

PRIORITY MEASURES – PHASE ONE

POPULATION HEALTH

Priority Measure		Target	Reporting Frequency	Source
1	Percentage of adults losing clinically significant weight loss (5% or 10% of their body weight) through the All Wales Weight Management Pathway	Annual improvement	Annual	All Wales Weight Management Pathway Monitoring Form (Welsh Government)
2	Qualitative report detailing progress against the Health Boards' plans to deliver the NHS Wales Weight Management Pathway	Evidence of improvement	Quarterly	Organisational Qualitative Monitoring Return (Welsh Government)
3	Percentage of adults (aged 16+) reporting that they currently smoke either daily or occasionally	A 5% prevalence rate by 2030	Quarterly	National Survey for Wales
4	Percentage of adult smokers who make a quit attempt via smoking cessation services	5% annual target	Quarterly	Smoking Cessation Services Data Collection (Welsh Government)
5	Qualitative report detailing the progress of the delivery of inpatient smoking cessation services and the reduction of maternal smoking rates	Evidence of Improvement	Quarterly	Organisational Qualitative Monitoring Return (Welsh Government)

CARE CLOSER TO HOME

Priority Measure		Target	Reporting Frequency	Source
6	Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes	4 quarter improvement trend, towards an annual increase of 10% from baseline data	Quarterly	Primary Care Information Portal
7	Percentage of patients (aged 12 years and over) with diabetes achieving all three treatment targets in the preceding 15 months: <ul style="list-style-type: none"> ❖ Blood pressure reading is 140/80 mmHg or less ❖ Cholesterol values is less than 5 mmol/l (<5) ❖ HbA1c equal or less than 58 mmol/mol or less 	1% annual increase from baseline data	Annual	National Diabetes Audit

INFECTION PREVENTION AND CONTROL

8	Cumulative number of laboratory confirmed bacteraemia cases: Klebsiella sp and; Aeruginosa	Health Board specific target	Monthly	Public Health Wales
9	Cumulative rate of laboratory confirmed bacteraemia cases per 100,000 population: E-coli; S.aureus bacteraemias (MRSA and MSSA) and; C.difficile	Health Board specific target	Monthly	Public Health Wales

SIX GOALS OF URGENT AND EMERGENCY CARE

Priority Measure		Target	Reporting Frequency	Source
10	Number of Urgent Primary Care Centres (UPCC) established in each Health Board footprint (i.e. both UPPC models)	Increase by April 2023	Quarterly	Manual Data Collection (Welsh Government)
11	Percentage of total conveyances taken to a service other than a Type One Emergency Department	4 quarter improvement trend	Quarterly	WAST – Ambulance Quality Indicators
12	Qualitative report detailing progress against the Health Boards’ plans to deliver a Same Day Emergency Day Care Service (12 hours a day, 7 days a week) across all acute sites	7 day a week, 12 hours a day Same Day Emergency Care across 100% of acute sites by April 2025	Quarterly	Organisational Qualitative Monitoring Return (Welsh Government)
13	Number of people admitted as an emergency who remain in an acute or community hospital over 21 days since admission	4 quarter reduction trend	Quarterly	Admitted Patient Care
14	Percentage of total emergency bed days accrued by people with a length of stay over 21 days	4 quarter reduction trend	Quarterly	Admitted Patient Care

ACCESS TO TIMELY PLANNED CARE

Priority Measure		Target	Reporting Frequency	Source
15	Number of patients waiting more than 104 weeks for treatment	Improvement trajectory towards a national target of zero by 2024	Monthly	Referral to Treatment (combined) Dataset
16	Number of patients waiting more than 36 weeks for treatment	Improvement trajectory towards a national target of zero by 2026	Monthly	Referral to Treatment (combined) Dataset
17	Percentage of patients waiting less than 26 weeks for treatment	Improvement trajectory towards a national target of 95% by 2026	Monthly	Referral to Treatment (combined) Dataset
18	Number of patients waiting over 104 weeks for a new outpatient appointment	Improvement trajectory towards eliminating over 104 week waits by July 2022	Monthly	Referral to Treatment (combined) Dataset
19	Number of patients waiting over 52 weeks for a new outpatient appointment	Improvement trajectory towards eliminating over 52 week waits by October 2022	Monthly	Referral to Treatment (combined) Dataset
20	Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%	A reduction of 30% by March 2023 against a baseline of March 2021	Monthly	Outpatient Follow-Up Delay Monitoring Return (Welsh Government)
21	Number of patients waiting over 8 weeks for a diagnostic endoscopy	Improvement trajectory towards a national target of zero by March 2026	Monthly	Diagnostic & Therapies Waiting Times Dataset
22	Percentage of patient starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)	Improvement trajectory towards a national target of 75%	Monthly	Suspected Cancer Pathway Data Set (NDR – DHCW)

