



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Joint Executive Team

Public Health Wales

10 December 2024



Agenda Item

Supporting Document

PART A - Mid-year Reflections And Forward Look

Organisational reflections on first six months and focus on the remainder of the year

1. Progress against agreed plan 2024/25
2. Risks to delivery
3. Progress against accountability conditions

- ANNEX A: Summary of key successes & embedding WFGA
- ANNEX B: Month 6 Enhanced Performance Report (including accountability conditions) & Performance Dashboard
- ANNEX C: Month 6 Finance Report
- ANNEX D: Strategic Risk Update

4. Supporting the delivery of Ministerial expectations

- a. Cutting NHS waiting times
- b. Mental health
- c. Services for women's health
- d. Population health and obesity

- ANNEX E: Women's health consultation response

PART B - Strategic Approach

1. Quality Management System (QMS) including the 2023/24 Duty of Quality Annual Report
2. How have you embedded the principles of equality, diversity and inclusion across the organisation
3. Clinical strategy/clinical services plan
4. Workforce and recruitment challenges and solutions

- [Duty of Quality Annual Report 2023/24](#)
- [Strategic Equality Plan and Objectives 2024-28](#)

- ANNEX F: Analysis of staff turnover in HPSS



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales



PART A: Mid-year Reflections And Forward Look

Organisational reflections on first six months, and focus for the remainder of the year



- Our people have again been instrumental in everything we have delivered in the first half of 2024/25 with 89% of the actions to date completed or on track
- We have delivered across the breadth of our public health functions with an increased focus on delivery and impact with some major developments achieved and maintaining focus on our core business as usual activities
- We have continued to focus on delivering excellent public health services with 72% of the organisation specifically geared to frontline service delivery.
 - Examples include: 385,000 screening participants in total, 750,000 number of microbiology tests undertaken, 9,400 number of genomes sequenced, and significant health protection activity (160 incidents, 6,725 cases and over 5,000 total calls, 14 training events)
- We have had a significant focus on culture, leadership and wellbeing across the organisation and pleased to have a current participation of 60% with the NHS staff survey
- We were delighted to be awarded Gold with distinction in the Diverse Cymru cultural competence awards
- We reported a mid-year revenue position of £165k underspend at month 6 and a breakeven forecast. This will deliver our statutory duty to breakeven over a rolling 3-year period. Further detail can be found in ANNEX C – Finance Report
- We have continued to progress our Long Term Strategy through the development of our Strategic Priority Route Maps which map the journey to deliver our single strategic outcome to increase healthy life expectancy and reduce the inequality gap by 2035



1 Progress Against Agreed Plan 2024/2025



Sone Achievement Highlights (also Appendix **XXXX**) **[Tracey to lead]**

- Bowel Screening Wales – completion of bowel screening optimisation expanding the range from 50 to 75 years
- Successful delivery of the Breast Cohort Selection Tool removing our reliance on NHAIS for breast screening. New automation processes started in DESW which has reduced the number of paper referrals to a minimum, and significantly reduced the email referrals
- Mpox response – prompt response to the potential threat of mpox through rapid exercising of internal and external response arrangements and establishment of preparedness structures
- Tobacco Control Policy – significant work by the Tobacco Team in support of Welsh Government in development and implementation of legislation
- Developing a national approach to Prevention – published '[Prevention-Based Health and Care \(PBHC\) Framework](#)', which identifies fundamental components needed to shift the health and care system towards a prevention-based approach
- Prevalence of disease projections, including diabetes, cancer, cardiovascular, respiratory and musculoskeletal disease work widely shared, with CEOs, the Minister, Directors of Public Health and Directors of Planning
- Further strengthening our international health role: influencer in the Wellbeing Economy, organising a visit by RIVM and Dutch Ministry of Health. Refreshed IHCC Charter for International Health Partnerships Implementation Toolkit
- 31st in the Stonewall Workplace Equality Index and named as one of the Top 5 employers for LGBTQ+ equality in Wales
- 50+ colleagues have been successful in becoming accredited Cultural Advocates, this is to support our ongoing culture work



