



 <p>GIG CYMRU NHS WALES   Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p><b>Name of Meeting</b> Board <b>Date of Meeting</b> 25 September 2025 <b>Agenda item:</b> 4.4.</p>
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<b>Proposed Service Review Framework – Breast Test Wales Programme</b>	
<b>Executive lead:</b>	Meng Khaw – National Director of Health Protection and Screening Services. Executive Medical Director
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<b>Approval/Scrutiny route:</b>	Business Executive Team
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<b>Purpose</b>
<p>The purpose of this paper is to:</p> <ul style="list-style-type: none"> <li>• Outline the approval from the Business Executive Team for the commissioning of a Service Review of the Breast Test Wales screening programme</li> <li>• Share the Service Review Framework approved by the Business Executive Team which has been developed in collaboration with key Executive colleagues.</li> <li>• Outline organisational resource required to support the review process</li> </ul>

<b>Recommendation:</b>				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Board is asked to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> and <b>take assurance on the</b> Commission of the Review by the Business Executive Team.</li> <li>• <b>Consider</b> and <b>note</b> the allocation of resources required for the review.</li> <li>• <b>Note</b> and <b>take assurance</b> on the adoption of the Framework proposed for the Review.</li> </ul>				



### **Link to Public Health Wales [Strategic Plan](#)**

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

<b>Strategic Priority/Well-being Objective</b>	4 - Delivering Excellent Public Health Services
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### **Summary impact analysis**

<b>Equality and Health Impact Assessment</b>	An Equality or Health Impact Assessment is not required for this paper.
<b>Risk and Assurance</b>	In the short term this review seeks to provide assurance that service and divisional risks are being reviewed, and fresh mitigation plans developed where relevant.
<b>Health and Social Care (Quality and Engagement) (Wales) Act</b>	This review intends to explore ways to optimise service delivery and is intended to support our statutory duty to improve quality and safety of services.
<b>Financial implications</b>	It is intended that the review will be delivered within existing resources and any improvement planning should as a principle seek to bring efficiencies.
<b>People implications</b>	Careful planning is required to ensure that the process of the review does not negatively impact service delivery or morale. It is intended that the review process is collaborative by design.



## 1. Purpose / situation

The purpose of this paper is to update the Board on the commissioning of a Service Review programme within the Breast Screening Wales (BTW) screening programme. The primary aim is to enhance the effectiveness and efficiency of the screening services provided to the population of Wales.

The paper shares the Service Review Framework, which has been developed in collaboration with key Executive colleagues to ensure a comprehensive and well-rounded framework. Furthermore, the paper outlines the likely organisational resources required to support the review process, ensuring that all necessary elements are in place to facilitate a successful and thorough evaluation.

## 2. Background

BTW is an essential service dedicated to the early detection and prevention of breast cancer, providing screening services to women across Wales. The significance of this service is paramount, as early detection greatly enhances the chances of successful treatment and survival.

During the COVID-19 pandemic, the BTW programme was paused in compliance with public health guidelines to ensure the safety of both staff and participants. This interruption led to a backlog of screenings, necessitating additional resources from the Welsh Government to address and recover from the delays.

Recovery was achieved in July 2024. However, over recent months, it has become apparent that certain elements of the programme's performance and business delivery, including financial spend are not meeting the expected standards, and the service is working to address these areas.

Furthermore, the service has undergone external inspections and programme gateway reviews, which have yielded varied levels of assurance. This variability in inspection outcomes and governance assurance further highlights the need for a thorough review to ensure consistent and high-quality service delivery.

It is recognised that multiple external factors have impacted the delivery of our services, including challenges encountered during the deployment of the Picture Archiving and Communication System (PACS), where issues arose with the hardware supplied by the vendor.

To support the programme to deliver against its ambition of providing excellent public health services, the National Director for Health Protection and Screening



Services commissioned a review of the BTW programme. The primary purpose of this review is to ensure that BTW can continue to provide a high-quality screening service through the most effective and efficient operating model. This would additionally support the development of a review model that could be subsequently used within other screening programmes. Undertaking the review now would also enable the review to inform the development and roll out of the lung cancer screening programme.

### 3. Review Strategic Aims and Objectives

The review aims to ensure consistent quality in breast screening programme across the full pathway by systematically reviewing and understanding performance, identifying areas of excellent, good, acceptable, and sub-optimal practice and delivery, promoting adherence to standards, disseminating best practices, and fostering collaborative development across the service.

It is expected the outputs of the review will inform a series of steps and an action plan. This will be agreed post the review and any action prioritised will need to include assessment of impact and benefits realisation of actions.

#### Review objectives:

- i. To comprehensively review and analyse the performance of the current breast screening programme pathway, including end to end pathway performance, ensuring a deep understanding of factors affecting quality and identifying opportunities for improvement.
- ii. To review and strengthen strategic and operational governance structures across the entire screening pathway, ensuring they are clearly defined, effective, aligned with Public Health Wales' and Welsh Government strategic priorities and aligned with Public Health Wales' organisation design principles. This to include:
  - Governance, leadership and management interface between the programme and the leadership team for Screening Services Division (SLT), HPSS Directorate Management Team (HPSS DMT) and Public Health Wales
  - The identification, management and escalation of risks and issues
  - Performance tracking and management by the programme, Screening Services SLT and HPSS DMT
- iii. To rigorously assess compliance with national minimum standards, identify areas of variance, and actively support professionals in addressing gaps and enhancing the quality and consistency of service delivery and quality control as part of the quality management system (QMS).