WORKFORCE

Priority Measure		Target	Reporting Frequency	Source
23	Agency spend as a percentage of the total pay bill	12 month reduction trend	Monthly	Financial Monitoring Returns (Welsh Government)
24	Overall staff engagement score	Annual improvement	Annual	NHS Wales Staff Survey
25	Percentage of staff who report that their line manager takes a positive interest in their health and well-being	Annual improvement	Annual	NHS Wales Staff Survey
26	Percentage compliance for all completed level 1 competencies of the Core Skills and Training Framework by organisation	85%	Monthly	Electronic Staff Record (ESR)
27	Percentage of sickness absence rate of staff	12 Month Reduction Trend	Monthly	Electronic Staff Record (ESR)
28	Percentage headcount by organisation who have had a Personal Appraisal and Development Review (PADR)/medical appraisal in the previous 12 months (including doctors and dentists in training)	85%	Monthly	Electronic Staff Record (ESR) & Medical Appraisal & Revalidation System (MARS)

DIGITAL AND TECHNOLOGY

Priority Measure		Target	Reporting Frequency	Source
29	Report detailing evidence of NHS Wales embedding Value Based Health and Care within organisational strategic plans and decision making processes	Evidence of activity undertaken to embed a Value Based Health Care approach (as described in the reporting template)	Every Six Months	Organisational Qualitative Monitoring Return (Welsh Government)

ECONOMY AND ENVIRONMENT

30	Emissions reported in line with the Welsh Public Sector Net Zero Carbon Reporting Approach	16% reduction in carbon emissions by 2025 against the 2018/19 NHS Wales baseline position	Annual	Organisation Level Emission Return
31	Qualitative report detailing the progress of NHS Wales' contribution to decarbonisation as outlined in the organisation's plan	Evidence of improvement	Every Six Months	Organisational Qualitative Monitoring Return (Welsh Government)
32	Qualitative report detailing evidence of NHS Wales advancing its understanding and role within the foundational economy via the delivery of the Foundational Economy in Health and Social Services 2021-22 Programme	Delivery of Foundational Economy initiatives and/or evidence of improvements in decision making process	Every Six Months	Organisational Qualitative Monitoring Return (Welsh Government)

Ministerial Priority Measures

Context

A Healthier Wales is the long-term plan for health and social care and drives our commitment to deliver seamless, integrated care. The lessons learnt from COVID-19 have shown us that we need to accelerate our strategies and focus on prevention at all stages if we are to reduce the demand on the NHS. Integrated Medium Term Plans must focus on improving population health to: deliver health equity; improve outcomes and; support the delivery of a sustainable NHS for the future.

The NHS also needs to demonstrate its national leadership role to build a sustainable future for Wales. The NHS is not just a provider of health services; it also has a strategic role to plan for a Wales that is fit for the future.

The Ministerial message in the Planning Framework outlines the areas of focus:

*My priorities recognise that as a country we must continue to respond to the immediate challenges of COVID, whilst also turning our attention to longer-term sustainability **and improving population health**. We must invest in recovery, tackle health inequalities, improve mental health provision by giving parity between physical and mental health conditions, and focus on prevention. I am deeply committed to supporting our health and care workers who have been and remain at the forefront of our efforts.*

I want to ensure that we can improve accessibility to our services through the use of new technologies and innovative ways of working which will increase resilience.

