

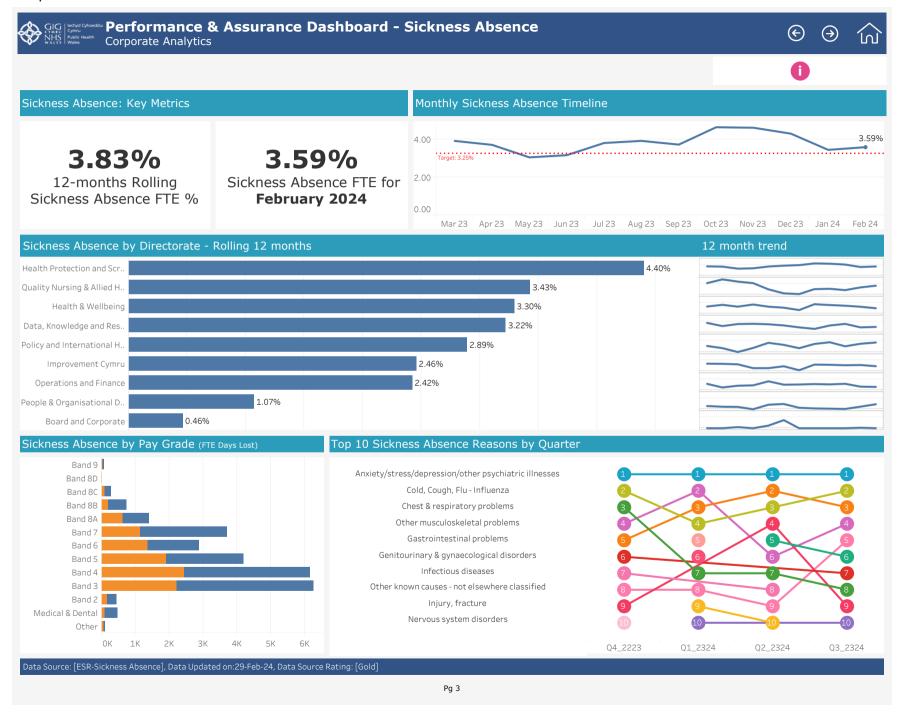
Performance and Assurance Dashboard

February 2024



Governance and Accountability

People Governance



▼ MoM

Performance & Assurance Dashboard | Workforce Profile







WORKFORCE OVERVIEW |





1,901

▲ YoY

▼ MoM

71%

90%

REPORT DATE 2/29/2024

FILTERS

MEASURE SELECTED Headcount

COLOUR BAR CHARTS BY None

RESET EXPORT PDF

HEADCOUNT BY HIERARCHY

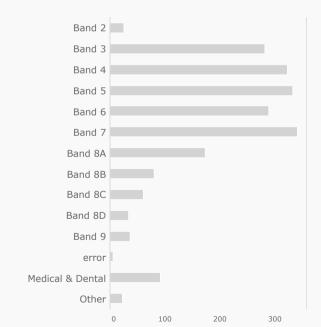
FULLTIME or **PERMANENT** members of staff Filters:

▲ YoY



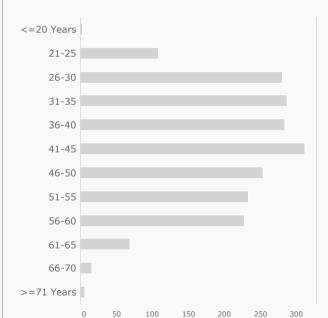






HEADCOUNT BY AGE BAND

FULLTIME or **PERMANENT** members of staff Filters:



Data Source: [ESR-Workforce Profile], Data Updated on:29-Feb-24, Data Source Rating: [Gold]

Performance & Assurance Dashboard | Staff Turnover







Overview |

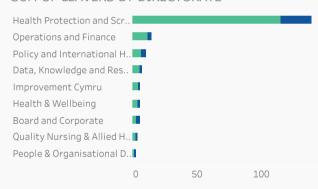


9.5%

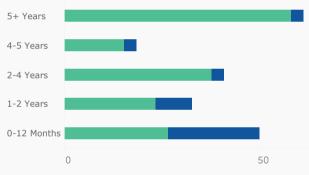
0.8%



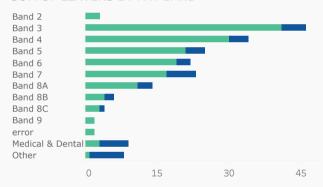
SUM OF LEAVERS BY DIRECTORATE



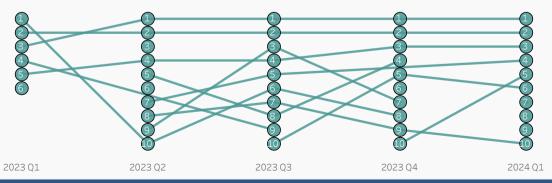
SUM OF LEAVERS BY LENGTH OF SERVICE



SUM OF LEAVERS BY PAY BAND



TOP 10 LEAVING REASONS BY QUARTER



Latest Quarter to selected Report Date

Other/Not Known
Promotion
Relocation
Health
Other
Retirement Age
Adult Dependants
Child Dependants
III Health
no Actuarial Reduction

Data Source: [ESR-Workforce Profile], Data Updated on:29-Feb-24, Data Source Rating: [Gold]



Performance & Assurance Dashboard - Appraisals Corporate Analytics







OVERVIEW |

(i

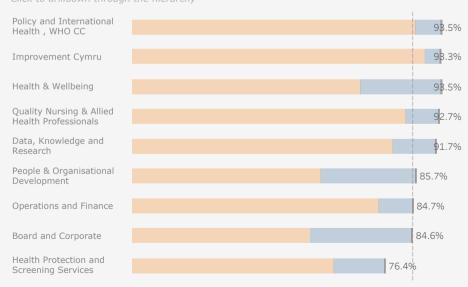
81.5%

of reviews completed within 12 months vs a target of 85%

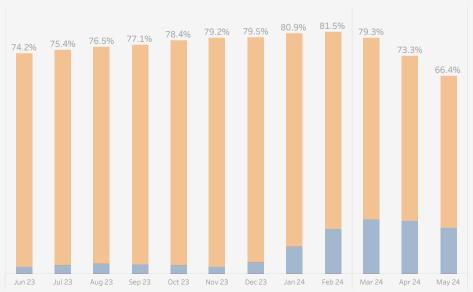


REVIEW STATUS % BY DIRECTORATE

Status: In date | Due in next 3 months | No recorded appraisal | Out of date Click to drilldown through the hierarchy







Data Source: [ESR-My Contribution-Appraisals, Data Updated on:29-Feb-24, Data Source Rating: [Gold]



GIG | Middyd Cyfroedda: Performance & Assurance Dashboard - Statutory & Mandatory Training Corporate Analytics







STATUTORY & MANDATORY TRAINING OVERVIEW |



91.2% Core Compliance

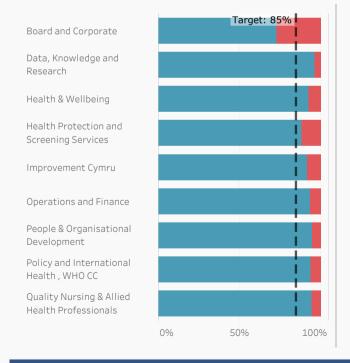
89.9% **Extended Compliance**

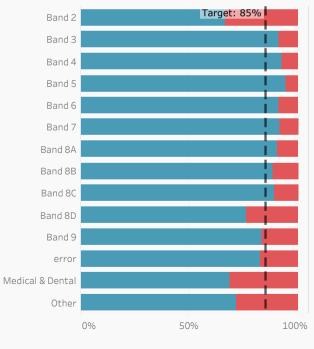
2,074 staff out of Compliance

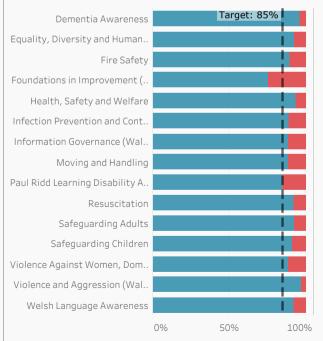


COMPLIANCE % BY HIERARCHY **COMPLIANT** or **NON COMPLIANT** members of staff COMPLIANCE % BY PAY GRADE **COMPLIANT** or **NON COMPLIANT** members of staff Filters:

