 <p> GIG CYMRU NHS WALES </p>	Iechyd Cyhoeddus Cymru Public Health Wales	Name of Meeting
		Board
		Date of Meeting
		26 March 2026
		Agenda item:
		4.3

Performance and Insight Report - February 2026	
Executive lead:	Angela Williams, Interim Executive Director of Operations and Finance
Authors:	Ioan Francis, Head of Performance Neil Stoodley, Interim Head of Finance
Contributors:	Directorate submissions approved by relevant Director
Approval/Scrutiny route:	Business Executive Team

Purpose
<p>Our refreshed Performance and Insight Report focuses on delivering actionable insights and assurance whilst identifying areas for further improvement across the following key sections;</p> <ul style="list-style-type: none"> ❖ <i>Governance and Accountability</i>, including: <ul style="list-style-type: none"> ○ People Governance; Financial Governance; Board and Corporate Governance; and Clinical Governance, Quality, Safety and Improvement ❖ <i>Service Delivery</i>, including: <ul style="list-style-type: none"> ○ Health Protection and Screening Services; Health and Wellbeing (<i>monthly</i>); Policy and International Health; Data, Knowledge and Research (<i>bi-monthly</i>) ❖ <i>Strategy and Delivery</i>, including: <ul style="list-style-type: none"> ○ Progress against our Strategic Plan Milestones, Strategic Change Programmes and Inequalities ❖ <i>Outcomes Measurement</i>, including: <ul style="list-style-type: none"> ○ Reporting against our IMTP measurement system indicators and developing a strategically aligned Evaluation Programme for 2025/26 onwards <p>The report is designed to be read in conjunction with the Performance and Assurance Dashboard.</p>

Recommendation:					
<table style="width: 100%; text-align: center;"> <tr> <td>APPROVE <input type="checkbox"/></td> <td>CONSIDER <input checked="" type="checkbox"/></td> <td>RECOMMEND <input type="checkbox"/></td> <td>ADOPT <input type="checkbox"/></td> <td>ASSURANCE <input checked="" type="checkbox"/></td> </tr> </table>	APPROVE <input type="checkbox"/>	CONSIDER <input checked="" type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
APPROVE <input type="checkbox"/>	CONSIDER <input checked="" 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"> • Consider and Receive assurance on the organisation’s performance and governance arrangements, progress against delivering its strategy including delivery/recovery of key services and programmes 					
<p>Link to Public Health Wales Strategic Plan</p> <p>Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.</p>					

This report contributes to the following:	
Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives
Summary impact analysis	
Equality and Health Impact Assessment	An Equality and Health Impact Assessment is not required. Equality and Health Impact Assessments will be completed as part of delivery of the specific actions within the Plan.
Risk and Assurance	Our Strategic Risks are detailed within Our Strategic Plan and progress reported in a separate Board paper.
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes All themes Governance, Leadership and Accountability
Financial implications	An update on the organisation's financial performance is enclosed and in the accompanying Finance Board Report.
People implications	An update on the organisation's people performance is enclosed.

Purpose

Our refreshed Performance and Insight Report focuses on delivering actionable insights and assurance whilst identifying areas for further improvement.

The Performance and Insight Report is designed to be read in conjunction with the [Performance and Assurance Dashboard \(PAD\)](#).





The PAD provides data visualisations, trend information and more detailed visual analysis on a full suite of performance indicators.

In addition to the Performance and Insight Report and the PAD, Public Health Wales also produces a Directorate and Divisional Dashboard (DADD) which provides a more granular level of detail and drilldown for directorates and divisions to be able to monitor and manage their performance against a number of performance indicators. The DADD does not form part of our performance reporting to Board.

This report also provides the mechanism for The Business Executive Team to **approve change requests** for our Integrated Medium Term Plan milestones. This is covered in section 3 of the report including a direct link to the change request PAD dashboard which contains further information about each change request submitted for approval.

Structure of The Report

The report is made up of the following areas:

	Section 1 Governance and Accountability	This section provides information and assurance for a number of areas key corporate accountability including People Governance, Finance Governance and Corporate & Information Governance
	Section 2 Service Delivery	This section provides information and assurance for the activities that our services carry out on a day-to-day basis including our Health Protection and Screening Services, Health and Wellbeing services, Policy and International Health and our Research, Data and Digital services
	Section 3 Strategy Delivery	This section provides information and assurance for the delivery of our strategic plan including IMTP Milestone Delivery , progress against our Strategic Change Programmes and updates for our six strategic priorities . The section also includes Inequalities .
	Section 4 Outcomes Measurement	This section provides information and assurance on our developing work on Outcomes Measurement , including reporting of IMTP measurement system indicators and developing a strategically aligned Evaluation Programme for 2025/26 onwards

Where available, each section comprises of a summary **performance indicator table**, a high-level **Overview** for each governance theme, focusing on compliance against our statutory, mandated or other key reporting requirements. Where required, governance themes may be supported by an **In Focus** section. This section aims to provide additional assurance to our Board where challenges in our performance have been identified, and the actions set out to address underperformance and drive improvement.

