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Joint Executive Team

Public Health Wales

5 June 2025



Agenda Item

Supporting Document

PART A - Year-end review

Organisational reflections on 2024/25

1. Achievements
2. Service change
3. Workforce
4. Equality, diversity and inclusion
5. Clinical and health protection services
6. Areas of concern, risks and mitigation actions
7. COVID-19 Inquiry and emergency preparedness
8. Financial position
9. Delivery against accountability conditions and remit letter 2024-25

- *ANNEX A: Summary of year-end achievements & WFGA*
- *ANNEX B: Performance & Insight Report 2024/25 Overview (including accountability conditions) & Performance Dashboard*

- *ANNEX C: Month 12 Finance Report*



Agenda Item

Supporting Document

PART B - Plans and timescales to deliver Ministerial expectations in 2025/26

Ministerial Priorities for 2025/26

1. Timely access to care
2. Population health and prevention
3. Building community capacity
4. Mental health and well-being
5. Women's health
6. Improving quality, safety, outcomes and values
7. Cabinet Sec Enabling actions
8. Digital and Data
9. Policy and International Health
10. Financial delivery
11. Plans to deliver expectation set out in the remit letter 2025/26

ANNEX D: Public Health Wales Response to Remit Letter and Financial Allocation for 2025/26



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PART A: Year-end review

Organisational reflections on 2024/25



Summary

- Everything we achieved in 2024/25 was driven by the collective efforts of our people
- Continued to demonstrate an unwavering focus on reducing health inequalities and ensuring that we deliver maximum value and impact for our population
- Delivered core public health clinical services such as screening, microbiology and health protection, while supporting the full range of public health functions system-wide (ANNEX B)
- Developed strategic route maps that set out how we will deliver our priorities to 2035 in order to achieve our strategic outcomes
- Completed 85% of year one IMTP milestones in 2024/25 and delivered our IMTP accountability conditions as detailed in part A
- Achieved a draft year-end revenue position of £195k under spent for 2024/25, delivering our statutory duty to breakeven over a rolling 3-year period covering 2022-25. Further detail can be found in ANNEX D
- Ranked 31st most inclusive employer and a Gold Standard employer in the Stonewall UK Workplace Equality Index and awarded Gold level with Distinction from Diverse Cymru as part of their Certificate of Cultural Competence
- Activities and achievements have supported the Ministerial Priorities (ANNEX B) and continued to work through the lens of the of the five ways of working as set out in the Wellbeing of Future Generations Act (ANNEX A)



Some Achievement Highlights (also Annex A)