COMPLIANCE % BY COMPETENCE **COMPLIANT** or **NON COMPLIANT** members of staff







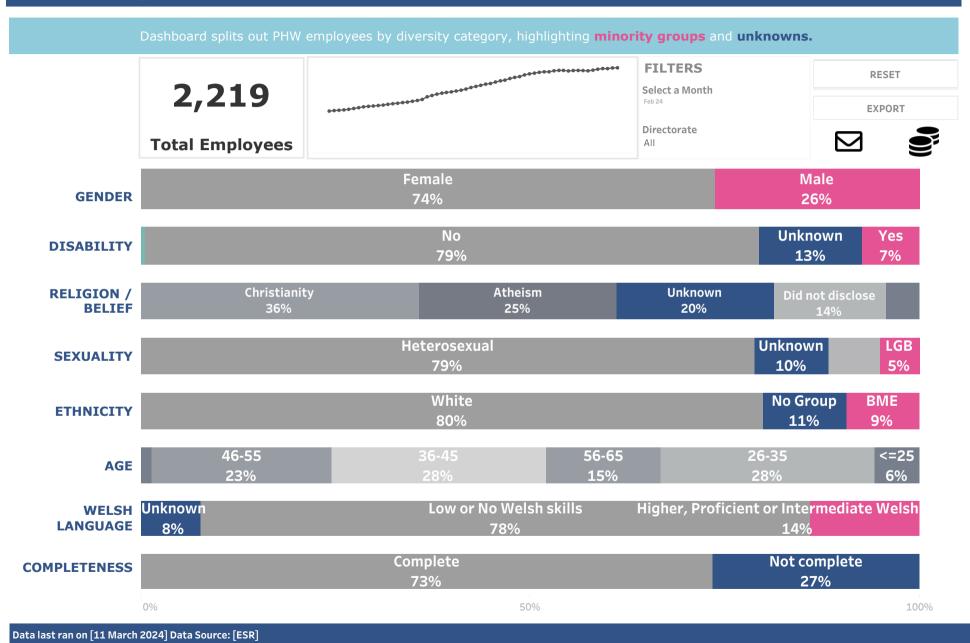
Data Source: [ESR-Stat & Mand Training], Data Updated on:29-Feb-24, Data Source Rating: [Gold]

DIVERSITY BREAKDOWN | HR

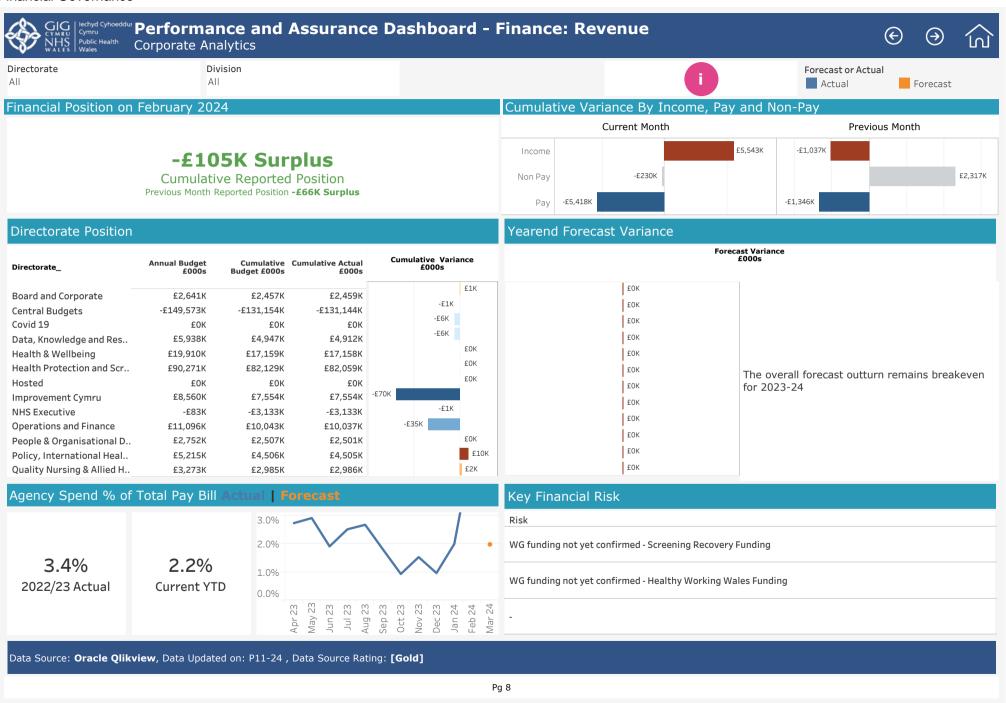








Financial Governance









Amount Type

Actual Estimate

i

Capital Allocation

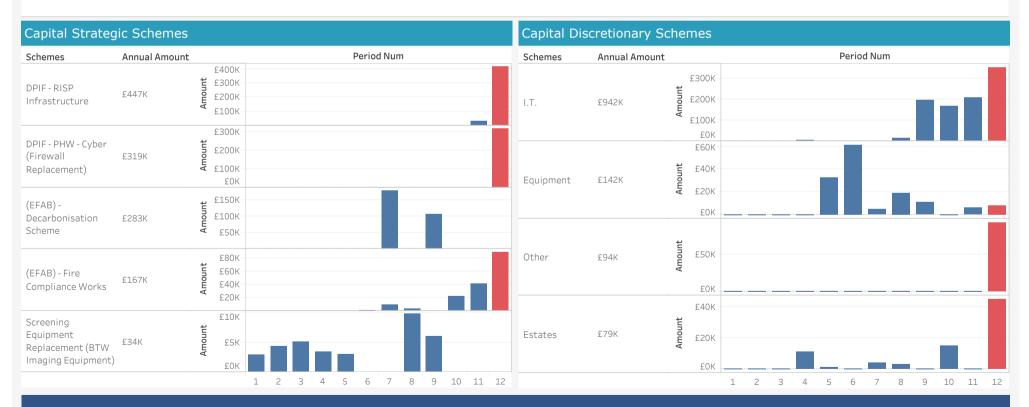
£1,250K Strategic Allocation

YTD Spend: £427K

£1,257K

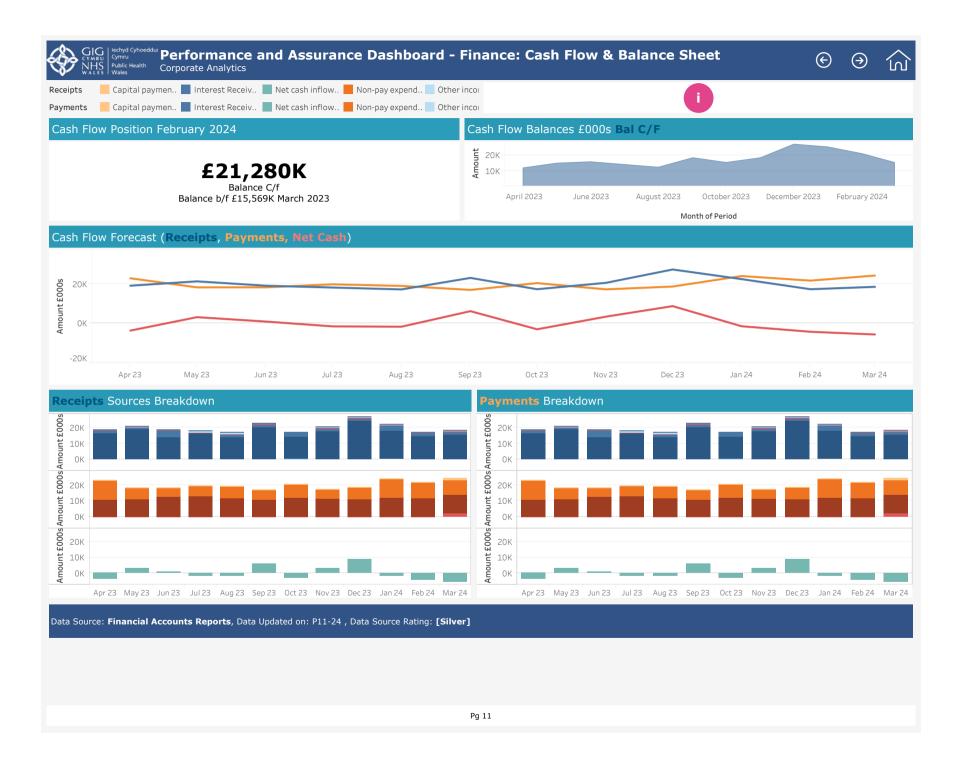
Discretionary Allocation

YTD Spend: £759K



Data Source: Excel Spreadsheet, Data Updated on: P11-24, Data Source Rating: [Silver]

Pg 10

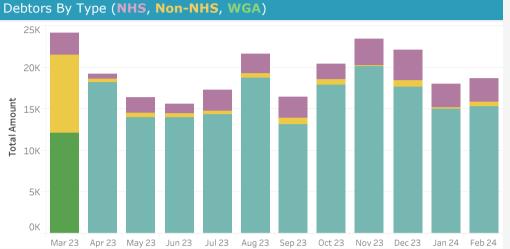


| Corporate Analytics | Performance and Assurance Dashboard - Finance: SOFP and Balance Sheet | Corporate Analytics | Corporate Analytics | Corporate Analytics | Open Corporate Analyt

