GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales	**Name of Meeting** Board **Date of Meeting** 26 November 2026 **Agenda item:** **3.3**

Performance and Insight Report - October 2026

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Contributors:	Directorate submissions approved by relevant Director

Approval/Scrutiny route:	Business Executive Team

Purpose

Our Performance and Insight Report focuses on delivering actionable insights and assurance whilst identifying areas for further improvement across the following key sections;

- *Governance and Accountability*, including:
  - People Governance; Financial Governance; Board and Corporate Governance; and Clinical Governance, Quality, Safety and Improvement
- *Service Delivery*, including:
  - Screening Programmes; Health Protection and Infection Services; Health and Wellbeing *(monthly)*; Policy and International Health; Data, Knowledge and Research *(bi-monthly)*
- *Strategy and Delivery*, including:
  - Progress against our Strategic Plan Milestones, Strategic Change Programmes and Inequalities
- Outcomes Measurement, including:
  - Reporting against our IMTP measurement system indicators

The report is designed to be read in conjunction with the Performance and Assurance Dashboard.

Recommendation:

APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
☐	☒	☐	☐	☒

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

Link to Public Health Wales Strategic Plan Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives. 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

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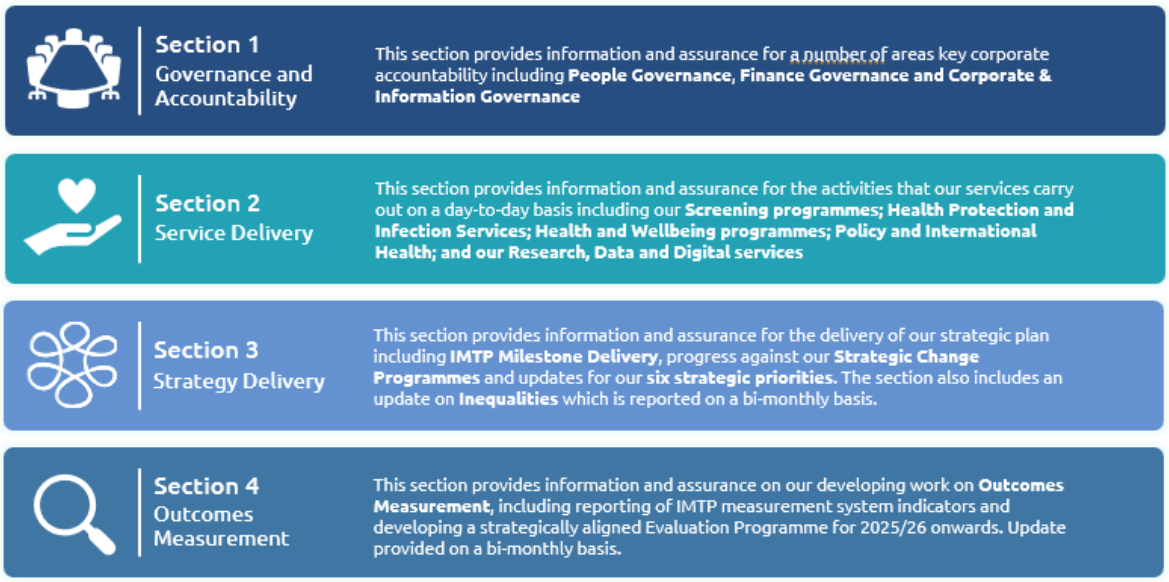
The Performance and Insight Report is designed to be read in conjunction with the Performance and Assurance Dashboard (PAD).

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.

Structure of The Report

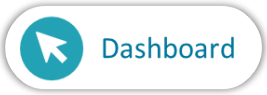
The report is made up of the following areas:



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:

Finance and Performance Sub-Group

A new Finance and Performance Sub-Group has been established within Public Health Wales to strengthen internal governance and oversight. The Sub-Group is chaired by the Executive Director of Strategy, Finance and Performance and membership comprises all other Executive Team members. The Sub-Group meets on a monthly basis, following the receipt of the draft Performance and Insight Report for the preceding month.

The Finance and Performance Sub-Group provides dedicated capacity to conduct deeper scrutiny of organisational delivery and financial management. Its primary focus is to review key areas of concern or variance within financial and performance reporting. Through focused examination of key areas, the group aims to provide timely decision making and enhanced assurance regarding operational performance, financial stability, and risk mitigation, whilst reinforcing accountability across the organisation. In addition, formal consideration is given to the Requests for Change for IMTP milestones submitted for the previous month. This latter process introduces a more in-depth consideration of strategic delivery – but also a slight delay in formal recommendations for approval of changes.