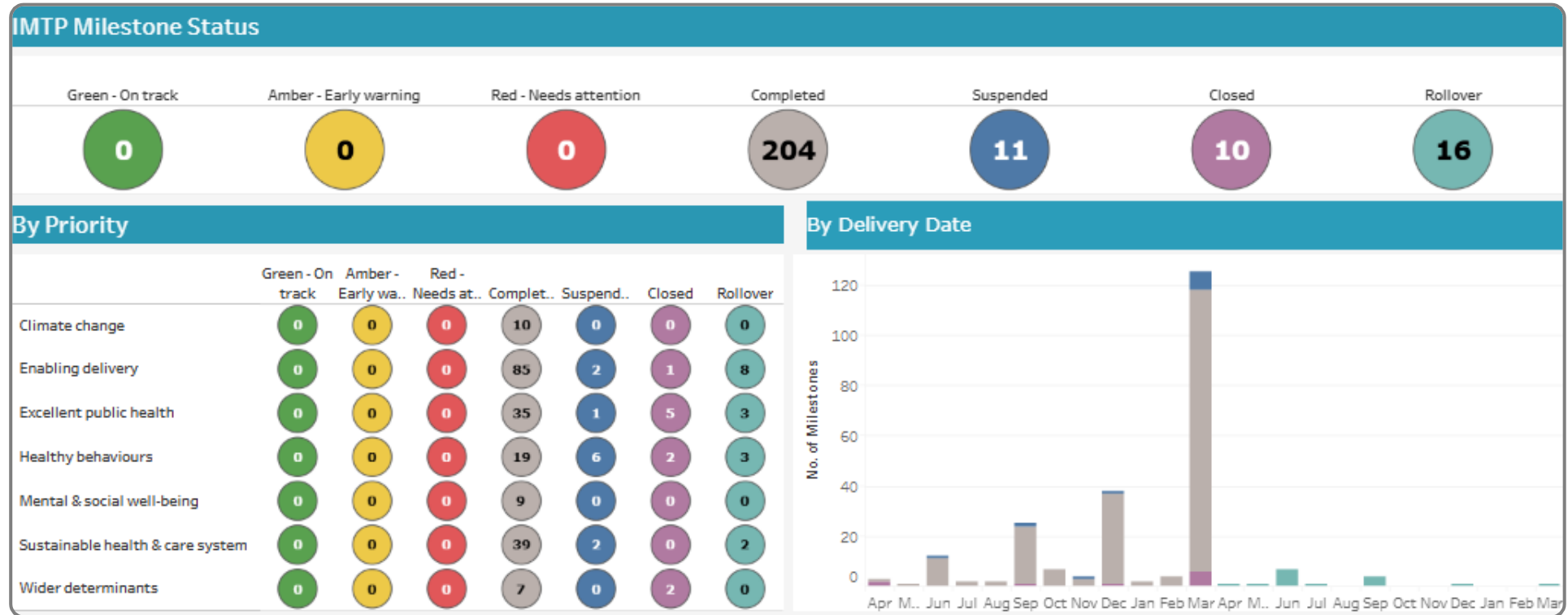
- **Bowel Screening** - Completion of Bowel Screening Wales Optimisation, offering screening for adults aged 50-74
- **Continued Response to Infections Diseases including Mpox** - Finalised processes for Mpox Clade 1 FFX contribution with four nations
- **Systems Leadership** - Co-produced HCPH framework, articulated approach to [Prevention Based Health and Care in Wales](#) and our [approach to reducing health inequalities in primary care](#)
- **International Health** - Supported Wellbeing and Foundational economies in Wales and supported WHO Wellbeing Economy Policy Dialogue hosted by WG
- **Published *Investing in a Healthier Wales: Prioritising Prevention*** - Focusing on key prevention interventions
- **Web Transformation** - Significant user-led web transformation including launch of new Healthy Working Wales
- **Workforce** - Significant focus on our people and encouraging future pipeline: hosted our first Careers Discovery Day with year 10 students to explore the diverse range of careers
- **Digital transformation** - Public Health Digital platforms and systems including Breast Cancer Screening cohort tool to replace NHAIS, alpha for Digital Health Protection, Discovery for Sexual Health Case Management System and delivered the PACS element of RISP as the first organisation to go-live on RISP.
- **Duty of Quality** - First Annual Quality Report was published to demonstrate how Public Health Wales complies with the Duty of Quality and the twelve standards



1: Achievements



Strategic Plan (IMTP) Delivery 2024/25



- **85%** of our IMTP milestones, including rollover actions from the previous year, were delivered.
- Further information can be found within ANNEX B - Performance and Insight Report 2024/25 Overview (pp. 39-47).



1: Achievements



Key Performance Indicator Summary (further information in ANNEX B)

Screening Services	Standard	12 Month Look Back	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	
Bowel Screening Wales – Waiting time for index colonoscopy (Health Board Delivery)	90%		14.7%	16.4%	14.8%	16.6%	14.6%	20.6%	30.2%	32.5%	19.7%	15.2%	20.5%	8.4%	
Cervical Screening Wales – Waiting time for colposcopy appointment (8 weeks) (Health Board Delivery)	90%		90.3%	86.1%	89.1%	94.1%	96.0%	95.2%	99.2%	99.7%	99.6%	97.9%	98.9%	98.8%	
Breast Test Wales – Assessment invitations (3 weeks)	90%		30.8%	11.6%	20.2%	21.4%	23.9%	4.4%	7.7%	28.3%	37.8%	26.3%	11.1%	23.1%	
Diabetic Eye Screening Wales – Coverage (12 Months)	80%		37.1%	37.8%	38.8%	40.0%	40.6%	40.4%	40.5%	40.9%	40.7%	40.6%	40.7%	40.3%	
Abdominal Aortic Aneurysm – Timely referral to elective vascular network (MTD)	100%		100.0%	50.0%	85.7%	50.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	50.0%	
Infection Services		12 Month Look Back													
Total Microbiology Rejection Rates	<5%		6.3%	5.1%	5.1%	5.2%	5.5%	5.2%	5.4%	5.4%	5.2%	5.4%	5.2%	4.9%	
Total Microbiology Diagnostic Sample Requests	*TBC		168,082	175,664	161,629	176,965	152,541	158,457	180,373	168,181	160,875	184,046	154,804	167,166	
Blood Culture - Collected to Incubation SMI <4hrs	<4hrs		67.5%	69.4%	67.0%	70.3%	69.3%	68.0%	70.3%	67.6%	66.3%	68.7%	69.2%	71.4%	
Blood Culture - Received (PHW Laboratory) to Incubation	*TBC		98.5%	99.5%	99.4%	99.4%	96.7%	99.7%	99.2%	99.8%	98.8%	99.9%	99.5%	99.7%	
Health Protection		12 Month Look Back													
Test and Post (STI self-sampling) – Test Turnaround Times	100%		100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Response times by priority - Urgent (<4 hours)	90%					97.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Response times by priority - High (<24 hours)	90%					93.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Response times by priority - Medium (<48 hours)	90%					94.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Compliance to surveillance reporting schedules	90%					92.0%	94.0%	98.0%	90.0%	98.0%	92.0%	92.0%	97.0%	100.0%	
Health & Wellbeing															
JUSTB – Number of Schools with 2-day training completed by month	35 Schools							2	6	4	3	5	2	7	
JUSTB – Number of Schools with 2-day training completed YTD								2	8	12	15	20	22	29	
Whole School Approach – Percentage of schools with an Action in Place (All schools)	80%		84%	72%	53%	56%	61%	61%	61%	65%	66%	74%	78%	83%	
Whole School Approach – Percentage of schools with an Action in Place (Secondary schools)	100%		99%	95%	84%	86%	88%	88%	88%	89%	89%	96%	97%	98%	
Help Me Quit – 4-week self-reporting quit rate (NTSS)	35%		93%	75%	90%	71%	74%	80%	78%	68%	80%	64%	72%	82%	
Research Data & Digital															
Number of Major Breaches	0 Major Breaches		Quarter 1			Quarter 2			Quarter 3			Quarter 4			
Percentage of publications without breaches	100%		0			0			0			0			
Percentage of user follow up to RDD products	100%		67%			67%			76%			76%			
Policy and International Health			20%			20%			20%			*TBC			
Indicators and targets to be developed where applicable															