Debtors

_	
- /	
1	

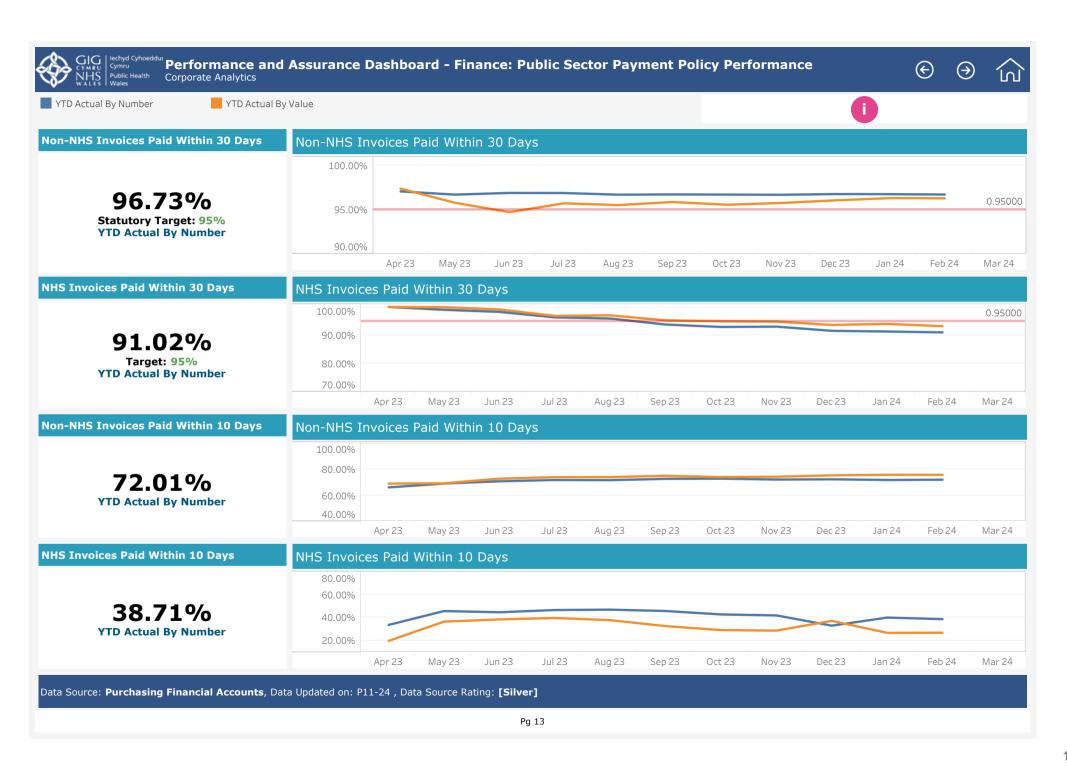
Statement of Financial Position (Balance Sheet) Opening Movement Closing Sub-Category Type Balance £00.. £000s Balance £00.. Non-Current Assets Trade and other receivables 3.347 3.347 Property, plant and equipment 33.762 31.968 33,762 Intangible assets 869 561 869 Non-Current Assets Sub total 37,978 32,529 37,978 Current Assets 2.164 1.910 2.164 Inventories Trade and other receivables 20,850 38.804 20,850 Cash and cash equivalents 15.569 21.280 15,569 Assets Sub total 38,583 61,994 38,583 Total Assets Total Assets 76,561 94,523 76,561 Total Assets Less Current Total Assets Less Current 41,179 39,656 41,179 Liabilities Liabilities Total Assets Employed Total Assets Employed 29,740 30,406 29.740 Taxpayer's Equity PDC 24,965 24,965 24,965 4,275 Retained earnings 3,915 3,915 1,166 860 Revaluation reserve 860 Total Taxpayer'S Equity Total Taxpayer'S Equity 29,740 30,406 29,740

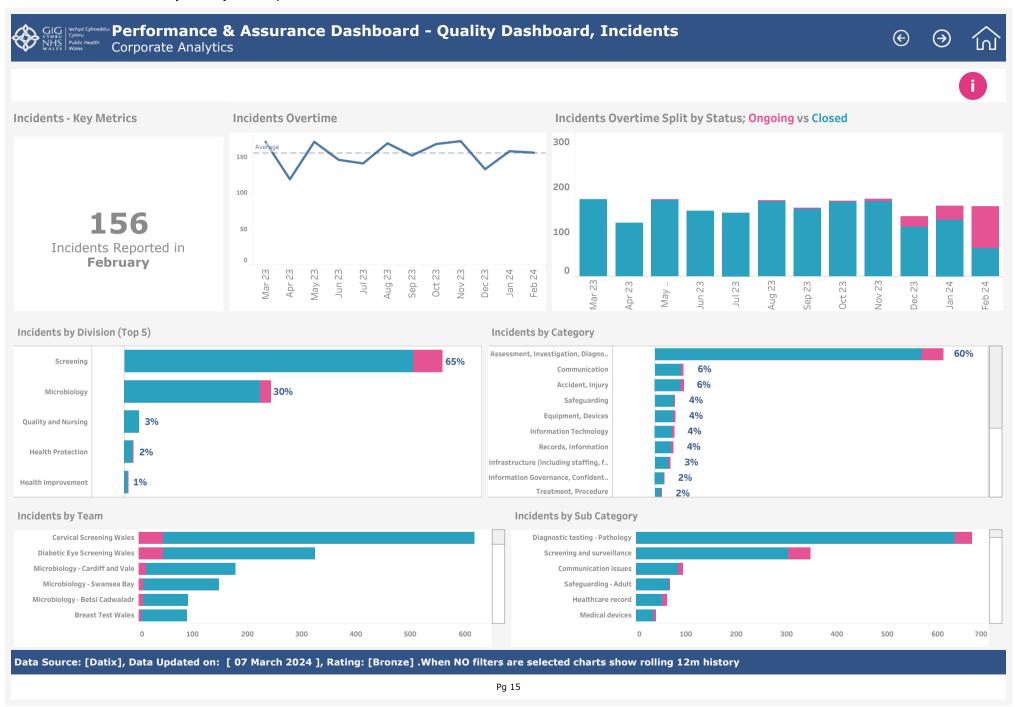


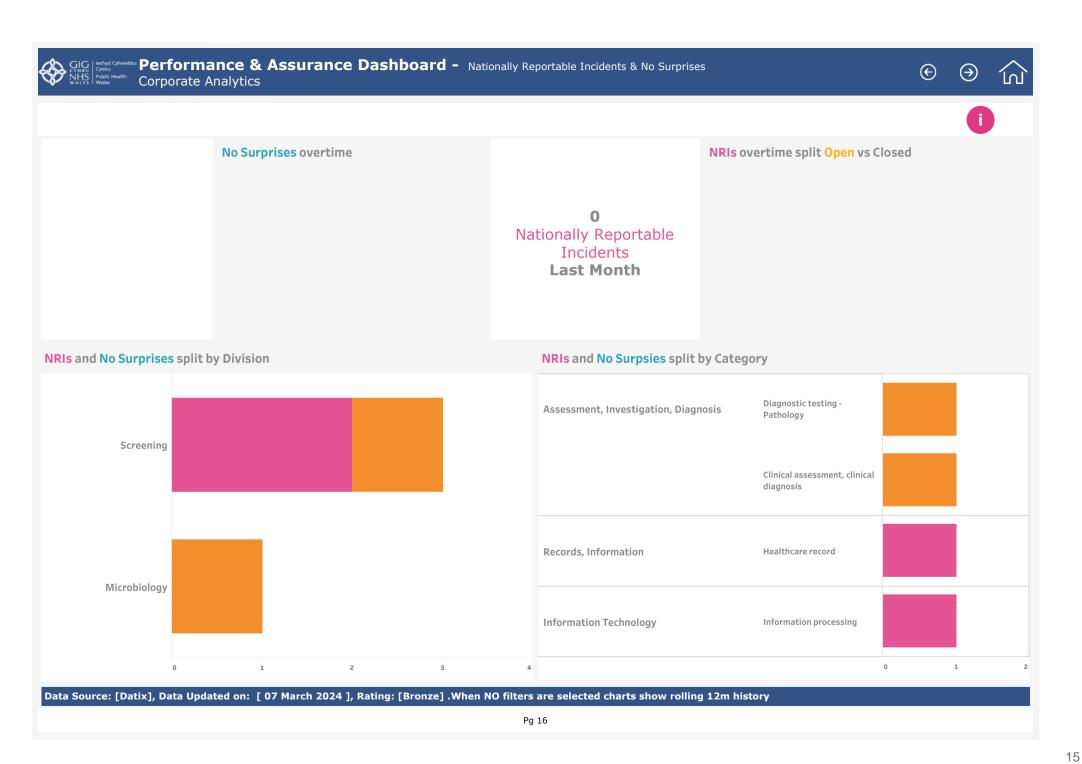


Data Source: Financial Accounts Reports, Data Updated on: P11-24, Data Source Rating: [Silver]

Pg 12







GIG Nettyd Gynoddo Performance & Assurance Dashboard - Quality Dashboard, Claims & Redress NHS NAME NAME Corporate Analytics







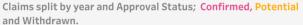
Claims and Redress - Key Metrics



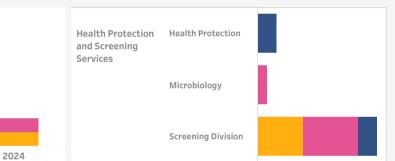
Potential Claims Of which, **0** were raised in February 2024

Claims by Location and Type Confirmed, Withdrawn/Rejected and

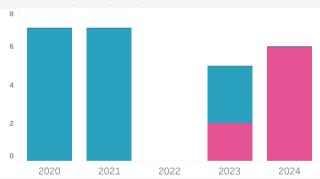
1 Redress Cases Redress Cases Closed Received in February 2024 in February 2024







