

 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p> Name of Meeting Knowledge, Research and Information Committee Date of Meeting 16 June 2026 Agenda item: 4.5 </p>
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<h2 style="text-align: center;">Outcomes Measurement Framework for Public Health Wales - update</h2>	
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Approval/Scrutiny route:	Iain Bell, Director of Research, Data and Digital Directorate
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Purpose
<p>This paper provides assurance on the Public Health Wales outcomes measurement system, and the approach to strengthening its use in driving prioritisation and decision-making in Public Health Wales.</p>

Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Committee is asked to</p> <ul style="list-style-type: none"> • take assurance on the implementation and use of the PHW measurement system. • take assurance that we are working to further embed the measurement system into our IMTP and performance reporting. 				

Link to Public Health Wales Strategic Plan
<p>Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.</p> <p>This report contributes to the following:</p>

Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives
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Summary impact analysis	
Equality and Health Impact Assessment	None required, the paper provides and update on the PHW outcomes measurement system, which is designed to reduce inequalities and health inequalities.
Risk and Assurance	This links to Strategic Risk 5: Failure to fully exploit digital and data to improve the health and wellbeing of the people of Wales. The measurement system helps mitigate this by ensuring that we fully understand the impact of Public Health Wales' activity
Health and Care Standards	All themes
Financial implications	Not Applicable
People implications	No direct implications. However, the culture of monitoring impact is not yet embedded within Public Health Wales and will require leadership to ensure this change in approach is embedded.

1. Purpose

This paper provides assurance on the development of the Public Health Wales outcomes measurement system, and the approach to strengthening its use in driving prioritisation and decision-making in Public Health Wales.

2. Background

Our measurement system is designed to assess how well we are delivering our strategic ambitions for improving health and well-being and reducing inequalities in the people of Wales in 2035. The measurement system therefore supports the delivery of our long-term strategy. It is intended to help us:

- Understand, monitor and evaluate our impact
- Drive prioritisation and decision-making
- Focus our resources
- Identify gaps in our delivery, including where we need to work with partners.

Further details of the measurement system can be found in the KRIC paper [Proposal for the system to measure the impact of delivering our strategic priorities](#) from June 2025.

Progress and next steps for the measurement system were reported to KRIC in December 2025: [KRIC - outcomes framework December 2025.docx](#).

Updates for assurance on the measurement system are now provided regularly to KRIC, since March 2026.

3. Progress and challenges since March 2026

This section provides an update on progress since March 2026, achievements, and challenges.

A [horizon-scanning group](#) for the Wider Determinants of Health (Strategic Priority 1) is being set up. This will ensure that PHW understand the impact of work in this priority, is well-sighted on trends, risks, issues and opportunities, and that impact is measured and reported appropriately. Once this approach has been trialed, we will consider extending it to other priorities.

Performance and impact indicators

- Outcome and performance indicators are now well-established, and are regularly reported to the Board, together with updates on evaluation and modelling. The latest report to the Board on 22 May 2026 can be found in Section 4, [4.3 PHW 2026 05 28 – Performance and Insight Report – Month 1 26-27 – Board](#)

Healthy life expectancy analysis

- The latest analysis of healthy life expectancy, including the impact of waiting lists, was presented to BET and Board in March:
 - [4.2 PHW 2026 03 26 – HLE analysis update](#)
 - [4.2 PHW 2026 03 26 – Appendix 1 Healthy Life Expectancy Analysis](#)
- This has been shared widely for discussion with the Chief Medical Officer, Health Boards and internally.
- This and other healthy life expectancy analysis has also been presented to strategic priority groups and DLTs, enabling discussion of the relationship to areas of work and how PHW's work is expected to influence HLE.

Impact modelling (including policy and implementation modelling)

- Work on modelling the costs and impacts of weight-management drugs is complete and has been shared with Health Boards. This will inform the work of the Obesity Programme Innovation Programme (OPIP), a UKRI-funded programme led by PHW.
- Following a competitive process, PHW has been successful in securing funding for a UKRI Fellow to develop a sustainable, state-of-the-art micro-macro modelling for Wales, within our cloud infrastructure, on life course inequalities, working with the University of Glasgow.
- The emerging plan is presented in the Annex. The next step is to validate the plan with strategic leads and assign resources. This is the first time PHW has been awarded a UKRI Fellow.