1 Progress Against Agreed Plan 2024/2025



IMTP Milestone Status - September

18%
Completed

42

70.8%
Green - On track

165

8.6%
Amber - Early warning

20

2.6%
Red - Needs attention

6

N/A
Closed

2

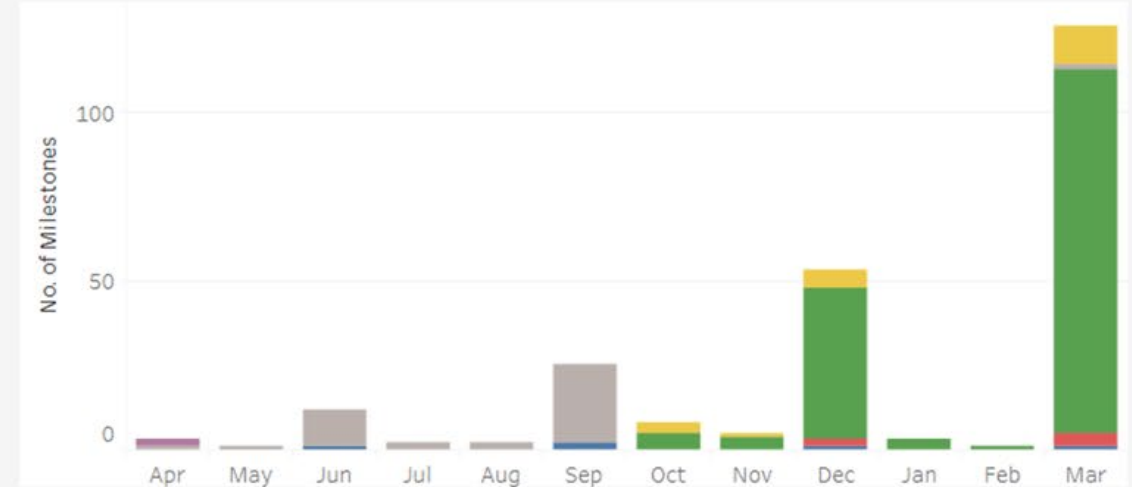
N/A
Suspended

5

By Priority Area

	Completed	Green - On tr..	Amber - Earl..	Red - Needs a..	Closed	Suspended
1. Wider determinants	2	6	0	1	0	0
2. Mental & social well-being	2	7	0	0	0	0
3. Healthy behaviours	5	17	5	0	0	3
4. Sustainable health & care sys..	8	30	1	2	0	2
5. Excellent public health	5	28	7	1	2	0
6. Climate change	2	8	0	0	0	0
7. Enabling delivery	18	69	7	2	0	0

By Delivery Date



- 89% of IMTP milestones delivered or green at month 6 (**excluding closed and suspended milestones*)
- Further details contained in ANNEX B - Month 6 Performance Report (pp. 30-37)



1 Key Performance Indicator Summary – Service Delivery



Screening Services	In Focus	Standard	Aug-24	Committee
Bowel Screening Wales – Waiting time for index colonoscopy (Health Board Delivery)		90%	14.6%	Quality, Safety and Improvement
Cervical Screening Wales – Waiting time for colposcopy appointment (8 weeks)		90%	96.0%	
Breast Test Wales – Assessment invitations (3 weeks)		90%	Sep-24 4.4%	
Diabetic Eye Screening Wales – Coverage (12 Months)		80%	40.4%	
Abdominal Aortic Aneurysm – Timely referral to elective vascular network (MTD)		100%	100%	
Infection Services			Aug-24	
Total Microbiology Rejection Rates		<5%	5.5%	Quality, Safety and Improvement
Total Microbiology Diagnostic Sample Requests		*TBC	152,541	
Blood Culture - Collected to Incubation SMI <4hrs		<4hrs	69%	
Blood Culture - Received (PHW Laboratory) to Incubation		*TBC	96.7%	
Health Protection			Aug-24	
Compliance to surveillance reporting schedules		90%	94%	Quality, Safety and Improvement
Test and Post (STI self-sampling) – Test Turnaround Times		100%	Sep-24 99.9%	
Response times by priority - Urgent (<4 hours)		90%	100%	
Response times by priority - High (<24 hours)		90%	100%	
Response times by priority - Medium (<48 hours)		90%	100%	
Data, Knowledge and Research			Quarter 2	
Number of Major Breaches		0 Major Breaches	0 Breaches	Audit & Corporate Governance Knowledge, Research and Information
Number of Minor Breaches		Downward trend of Minor Breaches	0 Breaches	
Percentage of publications without breaches		100%	67%	
Percentage of user follow up to DKR products		100%	20%	
Health & Wellbeing			Jun-24	
JUSTB – Number of Schools with 2-day training completed (YTD)		35 Schools	34	Knowledge, Research and Information Quality, Safety and Improvement
Whole School Approach – Proportion of schools with an Action in Place (All schools)		80%	55.7%	
Whole School Approach – Proportion of schools with an Action in Place (Secondary schools)		100%	85.9%	
Policy and International Health				
Indicators and targets to be developed where applicable				