N.B. Additional performance indicators reported on the Performance & Assurance Dashboard, including screening and turnaround times for infection services
Some indicators were not collected until later in the financial year.

Key: RAG Status

■ >10% outside target
 ■ Within 10% of target
 ■ Achieving target
 ■



2: Service Change – Portfolio Change



- Our portfolio of change reflects the key change programmes needed to achieve our strategy and system priorities
- Further information around the year-end delivery status can be found within ANNEX B - *Performance & Insight Report 2024/25 Overview (p.48)*

	Programme/ project	Key Deliverable in 24/25	Type of change	Start	Finish
Tier 1	Tackling diabetes together programme	Mobilised a programme approach to Tackling Diabetes, including further delivery of the All-Wales Diabetes Prevention Programme, completion of a digital diabetes discovery and Bundle of 8 care processes improvements	Public health	Dec-23	2028
	National Lung Cancer Screening Programme - business case development	Completed an interim scoping report for Welsh Government on a new Lung Screening programme in Wales	Public health	Dec-23	Mar-25
	Diabetic Eye Screening Transformation Programme	Implemented evening/ weekend service delivery, implementing GP e-referral and developing a flexible mid-Wales service model	Public health	Apr-23	2027
	Establishment of NHS Executive	Completion of hosting arrangements for the NHS Executive	Organisational	Jan-23	Mar 25
Tier 2	Records Management System	Rolled out records management solution across the organisation	Organisational	Jun-23	Mar-25
	Health Protection Systems Development	Submitted an Outline Business Case for a new digital health protection system for Wales	Digital	Jan-24	Mar-27
	Web Transformation	Delivered Discovery and Alpha stages for transforming Public Health Wales' web estate	Digital	Apr-23	Oct 27
	Newborn Screening Re-platforming – phase 1	Subject to support from DHCW, we will successfully re-platform Newborn Screening System in June 25	Digital	July 24	Mar 25



Delivering Excellent Services: Screening Services

- Diabetic Eye Screening Wales rolled out 40 new cameras for retinal photography that improve image capture quality enabling improved identification of patients with diabetic retinopathy
- Bowel Screening Wales programme successfully completed optimisation and now offers screening for adults aged 50-74
 - Waiting times for colonoscopy remains below 90% standard - colonoscopy capacity across Wales is challenged with work ongoing to hold strategic discussions with Health Boards to address performance issues
- Breast Screening programme has recovered following the temporary pause resulting from the COVID pandemic
 - Assessment invitations given within 3 weeks has not met standard over the last 12 months – impacted in part by equipment issues during implementation of the All-Wales PACS replacement programme resulting in a temporary inability to read images
- National Lung Screening interim report submitted to Welsh Government
- Implementation of new digital functionalities including cohorting components for breast screening, e-referral for diabetic eye screening and sharing of screening histories across the England-Wales border for cervical screening
- Partnership with Cardiff University established to carry out research to improve the outcomes of our screening services.
- Further detail including actions being undertaken to support improvements in performance available below and in ANNEX B - *Performance & Insight Report 2024/25 Overview (pp 20-25)*



Screening Services – Mitigating actions

Breast Screening Assessment Waits:

- Cross region working to support reading and arbitration to reduce waits with additional activity at weekends
- Participants local to Wrexham attending assessment in Llandudno due to long term surgical absence in Wrexham
- Working with NHS Exec cancer recovery team to describe and reduce time to treatment for breast screening pathway route including dashboard and planning tool with Performance and Assurance team to improve visibility of screening pathway.