- iv. To develop a prioritised service improvement plan based on evidence from performance reviews, standards assessments, and best practice and service user insights, ensuring targeted, measurable, and sustainable enhancements across the screening programme.
- v. To systematically gather, evaluate, and build expertise in best practices, ensuring effective dissemination and implementation across all screening programmes to drive continuous improvement.
- vi. To facilitate the sharing of insights, experiences, and current challenges across other screening programmes, contributing meaningfully to national dialogue and the evolution of service delivery and practice.
- vii. To test the tools and methodology of this review as a proof of concept for a scalable quality assurance and improvement model that can be adapted and applied across other national screening programmes / service delivery areas.
- viii. To identify areas of good practice and celebrate successes to support the development of a positive culture and sharing these with the programme and more widely across the organisation.

#### **4. Approach and Methodology**

The approach and methodology for this service review framework are designed to ensure a comprehensive and systematic evaluation of Breast Screening Wales. This review will incorporate a robust and evidence-based approach to assess the quality and performance of the service. Beginning with a thorough analysis of the current breast screening programme pathway, encompassing the entire end-to-end process. This will involve collecting and examining quantitative and qualitative data to gain a deep understanding of the factors affecting service quality. Key performance indicators (KPIs) will be identified and measured against national standards to highlight areas of excellence, good practice, and those requiring improvement.

##### **Proof of Concept**

The tools and methodology of this review will be tested as a proof of concept for a scalable quality assurance and improvement model in HPSS. It is hoped that this model can be adapted and applied across other national screening programmes and service delivery areas, ensuring a consistent approach to quality assurance and continuous improvement. The review team will be supported to develop and



evolve the methodology as the review progresses in order to fine tune the approach to the service delivery context.

### **Continuous Improvement and Best Practices**

A key objective of this review is to develop a prioritised service improvement plan based on evidence from performance reviews, standards assessments, and best practice insights. This plan will ensure targeted, measurable, and sustainable enhancements across the screening programme. Additionally, the review will facilitate the sharing of insights, experiences, and current challenges across other screening programmes, contributing to national dialogue and the evolution of service delivery and practice

### **Minimising impact on staff and service delivery**

Taking a “desktop and harvest first” approach, the methodology will incorporate insights from previous external inspections and audits. Recognising that these inspections have rigorous methodology and the programme has worked to act on recommendations, their findings will be integrated into the review to ensure a comprehensive understanding of the service's performance.

The review team will map and seek all organisational intelligence to support the review lines of explorations and then approach key personnel and stakeholders to supplement the desktop information with insights gained from semi structured interviews and observational visits. The use of survey to capture opinion will also be considered.

### **Service Review Framework**

The proposed Service Review Framework (Appendix 1) outlines the comprehensive review framework, developed with input from Public Health (PH) consultants and executive colleagues. This framework serves as the “anchor” for the review, providing a structured approach to evaluating the performance and quality of BTW.

The framework includes areas for exploration, key performance indicators, and criteria that have been drawn from national standards and collaboratively developed to ensure a thorough and objective review process. The insights and expertise of PH consultants and executive colleagues have been instrumental in shaping this framework, ensuring it aligns with best practices and addresses the specific needs of the service.

While this framework provides a solid foundation for the review, it is essential to recognise that the review team will need to identify and develop additional collateral to undertake the review effectively. This may include supplementary

data collection tools, stakeholder engagement strategies, and specific evaluation metrics tailored to the unique aspects of the service.

By leveraging the framework as the primary guide and continuously developing additional review collateral, the review team will be well-equipped to conduct a comprehensive and impactful evaluation of BTW.

### **The Review Leadership Team**

The Review Leadership Team will be co-led by the Assistant Director of Operations, Health Protection and Screening Services, and the Deputy National Director Health Protection and Screening Services. They will oversee a cross-organisation review team, which will be resourced from within existing capacity.

It is proposed that this team will include a senior member of the HPSS operations team from outside the Screening Services Division, who will act as a dedicated coordinator. It is requested that a cross organisation senior review team be convened which will constitute, the following senior management colleagues from across the organisation, a Public Health Specialist (external to HPSS), and members from Strategy and Planning Division, Nursing, Quality, Improvement and Governance Directorate, Finance Division, People and Organisational Development Directorate, and Data Digital and Knowledge Directorate.

Recognising that this review needs to be delivered from existing resources, except for a dedicated coordinator and project support provided by HPSS (external to Screening Services Division) it is acknowledged that these senior colleagues will need to accommodate this activity into their existing roles. We hope that the executive team will support the leadership team members to have the flexibility to identify relevant specialist resources from within their functional areas.

## **5. Next steps**

To ensure the successful initiation and execution of this comprehensive review, we recommend the following next steps:

- **Develop a Communication Plan:** It is essential to develop a comprehensive communication plan to share the proposal with all programme staff members. This plan should outline the key messages, communication channels, and timelines to ensure that all stakeholders are informed and engaged throughout the review process.
- **Convene the Senior Review Team Members:** The senior review team members should be convened by September 2025. This will involve identifying and confirming the participation of key individuals from various



specialist knowledge areas, ensuring that the team is fully resourced and ready to commence the review.

- **Provide Monthly Update Reports:** To maintain transparency and keep all stakeholders informed, the review team will provide monthly update reports to the Board Executive Team (BET). These reports will outline the progress of the review, any challenges encountered, and the steps being taken to address them.

## 6. Recommendations

The Board is asked to:

- **Note** and **take assurance on the** Commission of the Review by the Business Executive Team.
- **Consider** and **note** the allocation of resources required for the review.
- **Note** and **take assurance** on the adoption of the Framework proposed for the Review.