



GIG  
CYMRU  
NHS  
WALES

Perfformiad  
a Gwella  
Performance  
and Improvement

# Annual Assurance Statement 2025-26

Public Health Wales

Quality, Safety and Improvement Committee

4 June 2026

# Introduction

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NHS Wales Performance and Improvement (NHS P&I) operates as a bridge between Welsh Government and NHS Wales to hold the system to account and help it improve.

Delivering these two core missions will play an important role in making our healthcare system fit for the future and drive improvements in quality and safety. This will result in better and more equitable outcomes, improved access and patient experience, reduced variation, and improvements in population health.

Public Health Wales (PHW) hosts NHS P&I on behalf on Welsh Government, providing core support services and facilities to enable smooth running. These are represented in the hosting agreement and five service schedules.

The allocation of annual budget, setting of objectives, work plan programmes and oversight of the operating model of NHS P&I is the responsibility of Welsh Government.

# Organisational Change

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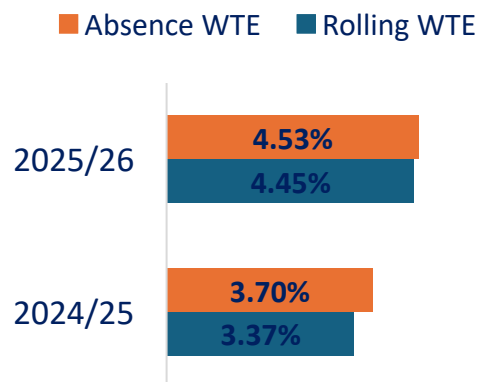
There has been several changes to structure in 2025-26 starting with the appointment of the Managing Director, a recommendation of the Ministerial Advisory Group report in 2025.

To support effective delivery a rapid understanding of workforce composition was undertaken to inform the design of a new Senior Director Team structure with recruitment concluding in April 2026. The structure is included at Appendix 1.

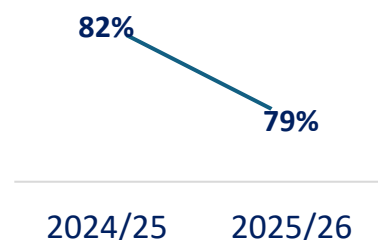
The Workforce Delivery Unit remains an ambition of Welsh Government and was outlined as an area of development in the 2026-27 NHS P&I remit letter.

# Compliance – Workforce

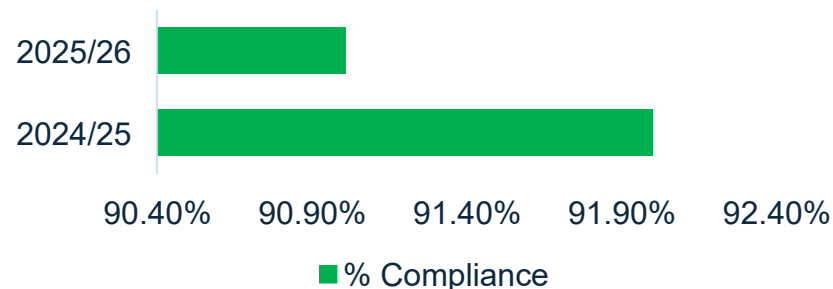
## Sickness Rate



## Percentage of staff with Appraisals



## Statutory and Mandatory training

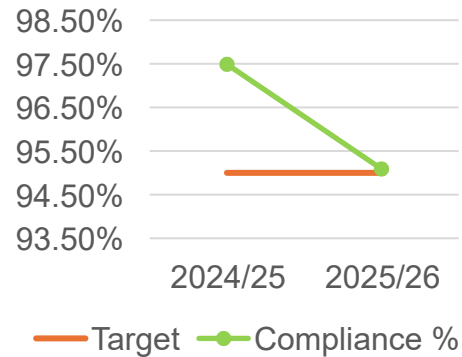


NHS P&I has worked to deliver on all compliance requirements:

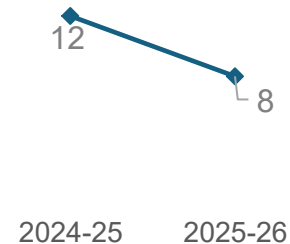
- 79% of NHS P&I has a signed off Personal Appraisal Development Review ('PADR'), which is a slight reduction on last year. NHS P&I will always strive for 100% compliance, and the compliance rate is reflective of the agreed annual cycle and is expected to rise in line with annual closure reporting in April.
- As at 31 March 2026, compliance with statutory and mandatory training was 91.01%. This remains broadly consistent with last year.
- Sickness has an annual rolling average of 4.45% which is higher than the national target of 3.25%. The growing absence rate is attributed to the large amount of ongoing change experienced since 2023. Sickness is reported via a monthly POD report with episodes logged on ESR and return to work interviews held in line with the Managing Attendance policy.

# Compliance – Financial, procurement and counter fraud

## Public Sector Pay Policy



## Procurement breaches



The year-end financial outturn for NHS P&I was an underspend against allocation of £9.167m. This position represents a movement from the forecast by a further £302,000 underspend. Under the terms of the establishment agreement, allocation has been drawn down to cover actual expenditure incurred, so there is no repayment of Welsh Government allocation to process.

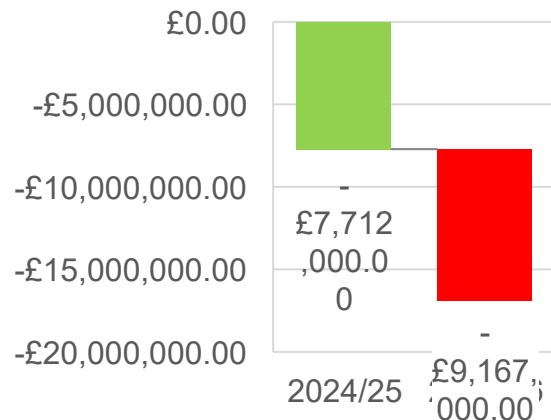
NHS P&I have achieved a 95.09% against the Public Sector Pay Policy compliance target of 95%.

There were 8 procurement breaches in year, a reduction on last year, all were issues a letter from the Assistant Director of Corporate Governance and Business Support and each accountable National Director provided details of the learning and the actions taken to ensure there is no repetition.

All functions are aware of the Policies and Standard Operating Procedures of Public Health Wales; this is included in staff induction and a range of SharePoint resources and supporting local processes have been introduced to support the overarching controlled documents including an asset register, software asset register and an agreements register, which is reported to Audit and Corporate Governance Committee on a bi-annual basis.

There have been two dedicated sessions on counter fraud with the wider staff via the Operational Leadership Forum and the Business Leads Group.

## Financial Outturn position



# Governance Arrangements

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## General Update

Work has continued to develop the governance arrangements in support of the hosting agreement in 2025-26.

The most substantial change has been the appointment of the Managing Director which has meant a transition of reporting and oversight arrangements for both Senior Leadership Team members and the Senior Leadership Team as a whole.

The following meetings were discontinued:

- Month Welsh Government EDT/ NHS P&I SLT meetings
- Monthly Business Meetings

From January 2026 informal Weekly SLT transitioned to a formal weekly decision-making forum chaired by the Managing Director. The Managing Director attends the weekly Welsh Government Executive Director Team meeting, reporting on any necessary escalations.

In regard to the hosting agreement, the Managing Director and Assistant Director of Corporate Governance and Business Support met with the CEO of Public Health Wales and wider members of the relevant leadership team to monitor compliance and address any risks or escalations as per the hosting agreements.

## New groups

A weekly People Panel is chaired by the Managing Director to provide effective oversight and management of the establishment, approve working from abroad requests and review additional people related decision making e.g Voluntary Early Release Scheme.

The Monthly Integrated Performance Insights Group has been established to support the delivery of the NHS Wales Operating and Accountability Framework.

A Monthly Planning and Delivery Group has been established to support the delivery of the NHS P&I Annual Plan and respond to the emerging needs of the system as a result of the performance accountability framework meeting.

The current structure is included at appendix 2.