Bowel Screening Colonoscopy Waits:

- Programme meets regularly with HB teams to monitor activity aligned with commissioned capacity and agree recovery plans. Recovery plan in place to address Cwm Taf waits for Specialist Screening Practitioner assessments – Programme and Swansea Bay supporting
- Escalation of Colonoscopy waits to HB via MD and CE routes
- Bowel Screening Specific dashboard and planning tool released to Health Board cancer tracking teams to improve visibility of screening route of diagnosis.

Diabetic Eye Screening Coverage:

- Active backfilling of cancelled clinic appointment slots to utilise all appointments. Implementation of new business rules to manage repeat cancellations and frequent non-attenders
- Implementation of new Mid-Wales Screening Team to ensure geographical coverage and increased capacity in Mid-Wales
- Scoping work as part of Transformation to take forward evaluation of new technology and modified usage of eye drops which would improve efficiency and reduce inequity.



3: Workforce



Workforce update - Detail around relevant performance targets can be found in ANNEX B

- Refresh of our People Strategy to ensure that we attract, retain, develop, and enable our people to deliver our Strategic Priorities
- Developed a strategic approach to employee engagement, which responds to the results of the NHS Wales Staff Survey, Medical Engagement Survey, Culture assessment and other inputs
- Developed more accredited Cultural Advocates, providing knowledge and developing skills to effectively support our culture work
- Evaluated 'Being Our Best', the behavioural framework we launched in 2023
- Increased the response rate to the NHS Wales staff survey, from 54% in 2023 to 60.5% in 2024 - built on results to inform targeted action
- Launched an updated workforce planning process. Outcomes are categorised into three broad areas - Recruitment and Retention; Learning and Development; and Planning for Change
- Established a clear vision outlining the function of job families within Public Health Wales
- Evaluated the pilot of our Leadership and Management Academy programme
- Jan Williams stepped down as Chair in May 2024. Nick Elliott was appointed as the Interim Chair until Pippa Britton became the substantive Chair from December 2024.
- Clare Jenkins commenced her term as Vice Chair from May 2024. Mohammed Mehmet (LA NED) stood down in September 2024 and Diane Crone (Universities NED) stood down in March 2025.
- Claire Birchall appointed to the substantive post of Executive Director of Nursing, Quality and Integrated Governance from August 2024.



Equality, diversity and inclusion

- Published our new Strategic Equality Plan for 2024-2028
- Non-Executive Director with a specific remit around Equality, Diversity and Inclusion
- Ranked 31st most inclusive employer and a Gold Standard employer in the Stonewall UK Workplace Equality Index
- Awarded Gold level with Distinction from Diverse Cymru as part of their Certificate of Cultural Competence
- Trained 22 volunteers from our Staff Diversity Networks in Recruitment and Selection to achieve greater diversity in the hiring process
- Recruited additional Welsh Speaking Staff to offer Welsh Clinical Consultations
- Six active staff diversity networks and established a new Staff Network for Neurodiverse colleagues
- Held events to raise awareness, raise the profile of our networks and offer support through education for all staff
- Targeted work to attract, recruit and retain people to reflect the communities we serve and a workforce which understands and advocates for diversity.
- Accredited as a Living Wage Employer
- 76% of staff have completed Diversity data within ESR, a continued increase from the previous year



5. Clinical and Health Protection Services



Delivering Excellent Services

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

Governance through QUOG



Health Protection

- Launched the Respiratory Syncytial Virus (RSV) vaccine programme across Wales
- Led the creation of new national standards for vaccine patient information and a repository for evidence and good practices
- Supported WG with drafting of the National Health Protection Framework and published key reports on drug-related deaths, blood-borne viruses, sexually transmitted infections, and air quality in Withyhedge
- Enabled the modelling of hospitalisations and mortality due to respiratory infections among care home residents, through collaboration

Infection Services

- Strengthened control measures through successful accreditation of ISO 15189 across 14 PHW diagnostic laboratory network
- Recognised by UKHSA Porton Down for successful implementation of a network-wide response to potential viral haemorrhagic fever
- Developed MPOX clade typing across Wales within four weeks of notification