Please note the table above only highlights a small selection of service related performance indicators. Additional KPIs are reported on the Performance & Assurance Dashboard, including Workforce, Finance and Quality KPIs – see ANNEX B Performance Report

Key: RAG Status

■ >10% outside target
 ■ Within 10% of target
 ■ Achieving target
 ■ Not applicable / TBC



2 Risks to Service Delivery



- **Service Delivery Risks:**
 - Bowel Cancer Screening – wait times for colonoscopy are variable and unacceptably long owing to demand for endoscopy services.
 - Environmental Public Health services – review of MoU arrangements with UKHSA [Meng to lead]
- **HIA adoption :** risks in the inability to support other public bodies and organisations to implement Welsh Government HIA regulations due to a potential high level of demand for support and advice from PHW [Sumina lead]
- **Financial risks:** Non-recurrent funding risks associated with ongoing delivery of Health Improvement Programmes, COVID testing, Lung Cancer Screening [Huw to lead]
- **Digital Risks:**
 - Large number of digital dependencies often with DHCW – this has led to challenges in delivering some aspects of our plan
 - Dependency on Audit Plus where we engage with DHCW over our needs and helping ensure the solution for the future meets our needs while also ensuring we have business continuity plans in place [Iain to lead]
- **Workforce risks:** as highlighted in the Strategic Risk and Corporate Risk Registers [Neil to lead]



3 Progress Against Accountability Conditions



- Good progress made against the accountability conditions. Further information available in ANNEX B, pages 39-45

Accountability conditions

- Continue to demonstrate leadership role in supporting NHS Wales improve public health, ensuring prevention and health protection are at the forefront of planning; [Jim/Meng to lead]
- Continue to support primary care developments and the prevention agenda; [Jim to lead]
- Maximises contribution to the achievement of the Six Goals programme, particularly goals 1, 2 and 6: [Jim to lead]
 - Coordination planning and support for populations at greater risk of needing urgent or emergency care
 - Signposting people with urgent care needs to the right place first time
 - Home first approach and reduce the risk of readmission
- Offer appropriate support to the strategic integrated vaccination programme for Wales; [Meng to lead]
- Deliver in line with the Mandate Letter, achieving delivery of the key areas identified [Huw to lead]