# Annual Audit Summary 2025-26

Key

Not started

Underway

Complete

Audit Progress	Summary Count		
Summary	Action complete	Action on target	Grand Total
Grand Total	2	8	10

Audit 2025-26 Plan	Original Procurement Delivery Quarter	2025-26 Progress
Hosting Arrangements	Q2	Reasonable Assurance – Actions complete or on track
Risk Management	Q3	Reasonable Assurance – Action on track
Financial Management	Q3	Substantial Assurance – No Actions
Procurement	Q4	Audit underway

## Summary:

The NHS P&I Annual Audit Plan is presented as an appendix to the Public Health Wales annual plan at the Audit and Corporate Governance Committee by NHS Wales Shared Services Partnership. There were two audits within the year that were undertaken for each organisation, procurement and financial management to review the effectiveness of delivery arrangements, there were no elevated areas of concern.

Of all the completed audits there were no surprises or elevated areas of concern for escalation. The final audit for 2025-26 is in the final stages.

# Governance Arrangements

Area	2025-26 Update	2026-27 Plan
<b>Risk</b>	<p>There has been a significant focus on risk and assurance in 2025-26 delivered via the risk and assurance development programme plan, this was further enhanced as a result of the audit actions identified.</p> <ul style="list-style-type: none"> <li>• Risk Management Audit undertaken – reasonable assurance found with a clear set of actions</li> <li>• Review of strategic risks</li> <li>• Review of NHS P&amp;I Risk Appetite</li> <li>• Risk reporting cycle established with directorate business leads</li> <li>• Consistent risk review percentage across the year</li> </ul>	<ul style="list-style-type: none"> <li>• Strategic Risk quarterly reporting to SLT, bi-annual reporting to Welsh Government</li> <li>• Continue corporate risk reporting cycle to SLT.</li> <li>• Deliver the risk and assurance development plan</li> <li>• Establish Risk Management Group</li> </ul>
<b>Estates, facilities and health and safety</b>	<p>Throughout the year NHS P&amp;I have been undertaking an estates review including usage levels and staff requirements to promote effective hybrid working. To support this the Business Leads Group and Operational Leadership Forum have supported the development of a draft estate strategy.</p> <p>There has also been work throughout the year with the Public Health Wales facilities team to review incidents and develop a local process to ensure compliance with relevant health and safety responsibilities.</p>	<p>The year ahead will begin with engagement on the draft estate strategy in conjunction with the Organisational Change Phase 2. The draft incident review process will also seek staff feedback and be published by the end of Q1.</p>
<b>Products, policies and controlled document implementation</b>	<p>Appendix 3 contains a list of the products and controlled documents introduced within the year to support effective governance.</p>	<p>There are several products in development designed to both enhance staff experience but also aid staff in effectively delivery of transformation.</p> <ul style="list-style-type: none"> <li>• Starters, movers, leavers app</li> <li>• Booking app</li> <li>• People Experience Framework (with PHW)</li> <li>• Renewed Corporate Induction</li> </ul>