Healthcare Associated Infections

- Supported implementation of the UK Antimicrobial Resistance National Action Plan (2024–2029) in Wales through close collaboration with WG, national oversight groups, and direct support to HBs and Trusts
- Supported outbreak management and epidemiological analysis through the Healthcare Epidemiology Network
- Delivered regular reporting on healthcare-associated and surgical site infections

NHS Safeguarding Service

- Continued its strategic role in coordinating the NHS Wales Safeguarding Network and publishing its annual report, sharing learning from quality improvements and innovations



6: Areas of Concern, Risks and Mitigations



Area of Concern	Risk	Mitigating Action
Service Delivery	Bowel Screening Wales. Wait times for colonoscopy are variable and unacceptably long owing to demand for endoscopy services.	Working closely with HB teams and their recovery plans. Escalation of issue through MD and CE route. Screening dashboard and planning tool (NHS Exec) shared with HB
Service Delivery	Breast Test Wales - national shortages of skilled clinical staff to undertake reading, arbitration and assessment clinics and this is mostly marked in North Wales	South and West regions supporting North with reading and arbitration and virtual radiologist support to assessment. Film readers, breast clinician and fellow in training in North.
Service Delivery	Diabetic Eye Screening Wales – delayed offer of appointment on one year recall pathway resulting in coverage not reaching standard due to lack of capacity. New referrals and two-year recall pathway not delayed.	Transformation programme. Active backfill of cancelled clinic appointments. New Mid Wales team to improve capacity. Mobile clinics for areas longest waits. Scope work to evaluate modified use of eye drops to improve efficiency
Financial	Non-recurrent funding risks associated with ongoing delivery of Health Improvement Programmes, COVID testing, Lung Cancer Screening	2025/26 allocations agreed. Discussion ongoing regarding recurrent funding. Submitted interim report on lung screening, awaiting outcome
System Delivery	Ability for system to shift focus to prevention	Supported Prevention Architecture work . System conditions plan for prevention focus developed and being implemented



6: Areas of Concern, Risks and Mitigations



Area of Concern	Risk	Mitigating Action
Digital	Large number of digital dependencies often with DHCW which has caused issues with our service improvement – particularly the CANISC replacement system and the availability of support for our Newborn Screening re-platform	Earlier identification of dependencies and earlier escalation of concerns within PHW for raising into DHCW
Digital	Audit Plus in its existing form comes to an end in March 2026	Working on ensuring we have full continuity of service, and our development needs are met
Workforce	Recruitment challenges to roles with scarce skills such as: Radiologists and Breast Clinicians.	Appropriate workforce plans in place
NHS Wales Performance and Improvement	Potential for significant re-structure and change	Plan being developed to ensure appropriate employee and Trade Union engagement as well as workforce requirements for 2025/26 and beyond.



6. Strategic Risks 2024-25



Risk ID	Risk Descriptor
1	Risk of: Widening gap in healthy life expectancy of population of Wales. Due to: Cumulative effects of socio-economic, environmental and wider public health challenges.
2	Risk of: Worsening health outcomes for the population of Wales. Due to: misaligned system-wide efforts and leadership and weaknesses in partnership working.
3	Risk of: The organisation failing to effectively engage with the public in relation to their health and wellbeing. Due to: Failure to build relationships with stakeholders, communities and our service users; not having or utilising tools and resources to support engagement; a lack of workforce commitment, skills and capacity; and failure to monitor and evaluate the impact of engagement.
4	Risk of: Worsening organisational health and an inability to recruit and retain high calibre staff, performance manage accountable officers in pursuit of strategic priorities, low staff morale and wellbeing. Due to: Lack of organisational leadership and governance, progress towards ideal culture, ability to engage employees.
5	Risk of: A sub-optimal organisational response to a public health emergency or incident and longer-term risks to public health. Due to: insufficient horizon scanning, forecasting, use of data/digital tools and planning/training/exercising for response.
6	Risk of: Failure to deliver excellent public health services on screening, infection and health protection and compliance with the Duty of Quality. Due to: Weakness in systems and processes, specialist workforce capacity and capabilities, and lack of innovation.
7	Risk of: Disruption to services and/or loss of confidential data in conjunction with a failure to exploit appropriate data to inform relevant public health actions. Due to: Cyber incident, other external factors, weaknesses in systems and processes, silo working and lack of strategic oversight of data outputs.



