 <p> GIG CYMRU NHS WALES </p>	Iechyd Cyhoeddus Cymru Public Health Wales	Name of Meeting Board
		Date of Meeting 28 May 2026
		Agenda item: 4.3

Performance and Insight Report - April 2026	
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Contributors:	Directorate submissions approved by relevant Director
Approval/Scrutiny route:	Business Executive Team

Purpose
<p>Our 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 <p>The report is designed to be read in conjunction with the Performance and Assurance Dashboard.</p>

Recommendation:					
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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
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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.
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Risk and Assurance	Our Strategic Risks are detailed within Our Strategic Plan and progress reported in a separate Board paper.
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Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes
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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.
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People implications	An update on the organisation's people performance is enclosed.
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Purpose

Our 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 1 2026/27

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 1 2026/27 include:

- **Sickness absence** 12-month rolling rate remains above target at 4.64% in April, in line with levels for last year. In-month sickness absence has improved, down from 5.2% to 3.8%. The trend over the past 24 months is for a gradual increase in the overall Trust sickness rate. In particular, Health Protection and Screening Services continues to experience higher long-term sickness than other parts of the organisation. Given the high number of staff employed in the directorate, this contributes significantly to the organisation failing to meet this target.

People and OD continue to support the management of long-term absences, providing advice to managers and attending absence review meetings, supporting with early Occupational Health referrals or other interventions. Managing Attendance at Work training continues to be delivered monthly to those with People Management responsibilities with signposting to HR Clinics for case specific advice. A new Workplace Adjustment Passport has been launched, making it easier for employees to access the support they need and for managers to confidently provide this.

- **Staff appraisal** compliance has dropped below the 85% target for the second successive month, following a period of consistently achieving target levels throughout the past year. People and OD is currently below target at 79.1%, with Health Protection and Screening Services at 77.4%, followed by Board and Corporate at 45.8%. Whilst compliance for Board and Corporate Governance is showing as significantly below target, assurance has been provided that appraisal meetings have taken place and are in the process of being recorded on the ESR system. It is therefore anticipated that Board and Corporate will be above target by the next reporting period.
- Sixteen **moderate harm or above incidents** were closed in April. One of these incidents was a Duty of Candour incident which occurred in Infection Services. In addition, 14 of these incidents were for the Cervical Screening Wales Audit of Cervical Cancer (CSWACC) incidents identified and reported in March 2026. These incidents do not trigger the Duty of Candour as they occurred before 1 April 2023, however they have been managed with the support of the Putting Things Right Team.
- One **major breach** was reported in our statistical and analytical publications during the latest reporting period, relating to early publication of a press release for Cancer Survival Official Statistics publication. Actions are underway with Communications colleagues to address the issue and prevent a repeat of this error.
- Delivering improvement in achieving national standards across parts of our **screening programmes** is a key Trust priority. **Breast screening assessment waits within 3 weeks** and **Bowel Screening colonoscopy within 4 weeks** remained some way short of the respective 90% national standard. Progress for Breast Screening assessment waits have shown improvement over the past two months, currently at 50% in April. **Diabetic Eye Screening** performance in respect of offering appointments to eligible patients has remains significantly below target.

Performance improvement plans have been created and adopted for each of these three operational areas with further detail provided on pages 23-25 of the Insights Report. Whilst strengthened governance and monitoring arrangements have been introduced, further work will be undertaken to translate the actions to be delivered in those plans into agreed performance trajectories. A small team drawn from different departments across the Trust has been created to support this work.

Work is also underway to develop strengthened reporting templates to provide the necessary level of assurance to Executive and Board colleagues. Whilst the new approach was initially anticipated to be implemented from month 1, discussions between the performance team and Health Protection and Screening Services colleagues are ongoing prior to final approval, with the aim of launching in month 2.

Strategic Plan - Requests for change

ANNEX A sets out the Strategic Plan milestone requests for change that were submitted in relation to our new plan in month 1 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 1 2026/27

*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
Health and Wellbeing <i>Promoting healthy behaviours</i>	Delivered recommendations for evidence-based approaches to licensing of tobacco and nicotine that reduce harm and advocated for their implementation. (HWB_115)		30/03/27	<u>Close milestone</u> Reason for RFC: Duplication	<u>Cause:</u> Duplication of milestone HWB_195. <u>Impact:</u> None, already in IMTP for 2026/29. <u>Next steps:</u> N/A.
Health and Wellbeing <i>Promoting healthy behaviours</i>	Deliver an action plan to support vulnerable populations to stop smoking. (ROHWB_011)		31/12/26	<u>Close milestone</u> Reason for RFC: Duplication	<u>Cause:</u> Duplication of milestone HWB_193. <u>Impact:</u> None, already in IMTP for 26/29. <u>Next steps:</u> N/A.