Performance update at Month 7 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 7 2026/27 include:

- **Staff appraisal** compliance is a mandated requirement but has now remained below expected levels since March 2026. This follows a stable position of achieving compliance during the previous year. Compliance issues are primarily associated with Health Protection, Infection and Environment (76.5%) and Population Screening and Quality (79%). Assurance has been provided that one-to-one My Contribution discussions have taken place, however operational pressures, competing priorities and sickness absence have delayed updates to ESR records. The People and OD Partnering Team continue to work with divisional leaders and POD Operations colleagues to ensure ESR records accurately reflect completed My Conversation discussions.

- **Agency spend** is a key Cabinet Minister Workforce Enabling Action focused on achieving a 30% year-on-year reduction in total agency spend, as well as reducing admin and clerical agency use. Our cumulative year-to-date agency spend is £647k at month 7 with a forecast year-end position of £1.138m – expected to achieve the year-on-year reduction target by year-end. Agency spend for admin and clerical is £2k at month 7 (£242k YTD), with an additional £47k forecast for the remainder of the year. The use of agency staff remains under scrutiny, with all requests subject to review and early consultation between People and OD, Finance and business leads, ensuring decisions balance operational risk, workforce capacity and financial control.

- **Freedom of Information (FOI) Requests** The increasing volume and complexity of requests continues to cause challenges for both the Information Governance Service and the wider organisation to meet required response times. The current open caseload has reached 25 open requests, which includes 5 complex cases. This represents a heightened operational risk to FOI statutory compliance. Without a reduction in backlog levels or additional capacity within contributing service areas, there is an increased likelihood of response deadlines being missed, particularly where requests require cross-organisational coordination, consultation with external organisations or detailed consideration of exemptions. This could adversely impact compliance performance, increase the likelihood of ICO complaints, and create reputational risks for the organisation.

- **National Reportable Incident (NRI)** One NRI was reported within Infection Services in October 2026. Following the implementation of the TrakCare Lab Enterprise (TCLE) system, it was identified that 252 laboratory results had been excluded from the routine reporting pathway

and were not visible within the existing 'Overdue Worklist' process. As a result, these results remained unreported until the issue was detected. An investigation is currently underway, and a range of immediate mitigating actions have been implemented to minimise any actual or potential impact. This has included the urgent identification, review and reporting of all outstanding results. To date there has been no harm identified.

- Delivering improvement in achieving national standards across parts of our **Screening programmes** is a key Trust priority. *Breast Screening* Assessment delays remain a key operational risk, with trend data showing difficulty in sustaining improvement in performance. Latest data shows that 28.5% of women receiving an assessment invitation within 3 weeks. Whilst continued improvement was evident in the South Wales region, waits have deteriorated due to a reduction in performance in West Wales (from 68% to 16.8%), and ongoing challenges in North Wales with only 0.7% of invitations given within three weeks of screen. Recovery remains dependent on locum and radiology-led cover, prioritisation of the longest waits, cross-regional support, and sustainable surgical, nursing and theatre capacity.

  Bowel Screening timely access to colonoscopy remains a key performance challenge, with less than a third of patients seen within 4 weeks and average waits of 5 weeks and 1 day in early as at 30 October 2026. Latest trend data continues to show a gradual improvement in performance since the start of April 2026, with fewer participants waiting over 28 days. Whilst project delivery is on track and national performance is improving, sustainable recovery is not yet secured. Health Board variation, limited accredited workforce and reliance on insourcing remain key risks. Monthly monitoring against local recovery trajectories continues.

  Diabetic Eye Screening performance in respect of offering appointments to eligible patients remains significantly below the 80% standard at 36.7%. Latest trend data shows a gradual decline in overall performance, especially in North Wales. Coverage remains below the planned recovery trajectory. Camera evaluation delays and further clinic-model work mean coverage gains now look more likely from March to April 2027, rather than January 2027. Vacancies and continued high sickness absence still constrain delivery, with weekly meetings with People and OD having now commenced to support attendance at work.

- **Help Me Quit** client episodes created by the Hub have shown a consistently lower cumulative trend in 2026/27 compared with the previous year. This reflects a return to more typical levels of smoking cessation activity following unusually high demand in recent years, a

reduction in the smoking population in Wales, increased use of digital self-help support, and changes to referral pathways and recording practices. Lower engagement from self-referrals and a growing proportion of vaping-related contacts, which do not usually generate client episodes, have also contributed to reduced recorded activity. The service continues to engage with Health Boards around wider Help Me Quit data, and these trends are reflected in their experiences as well.

- Overall delivery of our new **Strategic Plan** remains positive with 84% of milestones currently on track to be delivered as planned. However, as part of the IMTP Addendum reprioritisation process, it was proposed that several milestones should be paused or closed to enable resources to focus on higher-priority commitments. Following Cabinet Minister approval of the IMTP on 23 October 2026, these changes are now being implemented.

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.