6. Strategic Risks 2025-26



Risk ID	Risk Descriptor
1	<p>There is a risk that: We fail to deliver our role to influence a system shift to prevention, reduce health inequalities and address determinants of health.</p> <p>Resulting in: We fail to have the impact required to reverse the worsening healthy life expectancy of the population of Wales. Wales fails to close widening gaps in health outcomes between our most and least deprived populations.</p>
2	<p>There is a risk that: We fail to deliver our contribution to excellent public health services for population health screening, infection, health protection and emergency response.</p> <p>Resulting in: Poor quality and unsafe services, sub-optimal population health outcomes for population screening and health threats, and a breach of legal duties on Civil Contingencies and Duty of Quality.</p>
3	<p>There is a risk that: we fail to effectively mitigate the public health impacts of climate change on the Welsh population</p> <p>Resulting in: Failure to prevent harm to the health of our population as a result of climate change, resulting in worse health outcomes and widening of health inequalities.</p>
4	<p>There is a risk that: The organisation could experience poor organisational health.</p> <p>Resulting in: a poor organisational culture with insufficient capability and capacity to perform and deliver.</p>
5	<p>There is a risk that: we fail to fully exploit digital and data to improve public health in Wales.</p> <p>Resulting in: poorer public health outcomes for the population of Wales.</p>
6	<p>There is a risk that: The organisation suffers loss of sensitive information and/or disruption to services.</p> <p>Resulting in: Poorer Public Health Outcomes, disrupted services and loss of trust in Public Health Wales</p>



Overview of 2024-25

- Continued to support the UK COVID-19 Public Inquiry by producing witness evidence, documentary evidence and oral evidence at Public Hearings against the 10 module areas
- Focused work at both Wales and UK levels to learn lessons from the COVID-19 response, implement recommendations from the COVID-19 Public Inquiry, and enhance planning and preparedness for future pandemics.
- Our emergency preparedness, resilience, and response efforts include the establishment of a 24/7 on-call service, coordination of responses to over 60 incidents, and the conduct of major national response exercises
- Recognised as part of the CONTEST Cymru governance structure and assessed the UK's preparedness for pandemics
- Developed a strategic route map to guide our planning, focusing on coordinated engagement with people in Wales, strengthening partnerships locally, nationally, and internationally, and supporting services to deliver outcomes effectively and efficiently
- Undertook a number of exercises including:
 - Internal Exercise ERIS (cyber security and significant digital disruption)
 - Exercise MpoX (internal) and Exercise Fad Felen (multi-agency)
 - Internal COVID-19 learning event



Finance

- Received an unqualified opinion on our 2023/24 annual accounts financial statements submission
- Delivered a £195k revenue underspend in 2024/25
- Small expenditure slippage of £75k against our discretionary and strategic capital allocations at year end. This increased to £113k when taking into account £37k net book value of disposals during the year
- PHW consistently delivered the PSPP target throughout the year and were ranked the number one organisation in NHS Wales for compliance across 2024/25
- Delivered year on year expenditure reduction on agency staff
- Further detail can be found in *ANNEX C - Month 12 Finance Report*



Accountability Conditions 2024/25

- Delivered against our accountability conditions for 2024/25. Further information available in ANNEX B (*pp.49-52*)

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;
- Continue to support primary care developments and the prevention agenda;
- Maximises contribution to the achievement of the Six Goals programme, particularly goals 1, 2 and 6:
 - 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;
- Deliver in line with the Mandate Letter, achieving delivery of the key areas identified



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PART B: Plans and timescales to deliver ministerial expectations in 2025/26



1. Timely access to care

Quality and Standards

- Transition to new UKAS Quality Standards
- Implementation of fit-for-purpose structures (e.g., Virology Centre)

Screening and Diagnostics

- Expansion and optimisation of bowel screening (lowering age and FIT sensitivity)
- Development of a lung cancer screening programme
- Introduction of the ULCER diagnostic panel for STIs for rapid detection and enhanced timely surveillance across a wider population.
- Implementation of LIMS 2 for infection services and screening

Infection Control and Antimicrobial Resistance

- Alignment of HARP programme with UK National Action Plan (NAP) 2024–2029

Health System Infrastructure

- Regional structure realignment including Rapid Hot Labs
- Implementation of Population Health and Care in Wales framework

Equity and Access

- Evidence-based approach to waiting list pressures with an equity lens
- Delivery of a refreshed Screening Equity Strategy to ensure that everyone in Wales has equitable access and opportunity to take part in screening when they are eligible.