Outcome and process evaluation

Progress since March 2025

The Central Evaluation Team is leading the design and delivery of robust evaluations across PHW, aligned to the PHW's Measurement Framework and agreed IMTPs, to generate actionable evidence on what works, for whom, and why, and to support improvement in programme implementation, investment and accountability across public health programmes in Wales.

Since March 2025, the team has reported a number of evaluations that are already influencing policy, practice and public debate. A number of our evaluations have also attracted wide media coverage, increasing the visibility and reach of PHW's evidence and strengthening its contribution to national discussions on public health interventions.

Reported evaluations include:

- The outcome evaluation of the All Wales Diabetes Prevention Programme (AWDPP) which provided early evidence of its potential to delay or prevent the onset of type 2 diabetes. The programme aims to reduce blood sugar levels among individuals at increased risk of developing the disease. Those offered the AWDPP were significantly less likely to have blood sugar levels

in the diabetes range than those receiving usual care (4% vs 26%). They also had lower average blood sugar levels at 12 months (42.7 mmol/mol vs 43.8 mmol/mol).

- The outcome evaluation of the Cardiff and Vale University Health Board Prehab2Rehab study, which was referenced in Senedd discussions on the role of prehabilitation in cancer treatment, found evidence of improved postoperative outcomes. Using descriptive and inferential analyses, alongside propensity score matching, the evaluation showed that patients who attended three or more Prehab2Rehab exercise sessions had a significantly shorter length of post operative hospital stay than matched controls (mean 5.44 days vs 8.67 days, $p < .001$). This equates to ~3 days shorter length of post operative hospital stays. However, there was a significant interaction by age, with younger patients tending to benefit more from the treatment in terms of shorter hospital stays compared to older patients (interaction coefficient = -0.03 , 95% CI: -0.05 to -0.01 ; $p = 0.05$).
- Evaluation of the impact of the PHW Winter Respiratory Vaccines Communication Campaign 2022–23 on uptake of the COVID-19 autumn booster and influenza vaccination among clinically vulnerable people in Wales aged 16–49 years, used a controlled interrupted time series design. In the COVID-19 vaccination model, the campaign was associated with an immediate step-change increase of 29 vaccinations per 100,000 population in the target group, after adjusting for explanatory variables. Although this represented an estimated 9% increase in the mean daily vaccination rate and was larger than the change observed in the comparison population, it did not reach statistical significance at the 5% level ($p = 0.08$). This means the findings suggest a possible positive effect of the campaign, conditional on COVID-19 infections and vaccination invitation letters, but it was not possible to conclude with confidence that the observed increase was attributable to the campaign alone.
- Phase 1 process evaluation of the Every Child Health Information Resource which examined access and reach and highlighted the need to better understand families' accessibility needs to support equitable delivery. Midwives' qualitative feedback suggested some groups may be less likely to access the resource, including families with significant learning difficulties, those needing translated or easy-read materials, and those disengaged from mainstream maternity services.
- The developing evaluation plans for 2026/27 are presented in Table 1 in the Annex.

Challenges

As reported in March, linking the outcome indicators to our PHW activities remains challenging, as does identifying high-value activity appropriate for modelling from

the IMTP. Work across directorates has helped to mitigate this, as can be seen from the emerging modelling and evaluation plans.

Other challenges include the pressure on analytical capacity as more indicators are brought online, and the modelling programme expands. We will manage expectations, explore how we can work with others, including academia, and seek to streamline our reporting wherever possible. The Data, Analysis, Registers and Cloud (DARC) Programme offers an opportunity to automate pipelines and improve our management of data to support this.

4. Recommendations

The Committee is asked to

- take assurance on the implementation and use of the PHW measurement system.
- take assurance that we are working to further embed the measurement system into our IMTP and performance reporting.