Enhanced navigation is provided throughout the report, and access to all governance themes can be made via the hyperlinked icons in the banner at the top of each page. In addition, access to relevant **In Focus** areas or additional documents and **dashboards within the PAD** is through the buttons accessible within the report. Examples of icons are provided below:



Performance update at Month 11 2025/26

This section focuses on key areas of delivery where we have seen, or continue to see, challenges in achieving required performance levels. The Executive Team and Board are signposted to the relevant section of the Insights Report for additional assurance. Areas of performance to highlight at month 11 2025/26 include:

- **Sickness absence** 12-month rolling rate remains above target at 4.5% in February, consistent with the previous month. In-month sickness absence has improved during the latest period, down from 5.1% to 3.9%. Long-term sickness absence continues to be the primary driver, accounting for 81% of FTE days lost, with short-term absence representing 19%. This mirrors national evidence from the CIPD Health and Wellbeing at Work Report 2025, which highlights that mental ill-health is the leading cause of long-term absence and a significant contributor to short-term absence across the UK workforce.

People and OD are providing focused 1:1 advice and case management support to managers. This includes targeted support for anxiety, stress and depression-related cases, alongside ongoing engagement with Trade Union colleagues to address workplace issues at an early stage. Further work is also underway to enhance benchmarking and trend analysis, including improved comparability with national data, to support more informed decision-making and targeted interventions. Further details including actions being taken forward to support reductions in absence levels are provided on page 6.

- **Freedom of Information Act** One FOI request was non-compliant from a total of 19 FOI requests received in January 2026. This out of compliance FOI request required consultation with third parties before releasing the information. A qualified exemption has been requested to apply which now requires a public interest test to take place. The deadline has therefore been extended to accommodate. Further information on FOI compliance including trend information is available on page 11.
- **Breast screening assessment waits within 3 weeks** (10.6%, down from 13.5%) remains below the 90% national standard during the latest period. Reading timeless has recovered in North Wales and is now within standard across Wales. Timeliness of assessment clinics in January was impacted by a reduced number of clinics in December and January, due to bank holidays, staff leave, and the need to rebook clinics following postal delays. There remains a clinical shortage in North Wales and lack of resilience of the surgical support which is impacting assessment capacity in the North, the backlog remains. Discussions are ongoing with Betsi Cadwaladr UHB.
- Timeliness of **Bowel Screening colonoscopy within 4 weeks** (18.8%, down from 28.5%) also remains below the 90% national standard during the latest period. Bowel Screening colonoscopy is a commissioned service from the Health Boards. As of 6 March 2026, the average waiting time for a screening colonoscopy was 7 weeks and 3 days (compared to 8 weeks and 2 days during the previous reporting period). The waiting time ranged from 4 to 13 weeks across the 14 screening centres (compared to 6-17 weeks during the previous reporting period). Average Specialist Screening Practitioner waiting time is 11 days which is within standard. To deliver improvements in colonoscopy waiting times, themes that were identified following collaborative discussions with Health Boards have been shared with Health Boards and recovery plans requested. A screening colonoscopy improvement project is being established. An accreditation assessment day planned for March 2026 has been postponed due to availability of candidate.

A summary of steps being undertaken to support improvements in performance across screening programmes are detailed on pages 18-24.

Strategic Plan - Requests for change

ANNEX A sets out the Strategic Plan milestone requests for change that were submitted in relation to our plan in month 11 for consideration by the Executive Team.

Conclusion

The Board is asked to:

- **Consider and Receive assurance** on the organisation's performance and governance arrangements, progress against delivering its strategy including delivery/recovery of key services and programmes

ANNEX A – Strategic Plan Milestones

Requests for change submitted for approval at month 11 2025/26

**For any milestone requesting a date change, we assume if approved, the milestone will report as 'green - on track' in the following month*

Directorate / Priority Area	Milestone	Current Status	Original Delivery Date	Request for Change Submitted for Approval	Cause, Impact and Next Steps
Research, Data and Digital <i>Enabling delivery</i>	Deliver beta of the HPSS system. (RDD_020)		31/03/26	Scope and date change to 19/07/26 Reason for RFC: Slippage of original deadline	<p>Cause: An updated delivery schedule has been approved by the DHP programme board. This has been used to re-baseline programme milestones.</p> <p>Impact: Completion of the DHP programme remains Jan 2028. Interim milestones (Beta, MVP, FSL) have been rescheduled and renamed. Beta is now Phase 1 (July 2026), MVP is now Phase 2 (Jan 2027), FSL is now Phase 3 (Nov 2027) and Maintenance/Handover is now Phase 4 (Jan 2028).</p> <p>Next steps: Whilst the revised delivery plan has been agreed, recommendation that the DCA remains 'amber' as there are still areas that need close attention for the programme to deliver as planned, specifically adoption and business change and benefits realisation.</p> <p>Timescales: Phase 1 is on track for delivery in July with all other phases also on track for planned delivery dates.</p>
Nursing, Quality and Integrated Governance <i>Enabling delivery</i>	Delivered the second year of the PHW nurse retention work within the HEIW programme. (NQIG_017)		31/03/26	Date change to 30/09/26 Reason for RFC: Resource issues	<p>Cause: This has been caused by the need to redeploy the Retention Lead to support the sexual health service for the foreseeable future and the reduction in hours for a fixed term contract post holder from 4 days to 2 days from 1st April 2026.</p> <p>Impact: Due to the cause, it will not be possible to deliver all actions relating to Year 2 of the Nurse Retention Work Plan by 31st March 2026.</p> <p>Next steps: An extension is required to complete this work during the 2026/27 financial year.</p>