2. Population health and prevention

Policy and Advocacy

- Publication of 'Investing in a Healthier Wales: prioritising prevention'
- Published evidence on licensing as a public health intervention
- Supported Food Regulation legislation and tobacco legislation
- Supported revision of Healthy Eating Schools Regulations
- Finalised the All-Wales TB Action Plan
- Working with Welsh Government to support development and implementation Health Impact Assessment regulations
- Supported Single Use Vapes Ban

Health Behaviour Change and Harm Reduction

- Implemented vaping cessation service model and completed action plan to reduce smoking harms
- Launched gambling harm reduction programme; research on gambling attitudes and beliefs
- Enhanced understanding of substance use trends and harms – whole system needs assessment led by system wide group

Children, Families and Schools

- Delivered a framework for a whole school approach to health and wellbeing
- Published Every Child resources for families with young children

Partnerships and System Support

- Developed recommendations to support local and regional partnerships in reducing poverty
- Coordinated AWDPP scale-up for full population coverage

Data, Evidence and Modelling

- Developed disease prevalence and risk factor modelling and monitored progress on disease elimination strategies
- Disseminated data and planning tools to support inclusion health
- Progression of climate surveillance work through national and international engagement



3. Building community capacity

Primary and Community Care Transformation

- Evaluation and monitoring of the Primary Care Model for Wales
- Strategic leadership and support for primary care system development
- Delivery of the 2035 vision for sustainable health and care
- Diabetes Peer Advocate/Champion Recruitment
- CAMHS Pathway Review

Workforce Development and Capacity Building

- Strengthening skills and competencies in primary and community care
- Implementation of Making Every Contact Count (training and primary care workforce rollout)
- Joint planning with HEIW to embed prevention in the workforce
- Advised WG Vol Sector Team on Vol Sector outcomes for health

Inclusion Health and Equity

- Piloting of Safer Surgeries and Prison Health Competency Framework
- Action on social prescribing and inclusion health services

Prevention and Public Health Integration

- Mobilisation of partners for CVD Prevention Delivery Plan
- Implementation of the Prevention-Based Health and Care (PBHC) action plan

Data, Evaluation and System Learning

- Development of Key Indicators and dashboards for clusters
- Strengthened monitoring and evaluation across primary care initiatives



4. Mental health and well-being

Mental Health Support for Children and Young People

- Joint work with the Strategic Programme for Mental Health on service needs and high-value pathways
- Delivery and planning of the Whole School Approach to mental and emotional wellbeing
- Healthy Whole School Day Collaboration with Welsh Government, Estyn and Directors of Education to improve mental health and well-being in schools.

Inclusion and Community Wellbeing

- Guidance and tools for creating inclusive, well-being promoting community activities
- Engagement with under-represented groups to improve access to mental well-being services

Policy and Strategy Implementation

- Support for the National Mental Health and Well-being Strategy
- Agreement on shared actions with stakeholders to promote mental health equity
- Supporting reviews of drug services for 2 HB areas
- Public Service Board training on wider determinants and prevention

Trauma informed approaches

- Implementation of Wales Trauma-informed Framework mobilising action across sectors in Wales



5. Women's health

Public Health Services

- Implementation of MRI surveillance for women at very high risk of breast cancer
- Ongoing development of self-sampling in Cervical Screening Wales to improve uptake and equity
- Introduction of electronic test requests for cervical screening
- Development of a new Cervical Screening Wales Audit of Cervical Cancer (CSWACC) database
- Delivery of postal service for testing of sexually transmitted infections, with year-on-year increase in uptake

IMTP Commitments

- Educational materials to support knowledge and learning of Menstrual Health.
- online availability of reliable information on contraception
- Exploring what preconception health means to health care professionals, and the public how we influence and improve that.
- Evidence based high quality information on pelvic health and perinatal health supporting an NHS Wales women's health website.
- Expert leadership supporting VAWDASV and sexual violence priorities, including gender-based harassment in public spaces and women's health needs in justice system

Women's Health Fund (CNO Bid)

- Service development: designing and delivering multiprofessional e-learning training on a holistic approach to postnatal contraception with embedded evaluation and coproduction.
- Systems leadership training for women's health - to deliver a series of workshops to the clinical regions



6. Improving quality, safety, outcomes and values

Duty of Quality and Candour

- Continue the Self-Assessment Process and against the Health and Care Quality Standards with the creation of a 'STEEEP' dashboard
- Finalise a digital Quality Impact Assessment (QIA) tool and embed into business as usual
- To refresh our organisational approach to learning and align to quality improvement work
- Continue to refine the refreshed format of the Quality Safety & Improvement Committee amplifying the experiences of our service users

Outcomes

- Agreed our measurement system which connects our strategic ambitions with the actions that PHW will take to deliver our strategy by 2035, ensuring we capture our impact
- Aligned the outcomes we have set for each strategic priority with our updated key performance indicators
- Aim to prioritise the evaluation of key elements of our plan
- Clear line of sight will enable us to measure our impact and value to the people of Wales and the broader public health system



