents

- Microbiology (34) DESW (4)
- Harm Levels – None (20) Low (18)
- Some examples of incidents reported in this category include delays in processing or testing samples, laboratory technical errors and incorrect results reported.

Quality and Improvement

Incident Themes (cont'd)

Infrastructure (Including Staff, Facilities and Environment) – 7 Incidents

- Microbiology (4) DESW (3)
- Harm Levels – None (7)
- Some examples of incidents reported in this category include building maintenance and restricted access to buildings.

Equipment, Devices – 6 Incidents

- Microbiology (3) DESW (3)
- Harm Levels – None (6)
- The incidents reported under this category relate to failure of equipment or failure of medical devices. It should be noted that there has not been any service user harm reported as a result of these failures.

Retrospective January 2023 Incident Performance Review

The Public Health Wales (PHW) investigation and closure target for incidents is set at 30 working days. As such, the incidents reported in this reporting period (February 2023) are still within an acceptable closure timeframe and currently remain with an open status.

During January 2023, 51% (71) of incidents were closed within the 30-day target period, this figure remains unchanged from 51% closed within 30 days in December 2022. 7% (10) of incidents were closed outside of the 30-day target with a closing date range from 31-35 days. The number of incidents closed outside of the 30-day target decreased in January compared with 17 in December. The main reasons for the 10 incidents exceeding the target closure time were delays in the investigation taking place and delays in the incidents being approved for closure by Incident Managers/Divisional Leads.

The PTR team now provide weekly open incident summaries, detailing all incident statuses (management review/under investigation/awaiting closure) to individual teams to raise awareness of the current positions of their incidents and facilitate progression.

42% (58) of the current incidents have an overdue status and remain open. 25 out of 58 incidents have had the investigation completed and have a status of 'Awaiting Closure'. Of the remaining 33 incidents, 4 remain open with a 'Management Review' status indicating an investigation has not yet commenced and a further 29 remain with an 'Under Investigation' status indicating in progress.

A report of all open overdue incidents is run weekly by the PTR Team and shared with the Datix Super Users for each area with overdue incidents to make them aware of their numbers and request that these are completed and closed. The PTR Managers also continue to work closely with teams across the organisation to flag overdue incidents and identify and ensure clear processes are in place to support and improve incident management.

Current Incident Numbers Status

As of the 7 March 2023, there are a total of 141 incidents that have an open status for more than 30 days in the Datix incident management system. This figure relates to all incidents that have been reported more than 30 days ago with the oldest incident remaining open reported dated back to April 2022. This incident is a Health Protection incident which relates to a data breach regarding missing records in the Temple of Peace site. This investigation has been complex and is nearing completion with an Information Governance report being finalised and Business Executive Team due to approve the post investigation action plan.

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

Quality and Improvement

Nationally Reportable Incidents

There were no Nationally Reportable Incidents reported in February 2023.

No Surprises Incidents

There was **one** No Surprises Incidents reported in February 2023 related to Health Protection service and a high-profile case.

- 1. Datix Reference: 1820 (HPSS – Health Potection)

This incident relates to a cluster of active Tuberculosis (TB) in the Llwynhendy area of Carmarthenshire dating back to 2010.

In 2019, a rapid internal review was carried out by Public Health Wales which advocated the need to commission an external joint review with Hywel Dda UHB. The purpose of this external review was to conduct an independent review of the TB outbreak and its management, to identify any learning and inform the ongoing and future management of TB disease in Wales. The external review was published on January 26 2023.

The report made a number of recommendations, which were accepted in full by both Public Health Wales and Hywel Dda UHB. Both organisations have subsequently published action plans to address the recommendations, which will be respectively reported through the Quality, Safety and Improvement Committee in Public Health Wales and the Quality, Safety & Experience Committee in Hywel Dda UHB.

Complaints

Formal Complaints



Informal Complaints



The latest figures for February 2023 show that **four formal complaints** were received, all four related to Health Protection and Screening Services.

One complaint related to Cervical Screening Wales and related to an expression of dissatisfaction with the Welsh Language sentence that is required to be included in all screening invitation letters. As a result of this complaint and similar ones previously received, the People & Organisational Development are reviewing the wording of this sentence and a revised proposal being considered for organisational roll out.

One complaint related to Diabetic Eye Screening Wales and related to dissatisfaction with parking facilities at a screening venue which led to the service user arriving late for their appointment and not been seen . This complaint is currently under investigation. The remaining two complaints were Bowel Screening Wales and were in in relation to the cessation age of the offering screening at age of 74. These complaints are currently under investigation. All four complaints were acknowledged within the 2-working day timescale and are now progressing through the formal complaint process.

