

WORKING TO ACHIEVE A HEALTHIER FUTURE FOR WALES



Public Health Wales
Annual Report 2019/2020



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Our Year in Numbers

30,000+
referrals for the
National Exercise
Referral Scheme

183 schools
achieved level 1-5 healthy schools award

Successful transfer
of local smoking
cessation services
to Local Health
Boards from

**October
2019**

130+
Families in Gwent
offered support as
a result of
Early Intervention
Projects

10th
anniversary of
Designed to Smile
programme marked
in September 2019

60+ Emergency Planning and
Business Continuity events
with 500+ attendees

31%
reduction in
emissions from PHW
vehicles

340+
immunisation
queries
answered

Approx. 1.5m
microbiology samples tested

900,000+
screening invitations
with over 660,000 screened

10%
reduction in
emissions from
electricity
usage

Young Ambassador Programme
launched in **July 2019**

87%
reduction in
emissions from
waste
disposal

18%
reduction in
emissions from
supplied
water

60+
Emergency
Planning
and Business
Continuity
events
with **500+**
attendees

Delivered a
balanced
budget for
2019/20

6
'Be the
change'
e-guides
developed
promoting
sustainable
steps

750+ delegates
attended the annual Welsh
Public Health Conference

350+
staff attended
Annual Staff
Conference
across
3 sites
around Wales

100+ staff trained on
EU transition
preparednes

Annual Report 2019/20 – Performance Report

Performance Analysis

Public Health Wales has formal performance management arrangements in place in order to monitor and measure progress against our strategic plan and performance against the key services that we deliver. Timely and robust information is presented to our Board to provide assurance, whilst highlighting any emerging issues and risks that may require remedial action. This ensures that we are doing everything we can to achieve a healthier future for Wales.

We met all of our statutory duties in 2019/20, including achieving a breakeven position and having an approved Integrated Medium Term Plan (IMTP). Whilst we delivered a significant number of planned activities during the first three quarters of the year, the need to plan and respond to the COVID-19 pandemic has had a significant impact on our organisation, the wider NHS and on society as a whole. It has required a dynamic response which has presented a number of opportunities in addition to risks. The need to respond and recover from the pandemic will continue both for our organisation and wider society throughout 2020/21 and beyond.

The COVID-19 pandemic presented us with a number of challenges including delivering against our strategic plan, as well as our key services and programmes. A number of these challenges are represented in the narrative and data tables below. In line with Welsh Government guidance, performance data for a small number of our delivery areas has been presented for the first three quarters of 2019/20 only. This is as a result of our services and programmes being stood down, followed by the enhanced mobilisation of our workforce in response to the pandemic.

Whilst delivery during the remaining quarter was impacted by COVID-19, where available, information for this period is presented in narrative form in the absence of official performance data, and therefore may not be comparable to previous years.

The following sections provide a high level overview of progress made against our strategic priorities and how we delivered against our key performance indicators, including those mandated within the NHS Wales Delivery Framework 2019/20.

Delivering our Strategic Plan

Progress against delivery of our plan was captured as part of our actions within our annual plan, and reported to our Board and Welsh Government on a regular basis.

At the end of Quarter 3 2019/20, most progress was made against *Securing a healthy future for the next generation* (priority 4), with 100% of actions completed/on track to be completed within agreed timescales (22 actions). The

strategic priorities *Influencing the wider determinants of health* (priority 1), *Protecting the public from infection and environmental threats to health* (priority 5), *Supporting the development of a sustainable health and care system focused on prevention and early intervention* (priority 6), and *Building and mobilising knowledge and skills to improve health and well-being across Wales* (priority 7) either completed or were on track to complete at least 90% of their actions.

Less progress was made against *Promoting healthy behaviours* (priority 3) and our enabling actions with 22% and 15% not due to be completed within the agreed timescales. A significant proportion of these were due to delays relating to a lack of capacity and not being able to recruit to key roles.

In light of the significant support being provided to our COVID-19 response during the final quarter, work will be undertaken to assess the full extent of its impact on the delivery of our strategic plan. In the short term, a quarterly plan is being submitted to Welsh Government in line with NHS Wales planning guidelines and action plans will be put in place to expedite actions having to be rolled over from 2019/20.

All strategic priorities were showing good level of delivery at the end of Quarter 3 2019/20, with over 88% of actions (334 actions) within our annual plan being completed/on track to be completed. Just over 7% of actions (27) were behind schedule, with progress for less than 5% of actions (17) being affected by an external dependency. Significant progress had also been made in a collaborative approach to establishing outcome measures for each strategic priority. However, as a result of the COVID-19 pandemic and the need to mobilise an effective response, the implementation of our long term strategy was stood down in the final quarter of 2019/20 and therefore data is not available for this period.

A full progress report at the end of Quarter 3 2019/20 including further information on actions not completed are included in the [December 2019 Integrated Performance Report](#).