Total Redress by Year split Open Closed



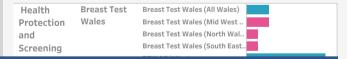


2023

2022



Redress by Location Open Closed



Data Source: [Datix], Data Updated on: [07 March 2024], Rating: [Bronze] .When NO filters are selected charts show rolling 12m history

Potential



Data Source: [Datix], Data Updated on: [07 March 2024], Rating: [Bronze] .When NO filters are selected charts show rolling 12m history



Strategy and Delivery

Performance & Assurance Dashboard - IMTP 2324 \odot (\rightarrow) \bigcirc Corporate Analytics Report Date 2/29/2024 **IMTP Milestone Status - February** amber - early warning red - behind schedule blue - suspended grey - complete green - on track 87 205 By Priority Area By Delivery Date amber - early red - behind blue -120 green - on track warning schedule suspended grey - complete 23 Wider determinants 100 Mental and social of Milestones well-being Healthy behaviours Sustainable health and ġ. care system 36 Excellent public health services 20 Climate change **Enabling delivery** Mar Mav Sep Oct Nov Feb Apr Jun Jul Aug Dec Jan Mar Requests for Change 10 RFC Count 24.0% RFC's requested of Milestones with 1+ RFCs in February Apr 23 May 23 Jun 23 Jul 23 Aug 23 Sep 23 Oct 23 Nov 23 Dec 23 Jan 24 Feb 24 Data Source: IMTP Reporting, Data updated on:11-Mar-24, Rating: Gold Pg 19

GIG | Mark Health | Performance & Assurance Dashboard - IMTP 2324 | Corporate Analytics | Corporate Analytics



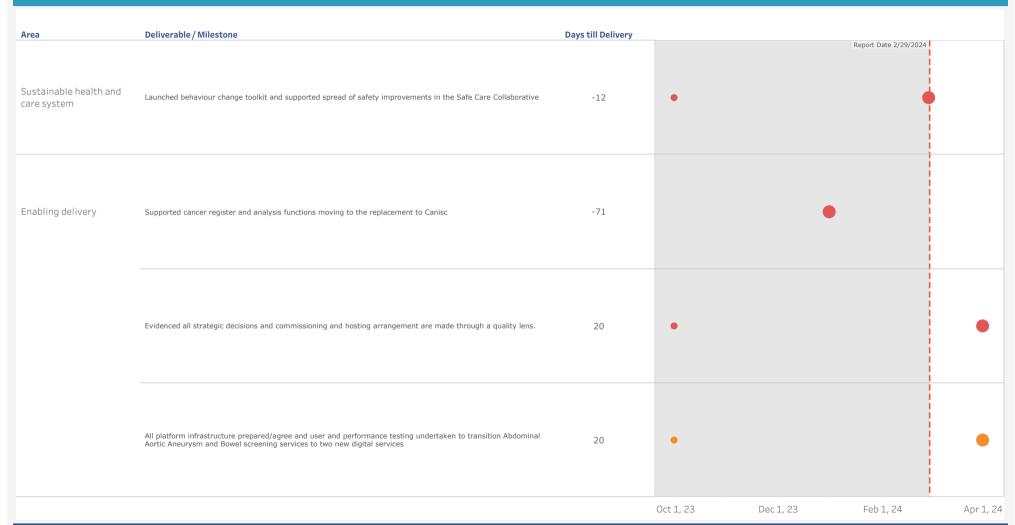




Report Date 2/29/2024

RAG Status Multiple values Priority, Directorate or Ministerial Priority Priority Area

IMTP Detail - Red and Amber Milestones



Data Source: IMTP Reporting, Data updated on:11-Mar-24, Rating: Gold









Report Date 2/29/2024

		Petail - Current Period					
Directorate	Milestone Ref	Deliverable / Milestone	Change Type	Month of Original	Month of New Delivery	What is the reason for change?	What is the impact of the change?
Data, Knowledge & Research	ROIMTPM	Formalise Adult Rare Diseases Registry through long term governance and permissions	Close milestone	March 2023	Null	Staffing issues. This milestone has now rolled over into the new IMTP for Q1 2025/26	There is a reputational risk on the member of staff on a fixed term opermissions.
Improvement Cymru	IMTPM_094	Launched behaviour change toolkit and supported spread of safety improvements in the Safe Care Collaborative	Date change	February 2024	March 2024	The toolkit was due to be launched at the SCC Learning event on 21 February, however this event has been postponed due to the impact of industrial action.	This has delayed the launch of the
	IMTPM_243	Evidenced all strategic decisions and commissioning and hosting arrangement are made through a quality lens.	○ Date change	March 2024	September 2024	While strategic decision making will be evidenced in the 2024 Annual Quality Report, a new Governance Hub is being piloted from April 2024 which will further strengthen strategic decision making, commissioning and hosting arrangements.	No impact as strategic decision m that the Governance Hub has time
Operations and Finance	IMTPM_296	Supported cancer register and analysis functions moving to the replacement to Canisc	Date change	December 2023	December 2024	Dependency on DHCW and NHS England for data loading	Delay in cancer data flows and the
Data Source:	IMTP Report	ing, Data updated on:13-Mar-24, Rating: G	old				