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

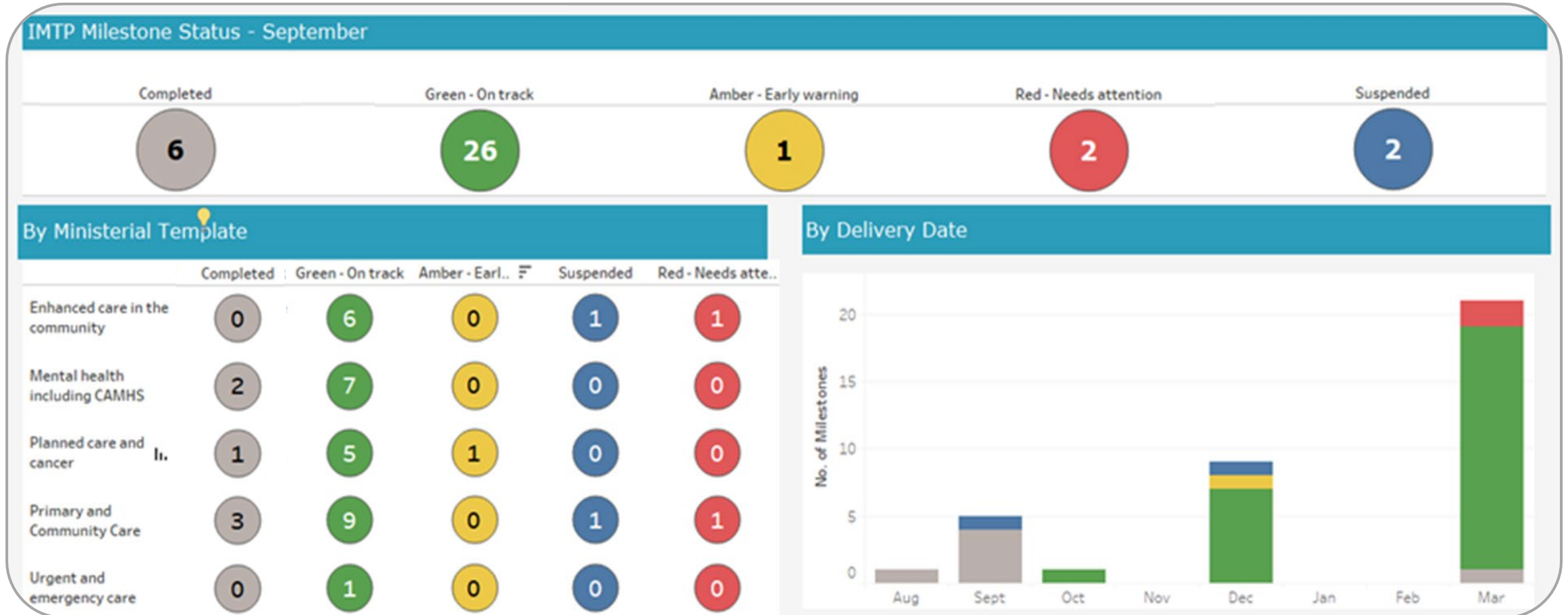


PART A - Mid-year Reflections And Forward Look

4 Supporting the Delivery of Ministerial Expectations



4 Supporting the Delivery of Ministerial Expectations



- 37 of our IMTP milestones align to our Ministerial expectations (**note that only major milestones mapped as part of IMTP Ministerial Priority template submission, as agreed with WG Planning colleagues*)
- 86% of milestones delivered or green at month 6



4 Supporting the Delivery of Ministerial expectations



a. Cutting NHS Waiting Times [Meng to Lead]

All Screening Programmes have recovered from impact of the pandemic

From March 2021 plans to recover programmes have been put in place to address both impact of pause and also the reduced activity following reinstatement due to covid safe pathways. Activity was increased over usual to recover the screening programmes which required additional resource.

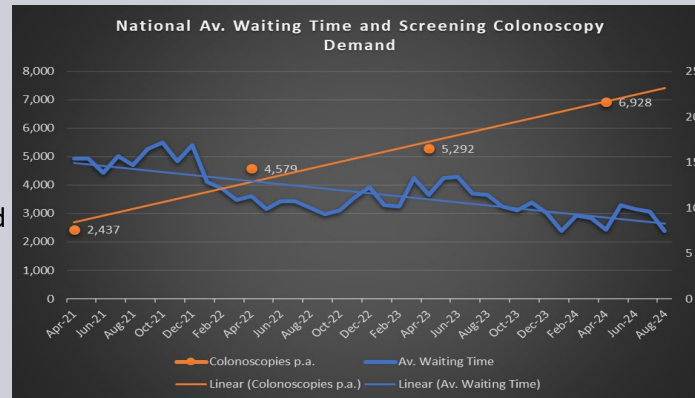
- Bowel Screening recovered backlog Oct 2021
- Cervical Screening recovered backlog Dec 2021
- Wales Abdominal Aortic Aneurysm recovered backlog March 2023
- Diabetic Screening Programme recovered backlog November 2023
- Breast Screening Programme recovered backlog July 2024

WCISU published latest incidence data on cancers – [Cancer Incidence in Wales, 2002-2021.docx \(live.com\)](#) shows that breast and bowel cancer diagnosis rate has recovered in 21/22 after the impact of the pandemic. This is not the pattern seen with the other cancers and report considers that reinstatement of the screening programmes contributed to the recovery.