# Statutory review

Area	2025-26 Update	2026-27 Plan
<b>Well-Being of Future Generations (Wales) Act 2015</b>	The requirements of the Act have been recognised in the development of the NHS P&I Annual Plan. A Strategic Assessment Tool has been developed to consider not only the WBFGA but also wider strategic responsibilities.	<ul style="list-style-type: none"> <li>• Testing and deployment of the tool.</li> <li>• Guidance and support for staff via the intranet.</li> </ul>
<b>Health and Social Care (Quality and Engagement) (Wales) Act 2020</b>	NHS P&I continue to provide national support for assurance, oversight and compliance with the act to Welsh Government. Internally the Operational leadership forum have been leading the work to develop the NHS P&I Quality Management System which is represented by the draft Governance Assurance Framework.	<ul style="list-style-type: none"> <li>• Publish the Governance Assurance Framework.</li> <li>• Continue to the support the national Quality and Safety agenda as per the NHS P&amp;I remit letter.</li> </ul>
<b>Civil Contingencies Act 2004</b>	A review of business continuity planning arrangements was undertaken and a draft crisis management and business continuity plan developed. There have been delays due to capacity within the central team which were reported to the Audit and Corporate Governance Committee. However, there have been extensive discussions with directorate leads to test draft plans with the aim of publishing the complete plan in Q1 2026-27.	<ul style="list-style-type: none"> <li>• Publish crisis management and business continuity plan</li> <li>• Design plan testing arrangements</li> <li>• Establish monthly review arrangements of local plans</li> </ul>
<b>Equality Act 2010 (Statutory Duties) and the (Wales) Regulations 2011</b>	Examples of activities and ways of working are included in PODC report (April 2025).	Protected characteristics and other equality considerations are integrated into plans and ways of working. Activities will include engagement of, and co-production with, people with lived or learnt experience of specific health conditions; design of communications and training materials to maximise accessibility; coaching and training for staff. The developing People Experience framework will support compliance with the Equality Act.
<b>Social Partnership and Public Procurement (Wales) Act 2023</b>	NHS P&I designs and develops strategy with input from a wide range of stakeholders including staff side representatives, professional bodies and regulators. NHS P&I also follows the national procurements regulations and works with NWSSP to deliver socially responsible procurement, putting environmental, social, economic and cultural well-being as the primary criteria.	NHS P&I will continue to engage with key stakeholders in the development of strategy and undertake socially responsible procurement via NWSSP. Trade Unions have been identified as a key partner for the implementation of the estate strategy and are involved in the Organisational Change Phases.
<b>Welsh Language (Wales) Measure 2011</b>	There were two complaints and a concern related to the Welsh language in 2025-26 the corporate team have led the development of an NHS P&I Welsh Language Action Plan 2026-27 with support from the Business Leads Group, Operational Leadership Forum and PHW Welsh language team. The plan aims to address the findings of the concerns and complaints to better equip staff and deliver a bilingual organisation and service provision in Wales. To support the organisation a Welsh Language Compliance Officer post has been agreed by the NHS P&I People Panel.	The Welsh Language Action Plan 2026-27 will be delivered by the Head of Compliance and Continuity. Recruit the Welsh Language Compliance Officer post.