Data Source: DCA Reporting, Data updated on:11-Mar-24, Rating: Gold

Jul 23

Jan 24

Jul 24

Jan 25

Jul 25

Jan 26

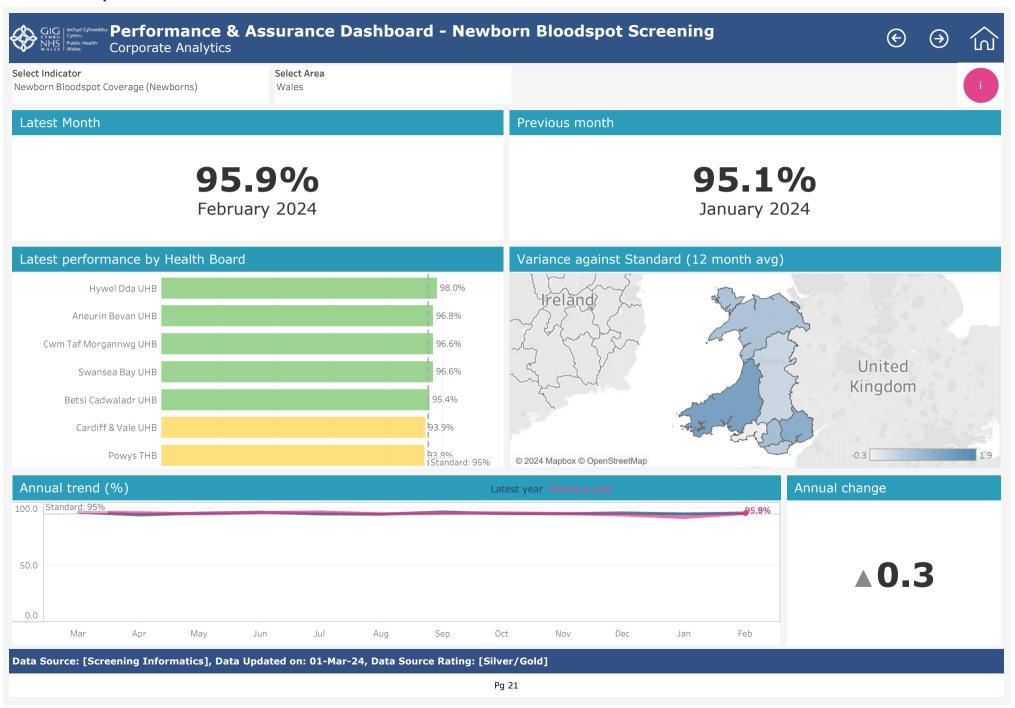
Jul 26

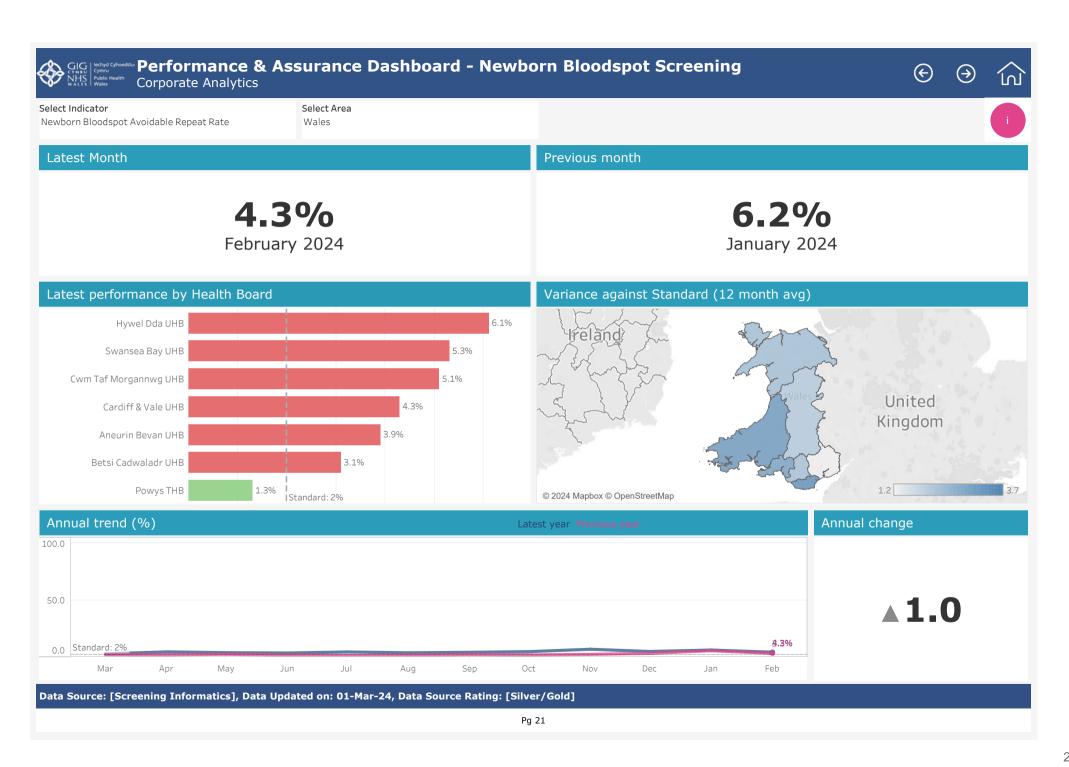
Jan 27 Jul 27

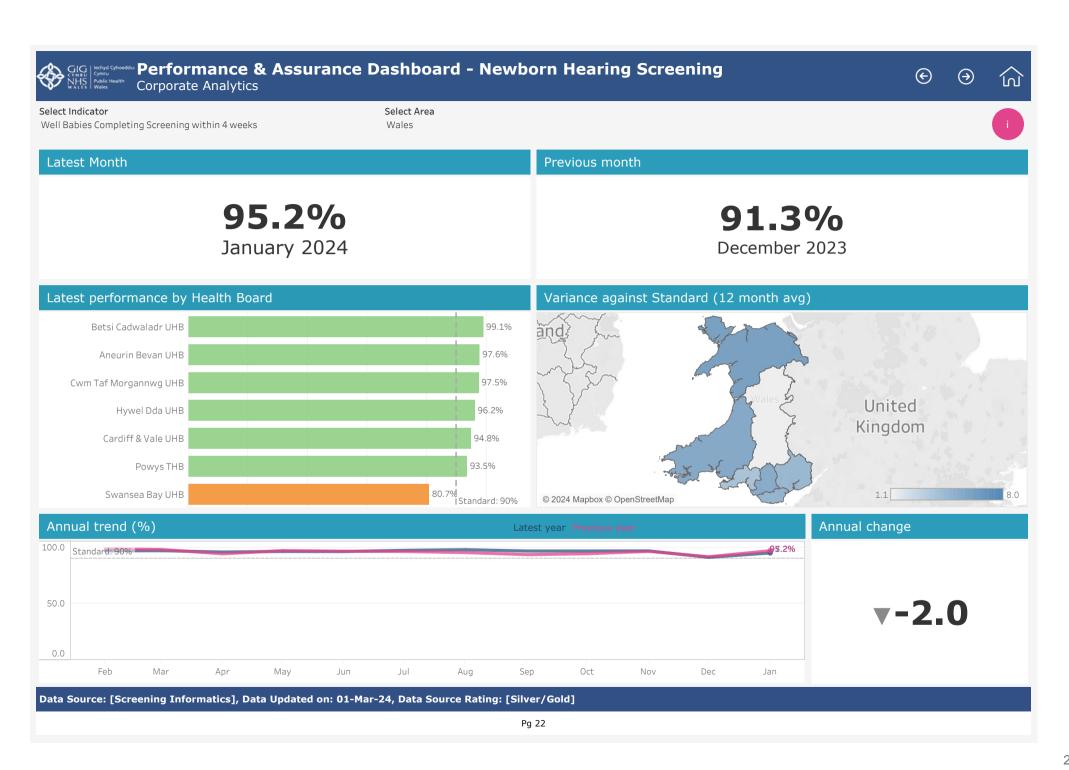
Jan 23

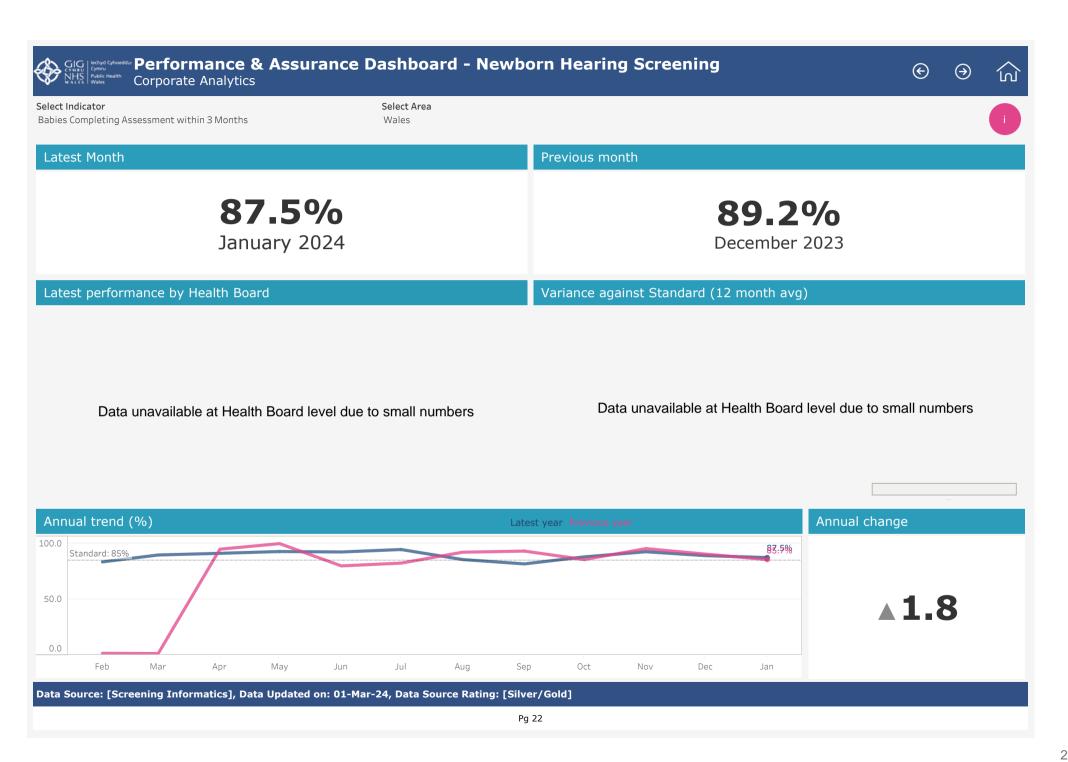
Jan 22 Jul 22

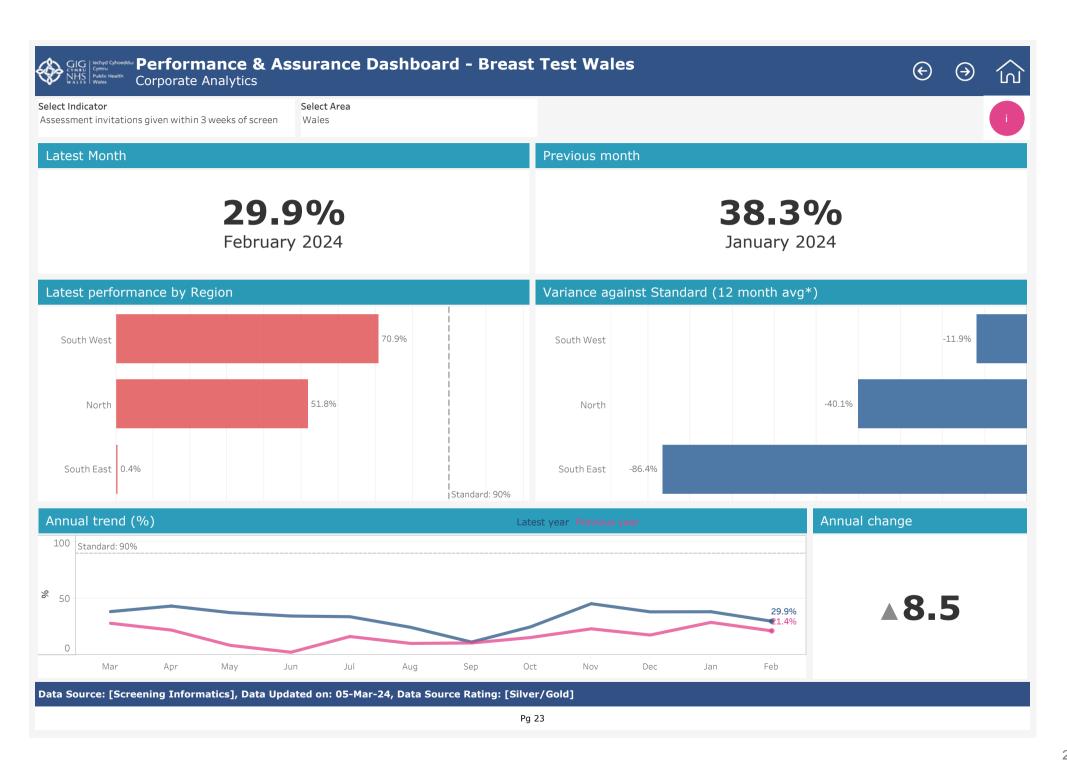
Service Delivery

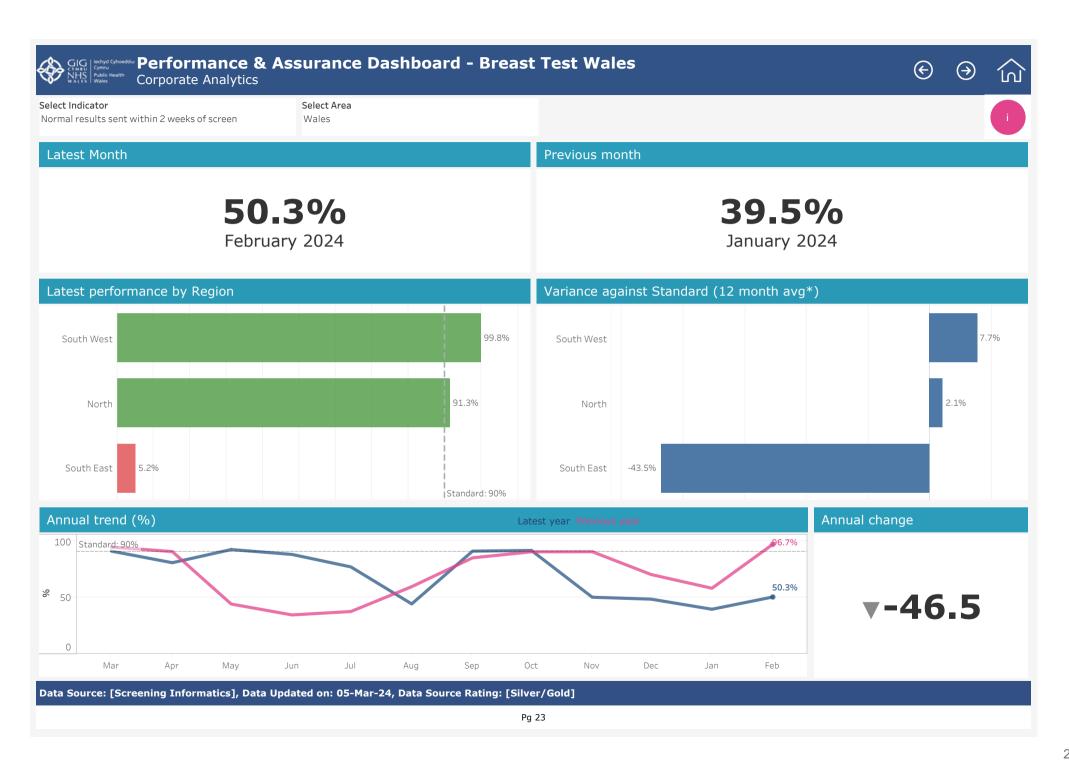


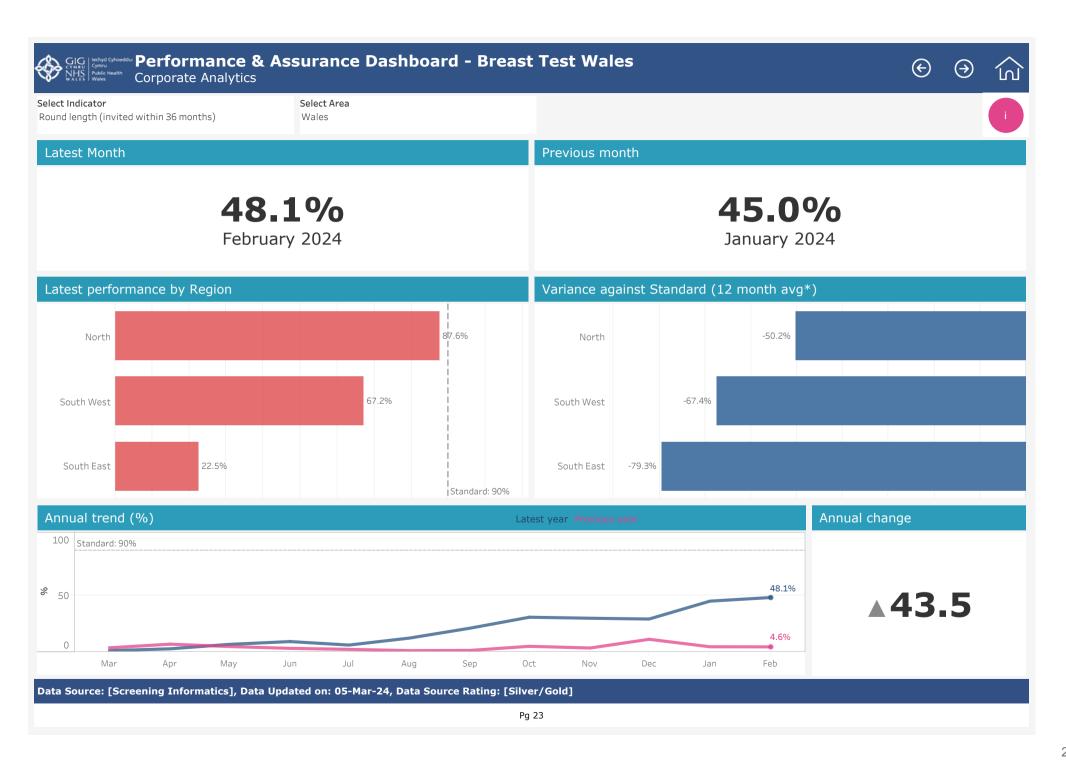


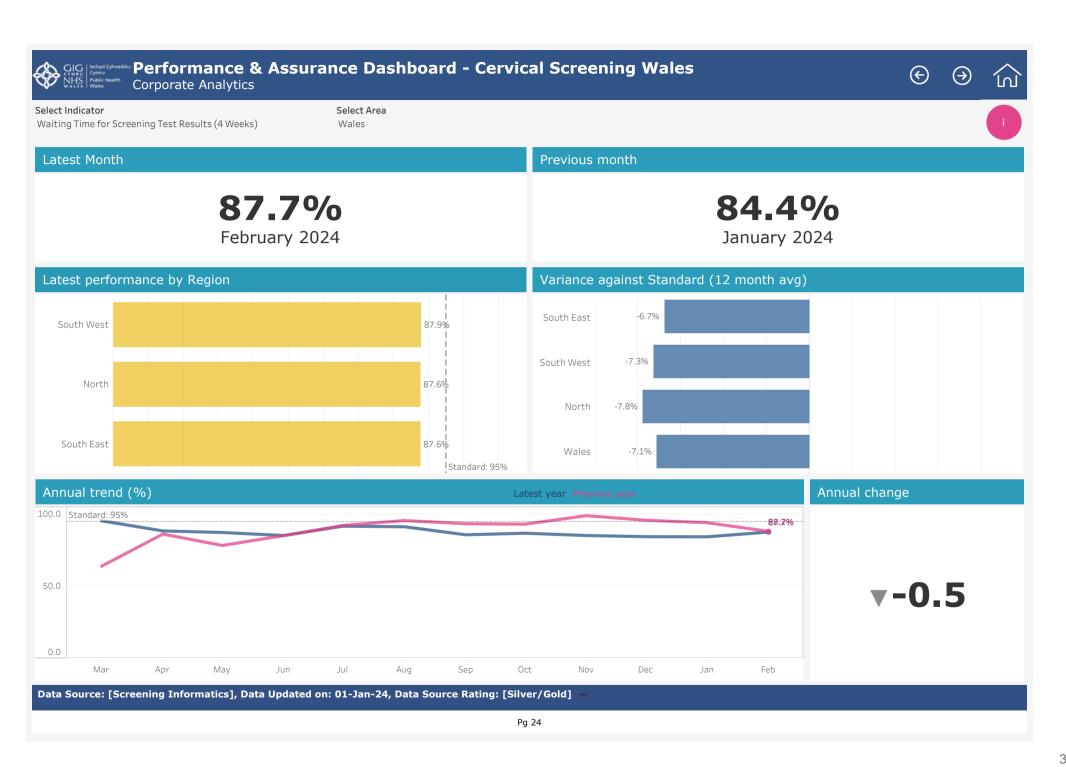


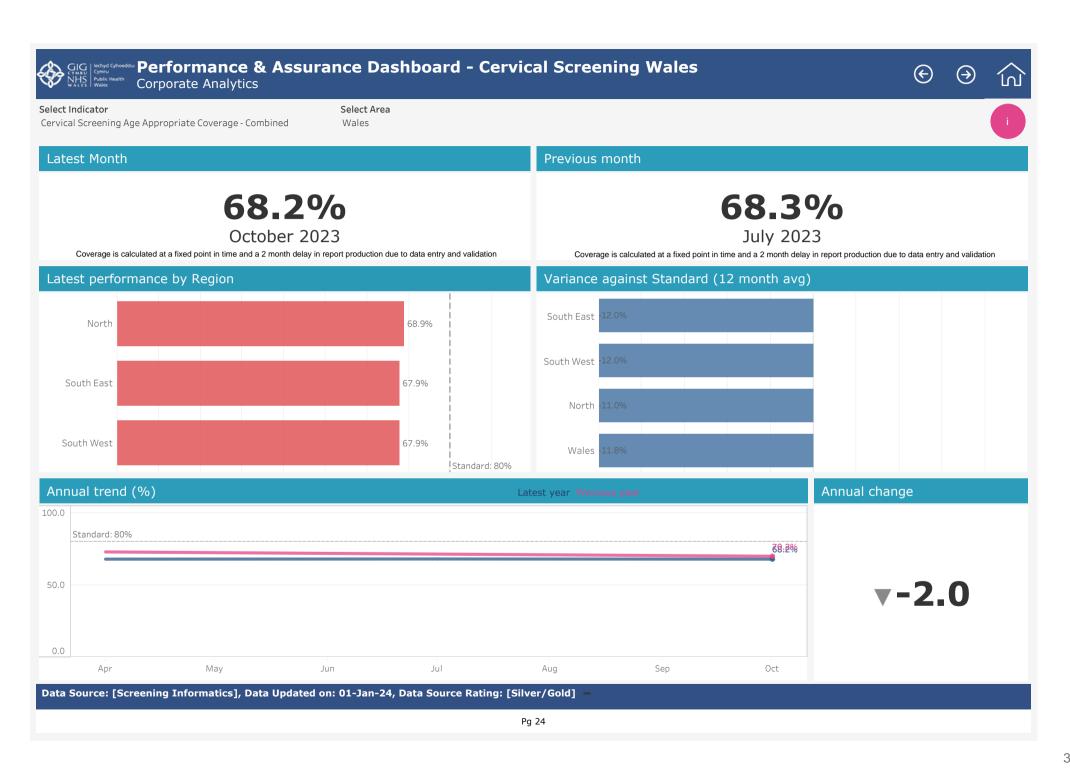


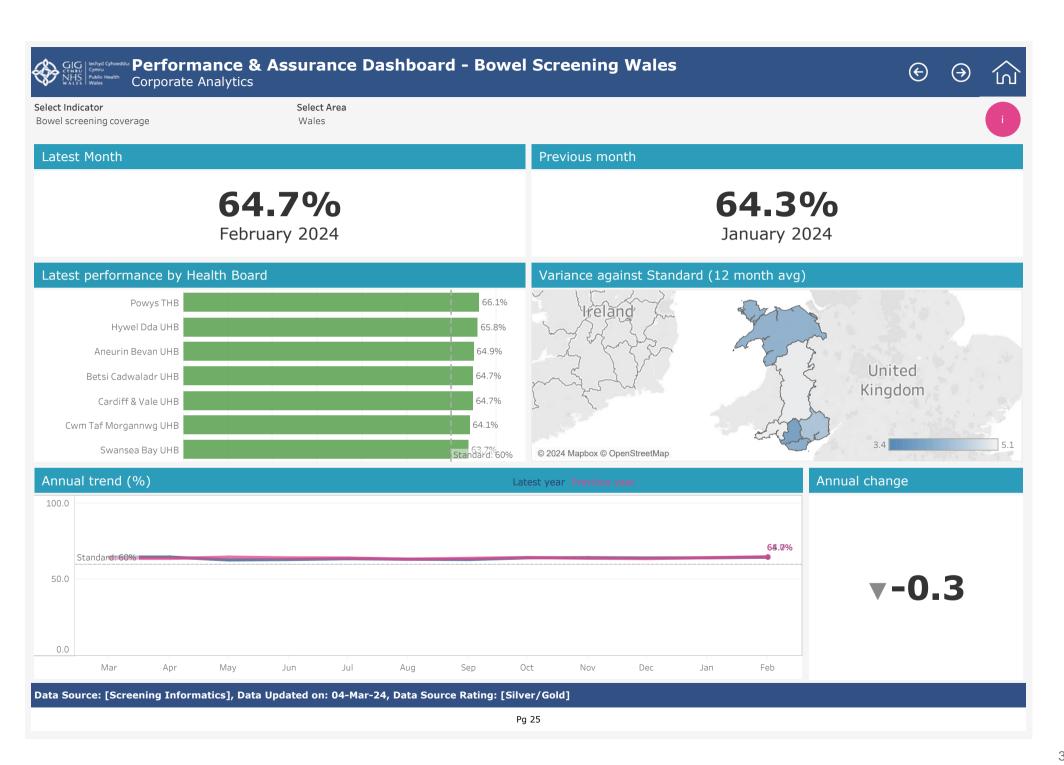


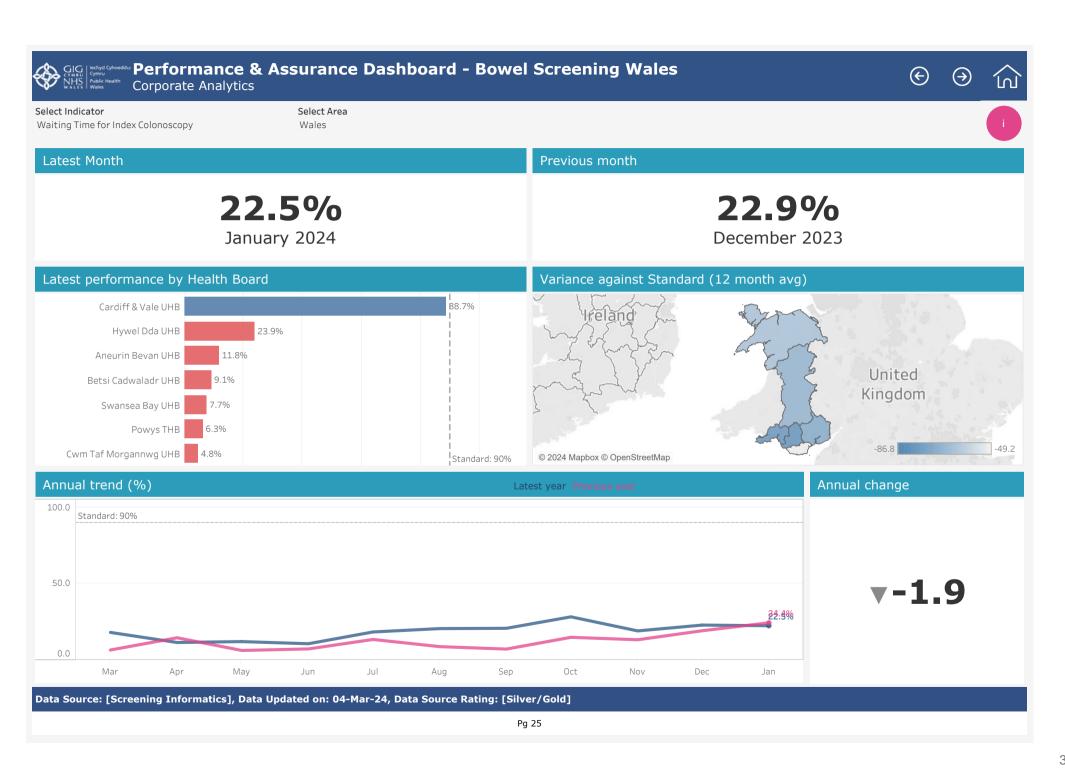


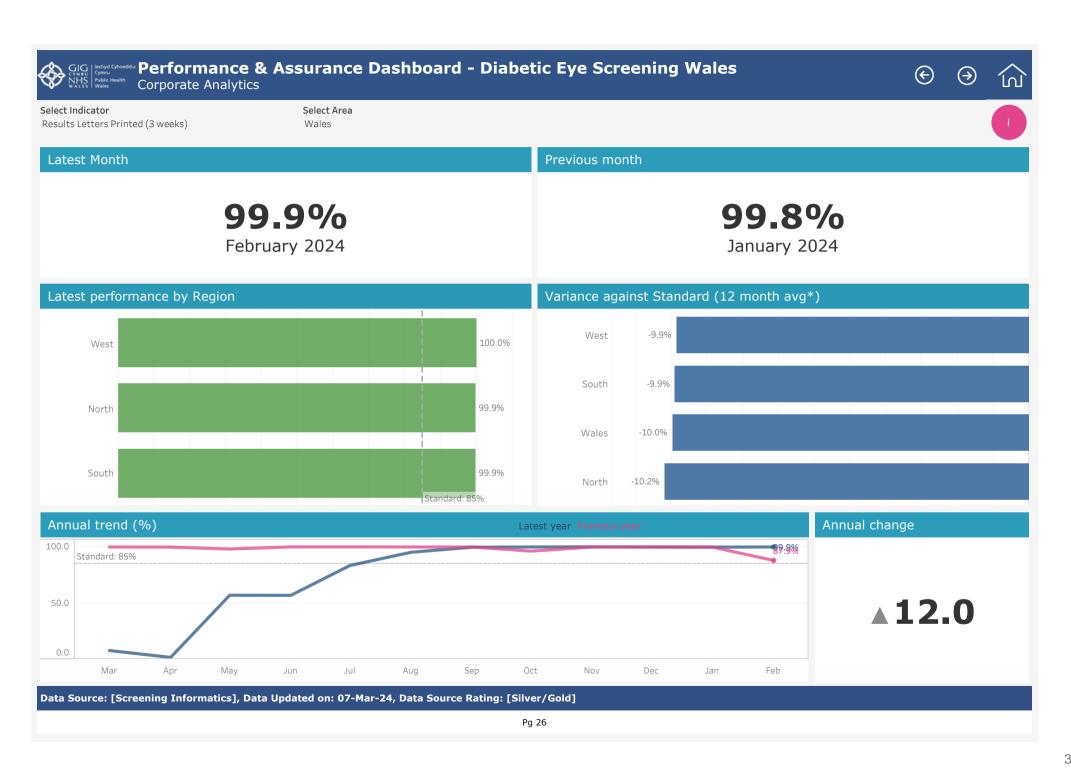


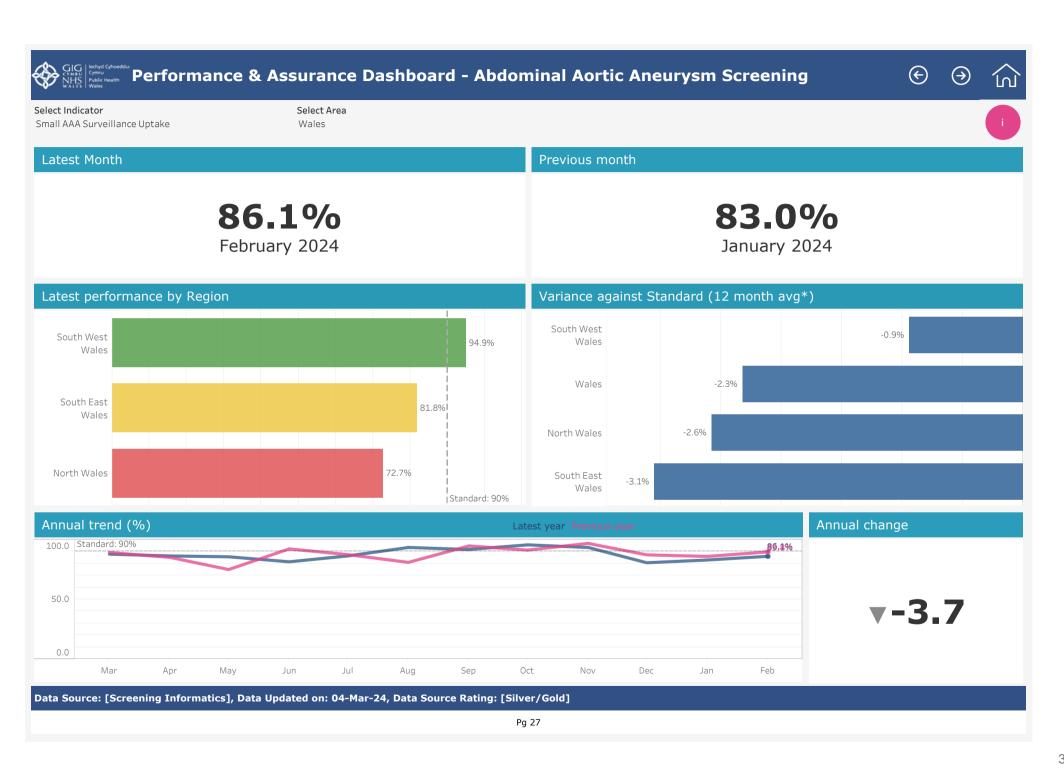


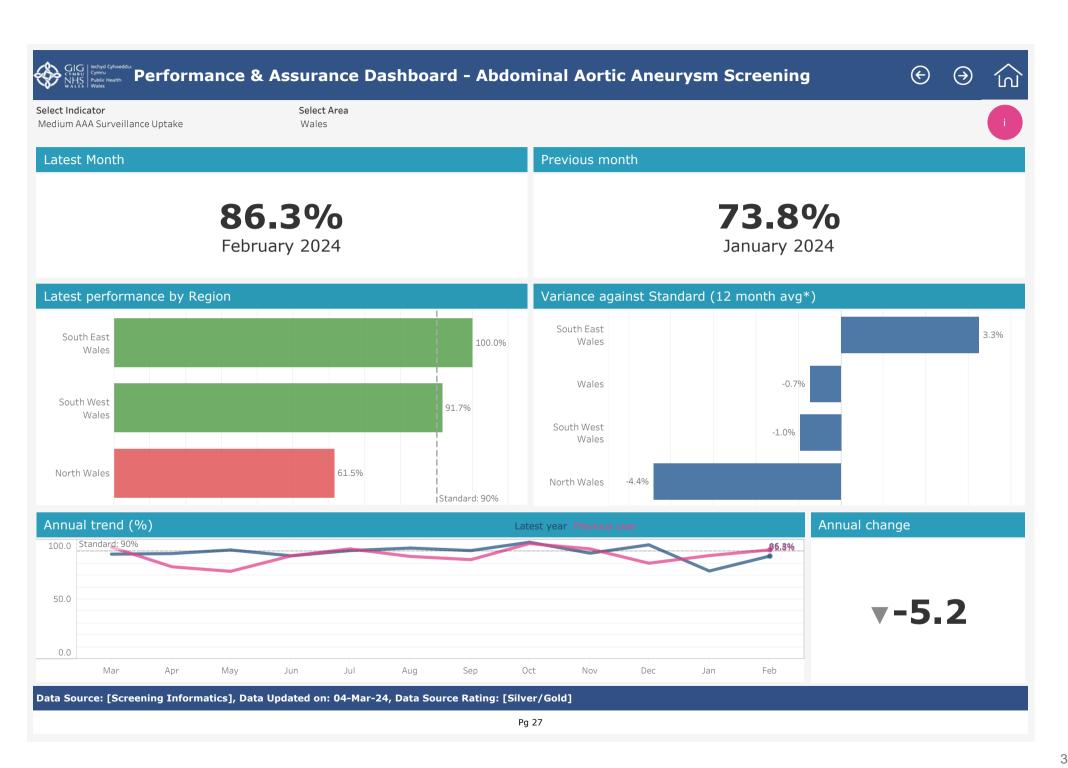














GIG | Notice Feather | Performance and Assurance Dashboard - Additional Indicators | Corporate Analytics