Current focus on timeliness for the cancer screening pathway

Bowel Screening Colonoscopy Waits

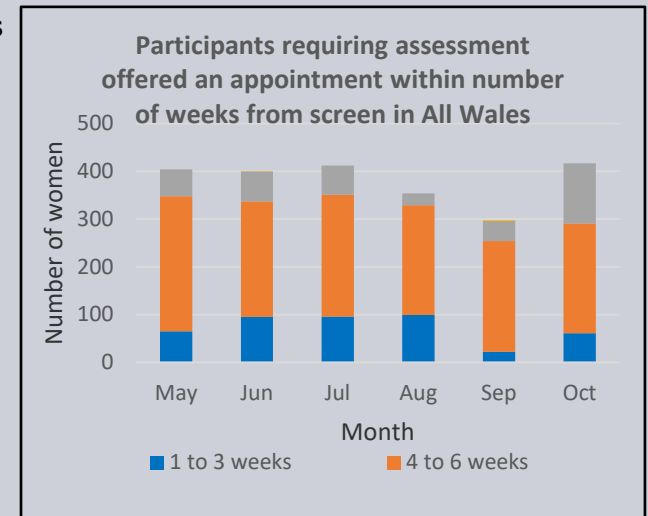
- Colonoscopy capacity across Wales is challenged to meet demand and reduce existing backlogs for both symptomatic and screening activity
- Optimisation of bowel screening (in a phased approach since 2021) has resulted in increased demand on colonoscopy services.
- This increased demand has been funded and in line with expectations based on modelling that shared with Health Boards



Waiting times for screening colonoscopy remain outside the Bowel Screening Programme 4-week standard in most local assessment centres in Wales. currently range 2-11 weeks (average of 6 weeks and 4 days)

Breast Screening Assessment Waits

- There are national shortages of skilled clinical staff to undertake reading, arbitration and assessment clinics and this is most marked in North Wales.
- Steps are being taken to improve timeliness and this expected to improve over next two months.
- There is no expected clinical impact of delay to assessment or impact timeliness from point of suspicion in the pathway.
- Women invited for assessment are sent their invitation shortly before their appointment to reduce time they are worried before attending clinic





4 Supporting the Delivery of Ministerial Expectations?



b. Mental Health and Mental Wellbeing **[Jim to lead]**

Mapping and understanding mental health and wellbeing priorities for Wales

- Working with the Network to deliver a CAMHS Service needs assessment by March 2025
- Undertaking an end-to-end pathway Substance Use Needs Assessment by April 2025
- Convened system group to understand and quantify changes in young people's mental health and identify interventions
- Published our research on mental wellbeing in Wales

Helping the system put high-value interventions in place

- Working with NHS Exec to mainstream CAMHS in reach to schools following joint review by April 2025
- Devising a high value CAMHS pathway and interventions menu for the Network (underway)
- Devised a model for the National Attendance Task Force to take a public mental wellbeing approach to school attendance
- Advised on priorities for new Mental Health Strategy for Wales

Implementing our programmes for mental health and well-being

- 98% of Secondary schools and 88% of all schools are signed up to the Whole School Approach to Mental and Emotional Wellbeing with 88% of secondary schools and 61% of all schools currently writing action plans.
- Implementing the national Trauma-informed Framework with Traumatic Stress Wales
- Increased sign ups from Criminal Justice system and Further Education to using Trauma and ACE informed approaches
- Launched Hapus National Conversation to increase public knowledge and skills on taking care of our mental wellbeing



c. Services for Women's Health **[Meng to Lead]**

Breast Screening Programme

- The breast screening programme recovered backlog of participants delayed over 36 months in line with expected timescales by July 2024

Cervical Screening Wales

- Taking work forward with DHCW around electronic test request for cervical screening samples
- Scoping work with vaccination on feasible timescales for elimination of cervical cancer in Wales in line with World Health Organisation targets

Antenatal Screening Wales

- Implemented and evaluating new pathway for Pregnant women with RhD negative blood group. Offered a cell-free DNA blood test to accurately predict if their baby is RhD negative or RhD positive. This reduces unnecessary blood products for women whose babies are RhD negative

Vaccination

- Facilitated the launch of the maternal RSV programme in September 2024
- Engagement with services supporting pregnant women to gain insight and support improved vaccine uptake