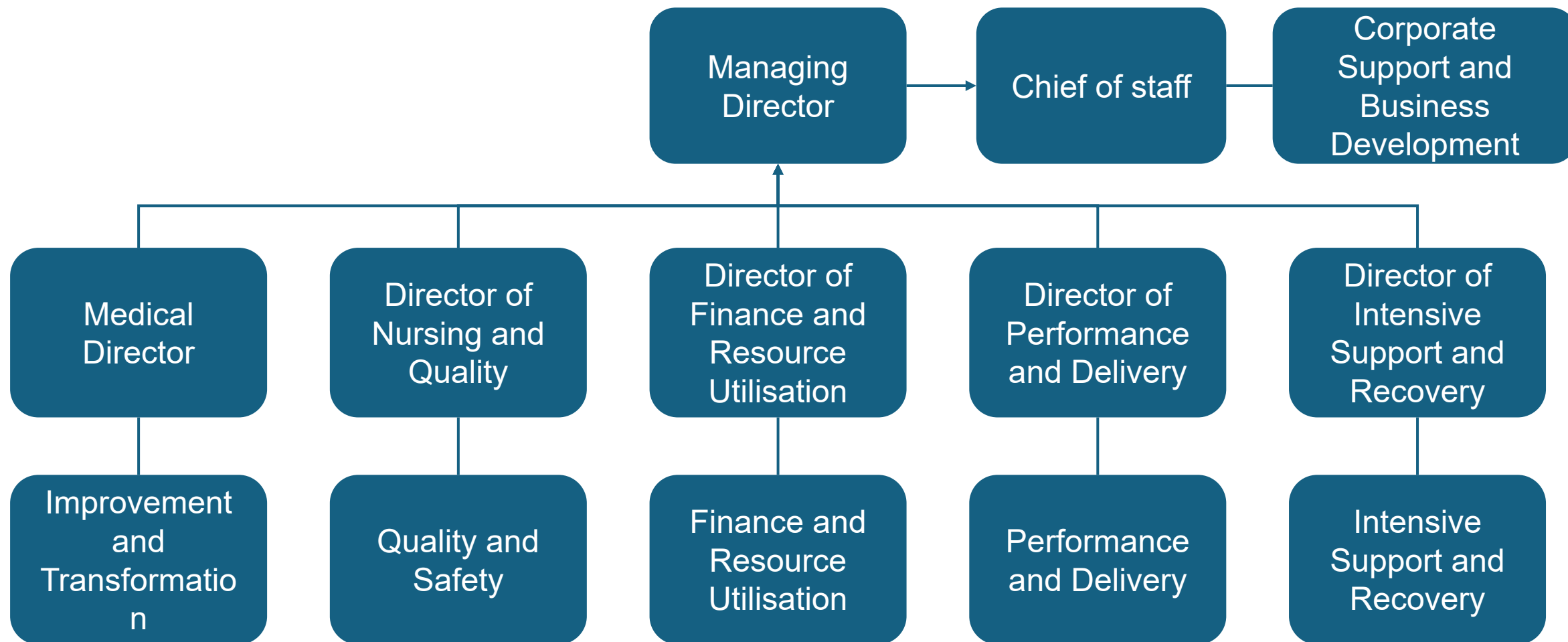
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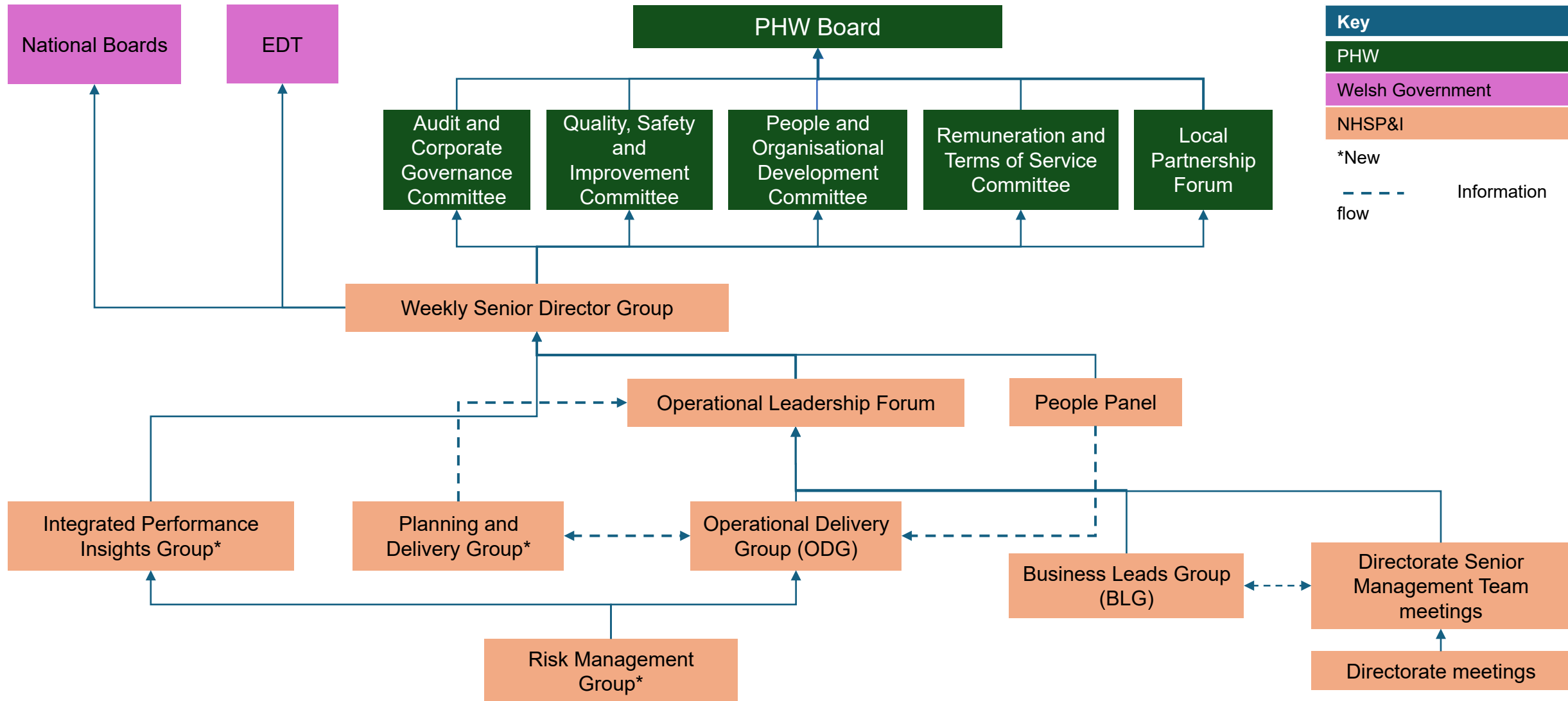
# Additional Information