Directorate / Priority Area	Milestone	Current Status	Original Delivery Date	Request for Change Submitted for Approval	Cause, Impact and Next Steps
Health Protection and Screening Services <i>Excellent public health services</i>	Operationally facilitated and enabled business transformation relating to digital solutions for eNOIDS, Tarian, SMS and Out of Hours e-roster and WEDINOS LIMS to deliver improved productivity across the Health Protection Division (HPSS_032)		31/03/26	Scope change Reason for RFC: Re-prioritisation	Cause: The SMS system will be superseded by DHPP and OOH e-roster project has been postponed until such time there is stability in the service. Impact: Reduction in duplication as SMS transitions to DHPP project ensuring future proof digital pathways. OOH e-roster project is pending stabilisation of the service Next Steps: Request to remove SMS and OOH e-roster from IMTP milestone. Proposed change: Remove SMS and Out of Hours e-roster from IMTP milestone.
Health Protection and Screening Services <i>Excellent public health services</i>	Introduced AI supported diagnostic pathways for faecal parasitology screening of enteric samples (HPSS_054)		01/03/26	Date change to 29/09/26 Reason for RFC: Awaiting funding approval	Cause: Unsecured funding from NHS Wales Performance and Improvement. Impact: No impact currently as this would have been a new development. Next steps: Re-engage with NHS collaborative.
Health Protection and Screening Services <i>Excellent public health services</i>	Worked with Welsh Government to finalise the All-Wales TB Action Plan (HPSS_072)		31/03/26	Date change to 29/09/26 Reason for RFC: External dependencies	Cause: The amber RAG rating is to reflect the delays with Welsh Government. Impact: We have provided them with information and offered to support the drafting of a Welsh Health Circular. Next steps: Welsh Government have stated that they have other priority steers from ministers at present and this is unlikely to be reviewed/actioned before the Senedd elections in May 2026.

Directorate / Priority Area	Milestone	Current Status	Original Delivery Date	Request for Change Submitted for Approval	Cause, Impact and Next Steps
<p>Health Protection and Screening Services</p> <p><i>Enabling delivery</i></p>	<p>Undertake an assessment of impact of HPSS evaluation and research publications (academic and other), including assessing approaches to increase impact of outputs to inform development of a directorate research strategy.</p> <p>(HPSS_078)</p>		31/03/26	<p>Date change to 29/09/26</p> <p>Reason for RFC: Slippage of original deadline</p>	<p>Cause: Delivery has been significantly impacted by lack of capacity within the directorate colleagues due to competing HPSS, PHW & national priorities.</p> <p>Impact: The lack of capacity has meant that colleagues have been unable to sufficiently engage in progressing this milestone.</p> <p>Next steps: Continued mapping of HPSS R&E workforce and areas of interest.</p> <p>Continue to develop internal HPSS metrics that can be tracked and monitored to better understand the work undertaken by HPSS R&E colleagues.</p> <p>We have developed a viable pilot model for standard academic metrics and need further time to develop and pilot the approach to capturing internal non academic impact.</p> <p>Continue to map approaches and assess how these can be utilised to increase impact and inform future HPSS research strategy (aligned with PHW research strategy).</p> <p>Strong initial conversations have been held with RDD colleagues, continue to build on these and utilise reporting mechanisms available centrally in addition to internal tracking of research publications.</p> <p>Targeted surveys are also planned to self-assess impact of publications.</p>

Directorate / Priority Area	Milestone	Current Status	Original Delivery Date	Request for Change Submitted for Approval	Cause, Impact and Next Steps
Operations and Finance <i>Enabling delivery</i>	Finalised occupation arrangements for CQ2 or alternative site. (OpsFin_001)		31/03/26	Date change to 30/11/26 Reason for RFC: Slippage of original deadline	Cause: Delays experienced with regard to reviewing service charging arrangements under the terms of the current PHW lease for CQ2. Impact: This has delayed the commencement of discussions aimed at determining potential future occupational arrangements at CQ2. Next steps: It is anticipated that the service charging arrangements will be resolved by year end and that dialogue can commence regarding potential future occupational arrangements.
Operations and Finance <i>Enabling delivery</i>	Increased the electric vehicle Infrastructure capacity at key sites across the Public Health Wales estate. (ROOpsFin_037)		28/02/26	Date change to 31/03/26 Reason for RFC: Slippage of original deadline	Cause: Delays experienced with regard to making framework award and Landlord at one of the proposed sites requesting a change in the installation design and configuration requiring amendments to PHW's lease. Impact: This has resulted in a delay of the commencement of works. Next steps: Installation at one site to commence during month 12. Installation at second site to be deferred to 2026/27 subject to funding availability.