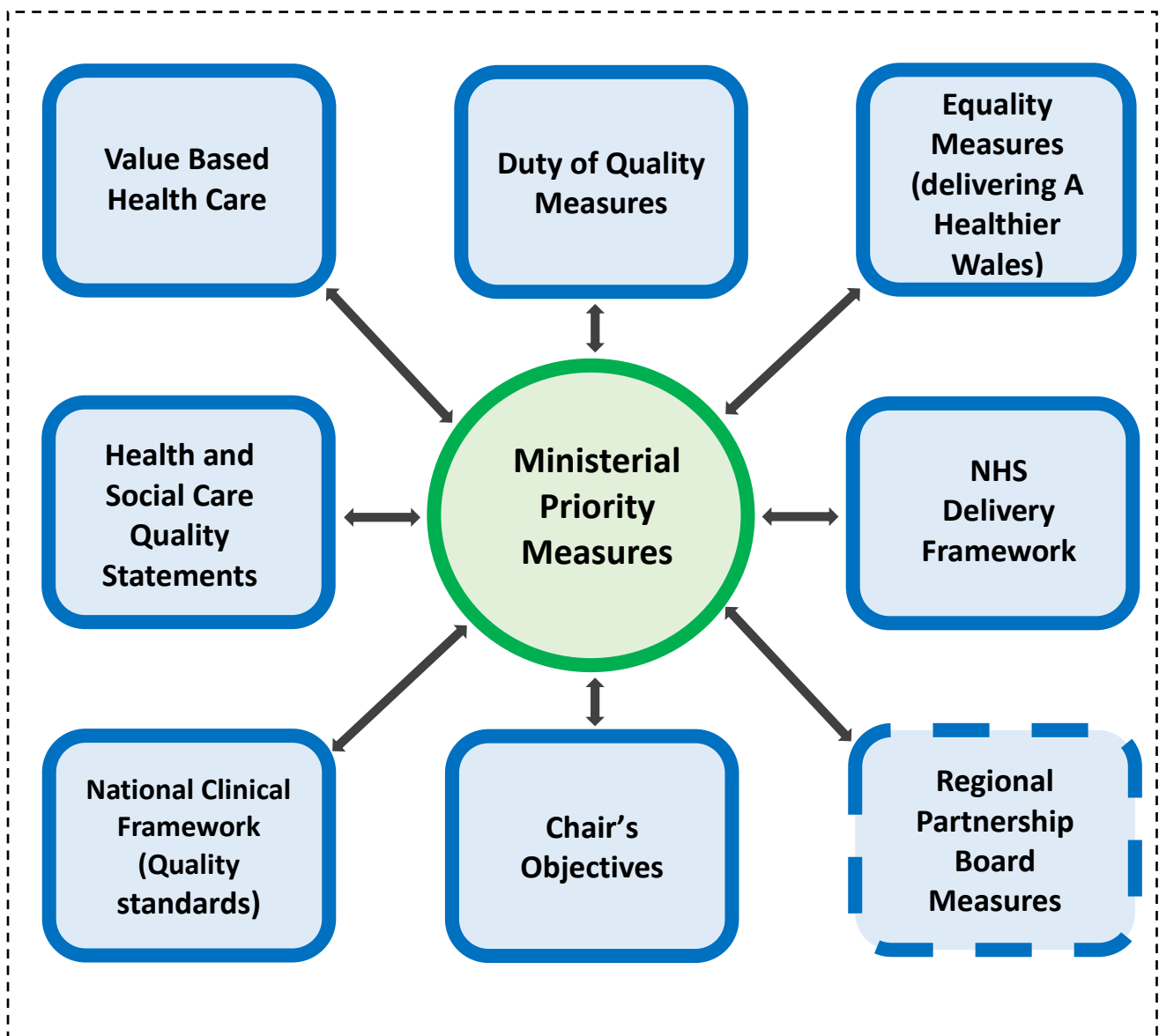
We must also recognise that NHS Wales is the largest public organisation in Wales and, as such, has a unique opportunity to use its spending and employment practices to promote wider government policy goals. I am keen that working together we take every opportunity to support local economic growth, regeneration, and community resilience; helping to address inequalities and the socio-economic determinants of health.

Within my priorities, there will be some areas of particular interest that I will be discussing with NHS Chairs to ensure progress is driven forward. These will demonstrate our commitment to achieving the vision and ambitions set out in “A Healthier Wales”. Focusing improvement in these areas will provide the gains that are necessary to underpin longer-term sustainability, transformational change and improvement.