Sexual health

- Improving access to sexual health testing (online and through community services/settings e.g. domestic abuse support services), as well as condoms and PrEP
- Working collaboratively to understand and reduce barriers to accessing contraception e.g. tackling misinformation by ensuring information is accurate and reliable, and supporting service providers with LARC provision
- Supporting work on the priorities for sexual health in Wales, which will align with the Women's Health Plan

Above programmes are supported by dedicated workplans around equity and access (Inclusion Health, Vacc Equity, Screening Equity)

Further examples of some of our wider work are highlighted in ANNEX E – PHW consultation response on The Women's Health Plan 2025-2035



d. Population Health and Obesity **[Jim to Lead]**

System Leadership –

- **Prevention across Health and Social Care** - Work with national Peer Groups and Settings on: Healthcare Public Health Approach; *Tackling Diabetes Together*; *Prevention Based Health and Care*; *Healthy Weight Healthy Wales*
- **Shaping Places for Wellbeing** launched with every Public Service Board signed up to work on determinants of health

Diabetes – Launched *Tackling Diabetes Together*. [MyDesmond](#) - digital self management app available across Wales. Launched “lived experience” project on improving care pathways with Diabetes UK Cymru. Agreement for Diabetes bundle of 8 into IQPD reviews. Healthy Weight support pack to health and social care staff. Funded 5 local pilots to improve pathways and outcomes. Co-ordinating roll out of All Wales Diabetes Programme

Obesity – Advised WG on cost and options for weight loss medications. Drafted guidance for WG on Ultra processed foods. Helped design and deliver series of CS-chaired Roundtables on Obesity and drafting refreshed Action Plan with WG, provided tools for planners to address hot food takeaways. New national digital system for National Exercise Referral Scheme

First 1000 Days – Immunisation, Vaccination & Screening. Shared Framework for Early Years with UHBs finalised. *Every Child* booklets covering pregnancy to age 2 published and distributed by midwives and health visitors. Also available as digital e-books from www.everychildwales.co.uk Final two resources covering Ages 2-7 finalised

School Health – Drafting and testing new *School Meals Standards* and regulations; developed whole school approach to food that takes a ‘One Health’ approach. Finalised draft minimum standards for health and wellbeing promoting schools. Commenced system engagement on them. Whole School Approach has good performance and is covered in Mental Health and Wellbeing Slide

Tobacco Control – Significant input to government on legislation and implementation options. Vaping and Young People Incident Group

Substance Misuse – Cross-Directorate Board with shared priorities for a “One PHW” approach to substance misuse with an underpinning action plan working with WG and DsPH. We will deliver a population *Health Needs Assessment* by April 2025



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

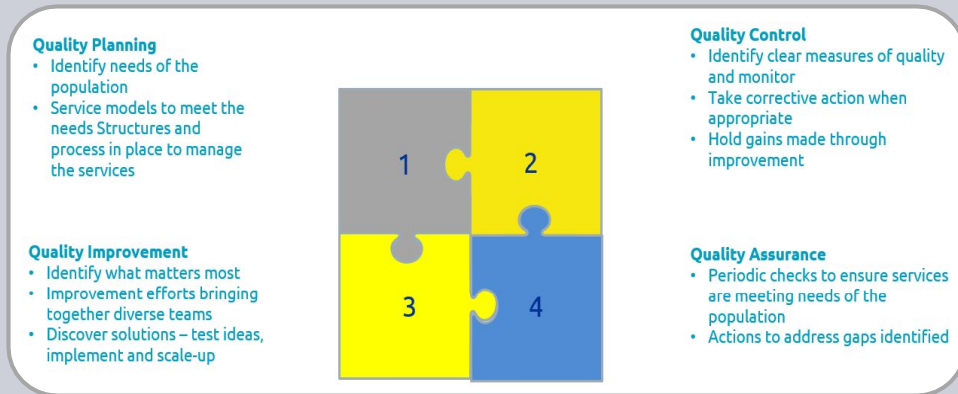


PART B : Strategic Approach

1. Quality Management System including the 2023/24 Duty of Quality Annual Report [Claire to lead]-

Quality Management System

Refreshed our shared purpose and vision, so our people understand the direction of travel for the organisation focusing on quality, and learning



Established Quality Oversight Group with an operational remit for quality and shared learning

Commenced a baseline self- assessment against the Quality Standards using KLOE - Developed a prototype Quality Impact Assessment to inform planning and due to be piloted shortly, aim for Board sign off early next year

Reviewed the visual management system support quality monitoring and reporting with redevelopment taking place

Reconfigured our Improvement and Innovation Hub to build improvement capability and capacity across PHW

Revision of quality assurance processes to meet service user needs along with regulatory requirements.