The figures for February 2023 also show that a total of 14 informal complaints were received. These complaints were received in the following areas:

Quality and Improvement

Complaints (cont'd)

- Diabetic Eye Screening Wales – 4
- Breast Test Wales – 3
- Cervical Screening Wales – 2
- Abdominal Aortic Aneurysm Screening Wales – 2
- Health Improvement (Tobacco Control) – 1
- Health Protection (Sexual Health) – 1
- Communications – 1

71% (10) informal complaints were resolved locally within the 48-hour target. 29% (4) were resolved outside of the 48-hour target as a result of being unable to make contact with the complainants during this time period.

Retrospective January Complaint Performance Review

There were two formal complaints received in January 2023. One complaint related to Health Protection (Sexual Health) regarding difficulty with accessing and completing the online Frisky Wales ordering form. The investigator concluded that this complaint was not upheld as the feature to have to re-enter service user information is a security feature to minimise incorrect details being entered and this was included in our response to the complainant. All required timeframes for dealing with this request were achieved.

The other complaint related to Diabetic Eye Screening Wales and related to the location and facilities of the screening venue. The investigator concluded that this complaint was upheld and DESW are actively working with the Estates team at the local health board who own the venue to explore a longer term solution to address the concerns raised.

The acknowledgement letter for this complaint was not sent within the two working day time frame due to a delay in the complaint being entered on to the Datix system. The response for this complaint is not yet due as it was received on 31 January 2023. This complaint is currently progressing through the Quality Assurance process and is on track to meet the 30-working day timeframe.

Compliments

During the month of February 2023, there were 45 compliments uploaded into the Civica system by PHW staff. 95% of compliments reported were provided by members of the public (service user) with the remaining percentage spread across Public Health Wales staff and Stakeholders. Currently all compliments received have to be entered into the Civica system and the direct submission by service users is not possible at present but this functionality is being explored.

62% of compliments (28) were themed as 'beyond the level of care expected or anticipated'. Other compliment themes included communication (6%), feeling understood (2%), dignity and respect (2%), Going the extra mile (2%) and 'other' (20%). The selection of the 'other' theme option is currently being explored with further work to understand and expand available on the available options to choose to identify further themes. This work will start in April 2023. The ratio of compliments to complaints for February 2023 is 11:1.

Claims

There were no new Claims received in February 2023. One Breast Test Wales potential claim was closed during February 2023 due to no further contact from the Claimant Solicitor. Currently, there are 17 confirmed claims open and two potential claims. 95% of these claims relate to Health Protection and Screening Services (16) the remaining 5% relate to the WHO Collaboration Centre.

Redress

There were no new Redress cases opened in February 2023. There are two ongoing Redress cases. One of which is in Breast Test Wales and is relating to a delay in receiving results following Breast Screening. The other Redress case is in Health Protection and relates to the outcome of the Llwynhendy external Investigation Report. The Redress case relates to a complaint about the length of time it took the TB screening process in Llwynhendy case. A review is underway of their management as part of the outbreak incident. Both Redress cases are currently under investigation and the Claims Manager is supporting Breast Test Wales and Health Protection with these investigations.

Risk Management

The Strategic Risk Register and the Corporate Risk Register are being continually updated to determine the risk scores, controls, and actions.

Strategic Risk 1 - There is a risk that Public Health Wales will not be sufficiently focused, agile and responsive in discharging our functions	Following the revisions to the Long Term Strategy, the Executive Sponsor is confident that the current and emerging threats have been considered and incorporated into the Long Term Strategy. The risk continues to be monitored and tolerated and we remain alert to any new emerging threats.
Strategic Risk 2 - There is a risk that Public Health Wales will not deliver its plans for delivering excellent services for population screening, health protection and infection	The delivery confidence assessment remains green with the delivery of excellent services continuing to be an overarching priority. A number of the actions that were previously delayed were completed in February and as such the risk assessment has been reviewed and remains green.
Strategic Risk 3 - There is a risk that we will not manage organisational change well	Progress continues to be made within the action due dates. A key element to note is the number of interdependencies with other functional areas and the progress made demonstrates that these are operating smoothly in pursuit of the actions. The organisation can take assurance that the risk is being appropriately managed.

The Strategic Risk Register is currently displaying six risks, which have approved risk appetites and delivery confidence assessments. During the reporting period, risk 302 was closed and risk 303 has been accepted onto the Register.

Strategic Risk 4 - There is a risk that we are unable to attract and retain the required professional workforce	Many of the actions to address this risk are expected to be completed by the end of the financial year, which should result in a significant improvement to the risk status. Two actions remain overdue from their original delivery date.
Strategic Risk 5 - There is a risk that we will fail to exploit data to inform and direct public health action and interventions	The current risk score remains the same with progress continuing across all actions and significant progress across the discovery and alpha phases. All programmes remain on track for reporting findings in April 2023.
Strategic Risk 6 - There is a risk that PHW 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	Risk score has increased, following agreement by Audit Committee, with progress continuing across all actions.