Annex – draft evaluation and modelling plans

Table 1: draft evaluation programme for 2025/27, with description of the planned evaluation

Evaluation			
Year	Programme	Type of programme	Planned Evaluation
2026/7 - committed	1 MyPath Cymru	National Programme	A process evaluation will assess implementation fidelity, reach and key barriers and facilitators to engagement and delivery across settings. The outcome evaluation will use a stepped-wedge design to understand the impact of the programme on clinical, behavioural and equity outcomes.
	2 Hapus National Conversation and Strategic Partnership-	National programme	Process and outcome evaluations to understand inequities in mental wellbeing and taking actions to support mental wellbeing between those engaging with the programme and those who are unable to engage
	3 Tackling Diabetes Together- Point of Diagnosis (POD) Pack; Diabetic Eye Screening Wales Programme (DESW); Urine ACR pilot project in CTM	National Programme	Process evaluation to understand the implementation of the PoD, Urine ACR and DESW pilot projects, including the barriers and facilitators to delivery, the feasibility of implementation, the acceptability of the services to both service users and professionals, and the equity implications of access and engagement
	4 Welsh Network of Health and Wellbeing Promoting Schools (WNHWPS)	National programme	Process evaluation to understand the implementation of the programme and and outcome evaluations to understand the impact of the WNHWPS on student health and wellbeing outcomes
	5 Every Child health information	National Programme	Process evaluation to understand whether all parents can access, understand, and use the



	leaflet for parents		information to support them in parenting.
	6 High fat, salt and sugar legislation	National programme – WG request	<p>Process evaluation to understand what contribution the policy has made to the Welsh Government’s aim of nudging people to purchase healthier options, towards reducing overweight and obesity, and equity of impact.</p> <p>Outcome evaluation to examine the impact of the HFSS promotion restrictions in Wales in consumer purchasing patterns of prepacked food items over the first year of the HFSS policy in Wales</p>
2026/7 - scoping	7 Lung cancer screening	National programme	A process and outcome evaluation will assess implementation, feasibility and acceptability for patients and staff, and programme impact on patient outcomes (such as stage at diagnosis) and lung cancer inequalities. We will also undertake an economic evaluation.
	8 Prevention of gambling harms digital offer		
	9 Climate change surveillance programme		Using established best practice for surveillance system evaluation, we will assess the system’s effectiveness and performance, its equity implications, and its policy and operational utility. Findings will inform national resilience planning, and will identify opportunities for system improvement.
	10 Health Equity Wales (HEW)	National programmes – WG request	We are developing a theory of change to underpin the Health Equity Wales evaluation. We will also support WG colleagues with developing the evaluation framework for HEW.
	Smoking Cessation Services		We will develop a theory of change for the smoking cessation



	<ul style="list-style-type: none"> • Services / intervention • Outcomes 		programme and undertake nested evaluations of key components to assess implementation, effectiveness across population groups to understand and help address smoking related inequalities.
	Screening <ul style="list-style-type: none"> • Services / intervention • Outcomes 		
	Healthy weight, healthy Wales; Obesity Programme Innovation Programme		

Impact modelling – draft plan

Agreed or in progress

- Diabetes projections – complete
- Healthy Weight, Healthy Wales and OPIP – weight loss drugs modelling, initial work complete, further modelling likely to be requested
- Help Me Quit - modelling policy outcomes 2025/6, 2026/7, academic collaboration, in progress
- Healthy Life expectancy analysis, including waiting lists – latest results shared with Board, BET, Health Boards, CMO and Welsh Government
- Wider determinants of health – modelling the interaction between economic policies and health, UKRI Fellow funding agreed, to start May 2027
- The cost of mental ill health – similar piece to the cost of diabetes, or obesity, expected to complete summer 2026

In scoping

- Monitoring screening outcomes – timing tbd, in conjunction with the screening transformation programme and migration of analysis into the cloud (DARC Programme)
- Early years outcomes and profiles – initial scoping under way
- Healthy Start Scheme – potential to model for recommendations
- Fair work – impact of PHW activity and policy on fair work and health
- Child Poverty Strategy – analysis and modelling.