Annual Quality Report

Published in July 2024

Over 40 case studies across the 12 Health and Care Quality Standards to illustrate how we comply with the Duty of Quality key achievements from 2023-24 reviewed through a quality lens Highlights areas for improvement and key learning identified during the year





2. Embedding the principles of equality, diversity and inclusion across the organisation [Neil to lead]

- Our Strategic Equality Plan 2024-28 was published in April 2024 and WRES actions have been integrated into it
- Accredited as a Living Wage Employer
- Trained 22 volunteers from our Staff Diversity Networks in Recruitment and Selection to achieve greater diversity in the hiring process
- Established a new Staff Network for Neurodiverse colleagues
- Appointed a Non-Executive Director with a specific remit around Equality, Diversity and Inclusion
- Awarded Gold level with Distinction (the highest level in the scheme) for Cultural Competence
- Disability Confident Leader, and a champion for Disability
- Placed 31st in the UK Stonewall Workplace Equality Index
- Recruited additional Welsh Speaking Staff to offer Welsh Clinical Consultations



3. Clinical strategy / Clinical services plan **[Claire/Meng to lead]**

Delivering Excellent Services

Taking a cross organisational approach to the development of a strategic route map and the Duty through the lens of STEEP



Safe

Systematic programme for cleaning and decontamination practice and National Cleaning Standards
 National FGM pathway
 Improvements implemented in response to the Improvement Notice following the HIW inspection of compliance with the use of ionising radiation IR(ME)R regulation in Breast Test Wales

Timely

Response to outbreaks, standards in the All-Wales Communicable Disease Outbreak Plan and consistent achievement of AWARe response times by priority standards to all enquiries
 AAA programme consistent achievement of timely referral to elective vascular network MDT

Effective

Managing Concerns Processes, improving liaison between the service user and service ensuring a more person centred and effective response by PHW. Achieving substantial assurance from a recent WRP PTR audit.
 Work with Health Boards to maintain focus on reducing CSW sample rejection rates.

Efficient

Consistent achievement of compliance to surveillance reporting schedules.
 Turnaround rates in microbiology

Equitable

Health Protection Inequalities Programme
 Screening Equity Programme including access, inequity and cultural competence

Person-centredness

Cross organisation collaboration on service user engagement and creation of Service User Experience group
 National LAC CIVICA survey



4. Workforce and recruitment challenges and solutions [Neil to lead]

- We continue to experience challenges recruiting scarce skills such as: Radiologists and Breast Clinicians; Consultants in Microbiology and Infectious Disease; Health Protection specialists such as Consultants in Communicable Disease Control; some specialist nursing roles; Public Health Practitioner roles; Health Economists and Biomedical Scientists
- Like many sectors across the UK, we experience specific challenges with specialist including cybersecurity, analysts and bioinformaticians
- We are utilising strategic workforce planning and job families to identify solutions, including the use of advanced practice; re-profiling of teams; and the introduction of new technology
- We are undertaking targeted activity to expand access and cultivate diversity in our workforce, including:
 - Collaboration with Welsh universities to broaden candidate pools and foster pathways for school leavers, graduates/undergraduates
 - Engagement at job fairs, particularly in Microbiology/Infection Services, connecting with potential candidates and showcasing opportunities across our organisation and the wider Welsh NHS
- Our work on Nursing and Midwifery retention, funded by HEIW, is providing valuable insight into actions to address employee experience and turnover
- We have implemented dashboards for retention insights and continue to develop culture-centric recruitment and selection practice.
- We are refreshing our People Strategy to align with our Long-Term Strategy
- Further information available in ANNEX F - Analysis of staff turnover in Health Protection & Screening Services



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales



*Gweithio gyda'n gilydd
i greu Cymru iachach*

**Working together
for a healthier Wales**