Organisations are expected to align existing plans to address these priorities and to bring forward key actions that will ensure these are the focus for the whole organisation. **These areas will form the basis of discussions with NHS Chairs and will be supported by the development of measurable outcomes as part of the development of the new Outcomes Framework for health and social care. By the start of the New Year, the Minister will be publishing specific targets under the areas of priorities previously raised in the IMTP guidance. Health Board Chairs will be held to account on the delivery of these specific targets.**

How does this work link with other potential developments?

The Ministerial Measures establish a change in focus by concentrating on the role of prevention at all stages. The work will form part of a wider suite of actions and will link with other national developments (including legislation). The overall aim is to build a governance and accountability framework that demonstrates the NHS’s role in delivering the ambitions of A Healthier Wales.



Work continues to develop the Outcomes Framework for Health and Social Care. Time is required to build the evidence base behind each of the population indicators and to ensure that the actions we prioritise have the greatest impact on improving the health and wellbeing of the people of Wales. We plan to issue a suite of national population indicators by May 2022, following the completion of stakeholder engagement during February- March 2022.

Phased approach to developing Ministerial Measures

The development of the Ministerial Priorities will be in four phases reflecting their current readiness. Delivery measures in Phases One and Two are the start of the process to turn the population indicators into measurable actions. A phased process provides time to develop meaningful measurement, with the aim of driving the right behaviours to make the changes we need. To build consistency and remove inequalities, ambitions are expressed as targets for health boards and trusts to plan against. Many of these targets are longer-term goals and therefore, local plans need to demonstrate how organisations are building and developing their local services to meet these ambitions.

Phase One focuses on a set of measures that builds on established work and demonstrates the wider remit and responsibility of NHS Wales. Phase One measures will be released in January 2022 to ensure that organisations have time to review and reflect them in their IMTP for 2022-25. All of the measures are developed from the key areas of focus highlighted in the Planning Framework and will support NHS organisations to monitor the progress of their IMTP.

Delivery measures/milestones in phases one will focus on the following priority areas:

- Population Health
- Care Closer to Home
- Infection Prevention and Control
- Six Goals of Urgent and Emergency Care
- Access to Timely Planned Care
- Workforce
- Digital and Technology
- Economy and Environment

Phase One Measures

These have agreed targets and established data flows and will be **introduced during January 2022**. Due to some measures being whole population indicators and/or reported on an annual basis, additional supporting measures have been identified to track in-year delivery. In some instances, the in-year measurement will be a qualitative report outlining progress against organisational plan etc. These reports will be produced by the appropriate policy lead.

Phase Two Measures

These have established data flows, but further work is required to understand the baseline data so that ambitious and realistic measures can be established. These measures will **be introduced during May 2022** (where baseline data is available and has been reviewed).

Phase Three Measures

These support current policy direction but have no established measurement. These measures should be **introduced during June 2023** (depending upon the complexity of the data collection).

Phase Four Measures

Consideration required identifying appropriate measurement for the areas initially identified by the Minister. If a measurement that supports policy direction can be identified, the measure should be **introduced during June 2023** (depending upon the complexity of the data collection).

For phases two to four, NHS organisations will be asked to contribute to the development of measures and will be required to identify a lead officer to support Welsh Government in this work.

Governance and Accountability Arrangements

Boards and Committees must be assured that their organisations deliver their plans. All plans must contain actions and milestones to demonstrate progress. Where national measurement is not in place, local systems will be expected to collect data to enable organisation to demonstrate progress.

The Minister will regularly seek assurance from Chairs and Vice Chairs that milestones are achieved, with particular interest in the specific areas of focus.

In the Minister's introduction of the NHS Wales Planning Framework, the Minister made it clear that the NHS has a significant role in improving the health and wellbeing of the Welsh population. While no one organisation is accountable for the achievement of a population indicator, NHS Wales has a

significant contribution to make. Furthermore, the priorities recognise that we are still in the midst of a pandemic response, with a need to continue the reactivation of and recover services.

Boards are accountable for the monitoring of their Integrated Medium Term Plans and managing associated risks. Organisations will be expected to provide Welsh Government with quarterly updates. At regular intervals, the Minister and Welsh Government officials will want to discuss progress with Chairs/Vice Chairs, Chief Executive Officers and Executive Teams. These discussions will be conducted through established governance arrangements, such as Integrated Quality Planning and Delivery meetings, Joint Executive Meetings and tripartite review with HIW and Audit Wales.