Risk Management

The **Corporate Risk Register** is currently displaying six risks with updates as follows;

Corporate Risk 203 - DESW is unable to provide an accurate and quality-assured programme to the diabetic population of Wales, and to transform the service to provide quality-assured programme for the increasing diabetic population.	The risk remains the same with only one action identified. A number of significant changes are planned including an IT upgrade, outsourcing of letter printing and funding for specialist expertise which is likely to have a positive impact on the status of the risk.	Corporate Risk 301 - There is a risk that we will not deliver our IMTP due to challenges involved in securing resources at the right time, at the right cost, with the right skills	Our Employee Value Propositions project is also being delivered to plan, with high levels of engagement from key stakeholders. Directorates will now work on Workforce planning returns so that we can develop robust interventions to support attraction, retention and development.
Corporate Risk 207 - There is a risk that Public Health Wales will fail to meet the requirements of The Health and Social Care (Quality and Engagement) (Wales) Act (2020)	Monthly preparedness highlight reports are being provided to the all Wales Duty of Quality and Candour Implementation Board, showing everything is currently on track for Public Health Wales. Quality as an Organisational Strategy implementation is in progress. The Clinical Governance Framework under development, following a further workshop in March, is due to be presented at QSIC in July 2023. Once approved, this should provide an additional control which can form part of the assurance arrangements for Duty of Quality and Candour.	Corporate Risk 208 - There is a risk that Health Protection and Screening Services will not be able to deliver high quality services in North Wales Infection division as they are struggling to recruit and retain sufficient medical and clinical staff	The Progress is being made against actions, with BET receiving a paper in February 2023 providing recommendations planned for addressing staffing challenges in the North Wales Infection division.
Corporate Risk 206 - Risk that individual and team performance and development is not aligned with the organisation's strategic and operational priorities	The action to carry out a quality audit of appraisals has commenced during the reporting period.	Corporate Risk 303 - There is a risk that the LINC process will not allow us to develop a product that meets our needs and is an improvement on the system currently in place. There is also a chance that the LINC programme will not be able to deliver and a Plan B will need to be put in place. This is a risk for both screening and microbiology.	This risk was recently added to the register and the escalation form approved by BET in February.


Strategic Plan – Month 11 Summary

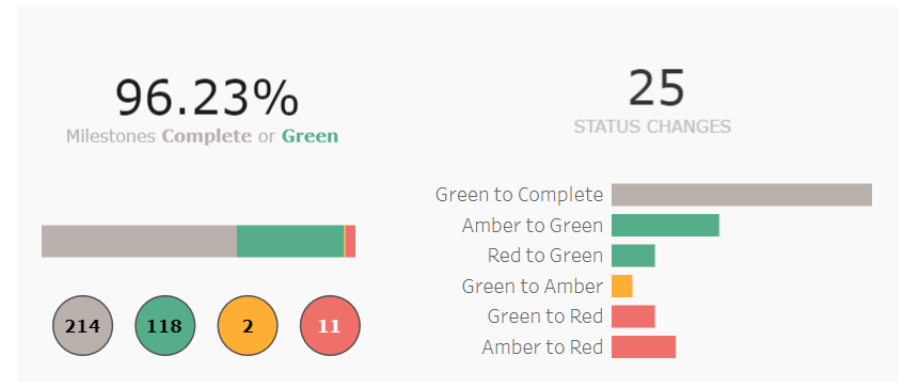
We have seen a gradual move to the right in milestone delivery dates over the course of the year, with an average of 9 RFCs for date changes each month. There are an additional 38 milestones now due in March 2023, compared to the original plan, and a further 17 milestones moved into 2023/24 plan.

During February 2023, 10 milestones were completed, making a total of 214 milestones so far this year (62.03%). In addition, we are reporting 34.49% (119) milestones on track and 3.19% (11) rated red and behind schedule. With only one month left in the year, there are still 131 live milestones yet to be completed, which is 38.97% of all milestones. Whilst most of these milestones are rated green (87.9%) we must monitor these closely, since previous months data shows us that a green milestone has 33% chance of changing directly to red.

Five requests for change are submitted for approval in month 11.

Four requests for date change are asking for milestones to rollover into 2023/24 plan. A request was received asking for a scope change to a milestone relating to Training packages to support the duty of quality guidance for Welsh Government. The roadmap for this work has been revised and two of the four educational products will now be delivered in Q2 2023/24.

Further information on progress against delivering our milestones within our Strategic Plan can be viewed here 



Milestone overview by Directorate

	G	A	R	C
Data, Knowledge and Research	7			26
Health & Wellbeing	35			26
Health Protection and Screening Services	23	1	1	54
Improvement Cymru	15	1	1	12
Operations and Finance	8		6	35
People & Organisational Development	4		2	16
Quality Nursing & Allied Health Professionals	9			21
WHO Collaborating Centre	17		1	24