Key Service Indicators

Performance Dashboard - Additional Indicators								
>10% outside target Within 10% of ta	rget	Achieving target	Not av	vailable				
Indicator		Time	frame					
Vaccination and Immunisation								
Influenza vaccination uptake among those aged 65+	75%	at 2 Jan 2024 70.6%	at 30 Jan 2024 71.5%	at 05 Mar 2024 72.3%				
Influenza vaccination uptake among the under 65s in high risk groups	55%	36.6%	37.9%	38.9%				
Influenza vaccination uptake among pregnant women	75%	Reported annually	Reported annually	Reported annually				
Influenza vaccination uptake among healthcare workers	60%	33.8%	33.8%	36.3%				
Influenza vaccination uptake among Public Health Wales staff	N/A	47.1%	47.7%	Not available				
Influenza vaccination uptake among Public Health Wales front line staff	75%	48.4%	49.0%	Not available				
Percentage of children who received 3 doses of the '6 in 1' vaccine by age 1	95%	Q1 23/24 94.2%	Q2 23/24 93.8%	Q3 23/24 94.5%				
Percentage of children who received two doses of the MMR vaccine by age 5	95%	89.3%	88.9%	89.3%				
Percentage of girls receiving the HPV vaccination by age 15	90%	85.3%	85.6%	77.3%				
Percentage of children who received '4 in 1' Pre-School Booster with 2nd MMR dose by age 5	95%	89.7%	89.2%	89.6%				
Healthcare Associated Infections	Target ¹	Dec	Jan					
Clostridium difficile rate (per 100,000 population)	25	37.8	38.1	38.8				
Staph aureus bacteraemia rate (per 100,000 population)	20	27.4	28.2	27.7				
E. Coli bacteraemia rate (per 100,000 population)	67	74.8	74.4	73.9				
Klebsiella sp bacteraemia rate (per 100,000 population)	10% annual	23.9	24.0	23.9				
P. Aeruginosa bacteraemia rate (per 100,000 population)	reduction	5.0	5.0	4.7				
Microbiology	Target ¹	Q1 22/23	Q2 23/24	Q3 23/24				
UKAS status of accreditation to ISO 15189:2012 / ISO 17025:2005	Accredited	Accredited	Accredited	Accredited				
EQA performance (Bacteriology)	97%	96.0%	94.0%	87.0%				
EQA performance (Virology)	100%	96.0%	98.0%	96.0%				
EQA performance (Specialist and reference units)	100%	99.0%	99.0%	100.0%				
EQA performance (Food, Water and Environmental Laboratories)	98%	98.8%	98.7%	97.8%				
Turnaround time compliance (Bacteriology)	95%	94.1%	92.3%	93.8%				
Turnaround time compliance (Virology)	95%	99.2%	98.5%	99.4%				
Turnaround time compliance (Specialist and reference units)	95%	99.1%	99.5%	99.2%				
Turnaround time compliance (Food, Water and Environmental Labs)	95%	98.0%	98.5%	97.9%				
Turnaround time compliance urgent samples (Bacteriology/Virology)	97%	Reported annually	Reported annually	Reported annually				



Gweithio gyda'n gilydd i greu Cymru iachach

Working together for a healthier Wales