7. Enabling actions

- **Digital and Innovation** - Our Digital and Data Strategy sets out our alignment with our organisational strategy and key external strategies for digital and health, including from NHS Wales and Welsh Government. We are also looking at how we improve the transparency of our performance data
- **Workforce Planning and Wellbeing** - Developing an integrated approach to workforce planning which encompasses the Strategic Priorities and Job Families. Joint action with HEIW for NHS Workforce Wellbeing
- **Research and Development** - Developing and implementing a research and evaluation programme focused on the priorities for evidence needs of government and users
- **Infrastructure, Capital and Estates** - Prioritised requirements for 25/26 and refreshed our 10-year capital plan
- **Financial Planning, Value and Sustainability** - Financial plan sets out approach to delivering a breakeven position, while improvements to our measurement system will strengthen how we assess our impact and value to Wales and public health
- **Welsh Language** - Supporting the use of the Welsh language and bilingual careers
- **Turning Strategies into Action** - Implementing our strategic route maps that set out how we will deliver our 2035 ambitions for each of our priorities



8. Digital and Data

- Public Health Wales is fully committed to modernisation of its services through digital and data modernisation. This is both through delivery of national programmes, delivery of programmes to benefit the whole system and local initiatives.
- For 2025/26 our core activities are:
 - After delivery of RISP in March 2025, we are fully committed to our part in the delivery of the Laboratory Information Management System
 - We are working closely with the NDR team as we plan to have migrated all our analytical work to the NDAP part of the NDR by March 2027
 - Re-platforming of Newborn Screening System by June 2025. This is one of our biggest cyber risks and will also significantly improve service delivery and provide us with a flexible platform to develop for the future.
 - Subject to funding, be on track for delivery of Digital Health Protection System and Lung Cancer screening
 - Develop a programme of work to better understand how digital can be used to support Health Improvement
 - Have lowered our cyber risk by November 2025
 - Increased transparency of our performance data
 - Continuing our programme of work on inequalities reporting



9. Policy and International Health

- Use behavioural science and international partnerships to drive quality and collaboration
- For 2025/26 we will:
 - Continue to support wellbeing and foundational economy in Wales and globally
 - WG and WHO MOU delivery through policy dialogue and Deep Dive on Wellbeing Economy
 - Deliver our International Health strategy
 - Provide International Health Coordinating Centre support to NHS Wales
 - Undertake International Health Horizon Scanning and produce reports
 - Develop and share opportunities, tools and resources
 - Continue to support growth in behavioural science capacity, skills and utilisation across public bodies in Wales
 - Establish approaches to deploying behavioural science in priority areas to optimise quality in health care
 - Support implementation of Wales Trauma-informed Framework and Wales without violence strategy
 - Establish a climate change surveillance system that aligns with public health priorities, ensuring robust data collection to monitor climate risks and health impacts.



10. Financial Delivery

- Public Health Wales has submitted a breakeven financial plan for the period April 2025 – March 2028.
- Delivery of £1.308m green RAG-rated cash releasing savings contributing to our breakeven plan.
- Capital plan includes £1.7m discretionary allocation – increase of £0.120m from previous year, approved strategic capital funding for Year 1 of the DESW Van Replacement Programme plus approved bids against the Targeted Estates Fund. Capital bids continue to be progressed for items not yet approved.
- Anticipating delivery of all statutory financial targets including revenue, capital and Public Sector Payments Performance.
- Key financial risks highlighted under Areas of Concern on slide 15.
- Robust financial management arrangements in place to ensure delivery of financial plan and allow early identification and mitigation of any deviations from plan. Our effective financial management approach has enabled the organisation to consistently deliver its financial breakeven requirement across previous years.



11. Remit Letter 2025-26

- 127 core responsibilities/deliverables for 2025-26 are set out within the letter
- Our Strategic Plan (IMTP) has been informed by the priorities set for NHS Wales by the Cabinet Secretary for Health and Social Care and our Remit Letter
- Includes the delivery of core public health clinical services such as screening, microbiology and health protection, along with our wider role across the breadth of public health functions.
- Letter sent to Welsh Government on 7 March 2025, confirming our broad support for most objectives set out within the Remit Letter
- However:
 - A small number of areas where further discussion/confirmation was required
 - There are a small number of actions that are subject to approval of business cases, or other funding arrangements, by the Welsh Government.
- A high-level summary of our Remit Letter delivery included within ANNEX D



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i greu Cymru iachach*

**Working together
for a healthier Wales**