# Appendix 1 – Senior Director Team Structure

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# Governance and Reporting Structure



# Appendix 3 – artifacts to support effective governance

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## **Products to support effective governance and oversight**

- Central asset register
- Central agreements register
- Strategic assessments register
- Nominated persons register
- Information Asset Owners and Administrators register
- Declarations of interest register
- Corporate Request Log
- Gifts, hospitality, honoraria and sponsorship register
- Contract forward workplan
- Intellectual property register
- Working abroad register
- Integrated document management system for controlled documents
- Directorate business management hub

## **Controlled documents to support effective governance and ways of working**

- Joint Working Process
- Enquiries, Concerns and Complaints Processes
- Media Enquiries Process
- Interim Reward and Recognition for Patient and Public Voice for those with lived experience
- Risk Management Process
- Mobile Phone Process
- Working Abroad Process
- Approval and Signing Process
- Procurement Breach Management Process

# Appendix 4 – Annual Reporting Assurance Summary

Committee	Report Title	Report Period	Report content	Status
QSIC	Governance Compliance - QSIC Report 1	1 April 2025 – 30 June 2025	<ul style="list-style-type: none"> <li>• Health and Safety</li> <li>• National Reportable Incident Reporting</li> <li>• Complaints (including PTR if applicable)</li> <li>• Claims</li> <li>• DATIX</li> <li>• Safeguarding</li> </ul>	Complete
QSIC	Governance Compliance - QSIC Report 2	1 July 2024- 30 Sept 2025		Complete
QSIC	Governance Compliance - QSIC Report 3	1 Oct 2025 – 31 Dec 2024		Complete
QSIC	Governance Compliance - QSIC Report 4	1 Jan 2026 – 31 March 2026		Planned
PODC	Governance Compliance - PODC Report 1	1 April 2025 – 31 Aug 2025	<ul style="list-style-type: none"> <li>• Equality, Diversity and Inclusion</li> <li>• Welsh Language</li> </ul>	Complete
PODC	Governance Compliance - PODC Report 2	1 Sept 2025 – 31 March 2026	<ul style="list-style-type: none"> <li>• Equality, Diversity and Inclusion (Bi-Annual)</li> <li>• Welsh Language (Bi-Annual)</li> </ul>	Complete
PODC		1 April 2025 – 31 March 2026	<ul style="list-style-type: none"> <li>• Raising Concerns Process (Annual)</li> <li>• Workforce planning (Annual)</li> <li>• Grievances (Annual)</li> </ul>	Complete
ACGC	Governance Compliance - ACGC Report 1	1 April 2025 – 31 July 2025	<ul style="list-style-type: none"> <li>• Risk Management</li> <li>• Audit Activity</li> <li>• Counter Fraud</li> <li>• Information Governance</li> <li>• Agreements Register (Bi-Annual)</li> <li>• Declarations of Interest Register (Bi-Annual)</li> </ul>	Complete
ACGC	Governance Compliance - ACGC Report 2	1 August 2025 – 31 October 2025	<ul style="list-style-type: none"> <li>• Risk Management</li> <li>• Audit Activity</li> <li>• Counter Fraud Compliance</li> <li>• Information Governance compliance</li> </ul>	Complete
ACGC	Governance Compliance - ACGC Report 3	1 November 2025 – 31 January 2026	• Same as Report 3	Complete
ACGC	Governance Compliance – ACGC Report 4	1 February 2026 – 31 March 2026	• Same as Report 2	Complete
N/A	Responsible Officer Annual Compliance Statement	1 April 2025 – 31 March 2026	<ul style="list-style-type: none"> <li>• Compliance assurance</li> <li>• Details of any breaches</li> </ul>	Underway