2019/20 Strategic Priorities

1	Influencing the wider determinants of health
2	Improving mental well-being and resilience
3	Promoting healthy behaviours
4	Securing a healthy future for the next generation
5	Protecting the public from infection and environmental threats to health
6	Supporting the development of a sustainable health and care system focused on prevention and early intervention
7	Building and mobilising knowledge and skills to improve health and well-being across Wales

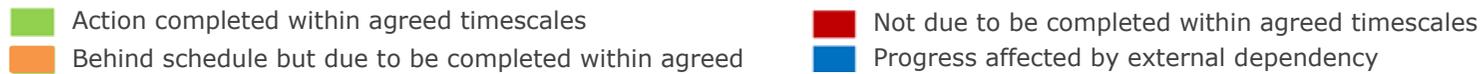


Figure 1: Overall progress across all plans (as at Quarter 3 2019/20)

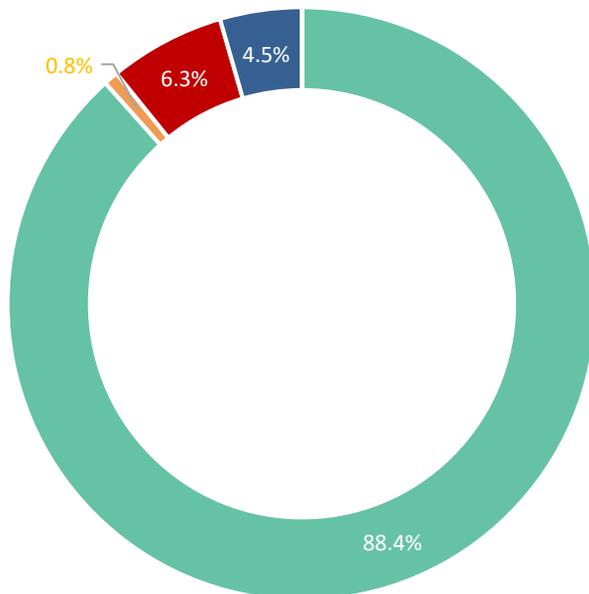


Figure 2: Progress against Strategic Priorities (as at Quarter 3 2019/20)



Key Performance Indicators

The following section provides an overview against a number of our key performance indicators, including those mandated within the NHS Wales Delivery Framework 2019/20. To help support improvements in each of our services, we set a number of ambitious targets in our Strategic Plan to ensure we deliver the most effective and efficient services that we can. These performance indicators were reported as part of our Integrated Performance Report which provides key information on our operational, people, quality and financial performance to highlight improvements in performance as well as areas for improvement. This information is scrutinised by our Executive Team on a monthly basis and by our Board on a bi-monthly basis at each formal Board meeting.

A narrative overview and supporting data tables are provided for each area, which highlights our latest performance and any key achievements and challenges we have experienced within each, with a particular focus on the impact due to COVID-19. Our latest figures highlight a variable picture of performance. Whilst improvements have been made in a number of areas, there continues to be challenges to achieve or sustain agreed Public Health Wales targets and national standards across some of our services.

Smoking cessation

Helping to reduce the number of people smoking in Wales continues to be an important aspect of our work alongside our partners. Tobacco ranks as the single highest risk factor for premature death and disability in the UK. It causes nearly one in five of all deaths and around one third of the inequality in mortality between the most and least deprived areas in Wales.

Our Help Me Quit service provides smokers with access to all NHS stop smoking services in Wales, making it easier for smokers to choose the best NHS stop smoking support for them in their local area. Latest available data for the percentage of adult smokers who make a quit attempt via smoking cessation services stood at 1.8% at the end of quarter 2 2019/20, against a 5% annual target. Whilst the system is not currently on track to achieve the target, there is evidence of a notable increase in smokers contacting Help me Quit over the past year, and accepting support. Latest figures for the percentage of smokers carbon monoxide validated as successful exceeded the 40% target and stood at 44.5% at the end of Quarter 3 2019/20.

The number of secondary schools targeted as part of our Smoking Prevention Programme stood at 39 at the end of Quarter 3, with final 2019/20 figures falling just below target at 55 schools.

Indicator	Standard/ Target	Performance		
		17/18	18/19	Q3 19/20
Help Me Quit				
Percentage of adult smokers who make a quit attempt via smoking cessation services	5% (Annual target)	Data unavailable	3.2%	1.8% (as at Quarter 2)
Percentage of smokers carbon monoxide validated as successful	40%	47%	46.8%	44.5%
Smoking Prevention Programme				
Number of secondary schools targeted	60	57	58	39

National Exercise Referral Scheme

The National Exercise Referral Scheme is a Welsh Government funded scheme which has been developed to standardise exercise referral opportunities across all local authorities and health boards in Wales. The scheme targets clients who are at risk of developing chronic disease by providing them with an opportunity to access a high quality, supervised exercise programme to improve their health and wellbeing.

Performance remained strong for the scheme at the end of 2019/20. Latest data show that over 30,700 referrals were made to the scheme, exceeding our target of 23,500 referrals. Of these, over 18,600 individuals undertook a first consultation and over 10,300 completed the 16 week consultation, which again surpassed respective targets.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
National Exercise Referral Scheme – Number of referrals	23,500	32,775	32,691	30,744
National Exercise Referral Scheme – number of 1st consultations	16,300	19,694	19,312	18,651
National Exercise Referral Scheme – number of 16 week consultations	6,500	9,509	10,284	10,347

Healthy Working Wales

Healthy Working Wales supports people in Wales to return to work and remain in work for longer by promoting health and wellbeing, a good work-life balance and healthy lifestyles to help reduce sickness and absence. The programme is

delivered in partnership by the Welsh Government, Public Health Wales and Cardiff University.

Healthy Working Wales achieved 15 organisations completing a full assessment in 2019/20, against a target of 25. The number of organisations achieving a small workplace award decreased to 30 following an increase seen last year, and remains below the target of 100 organisations. The number of private sector organisations completing a mock assessment achieved target at 5, with those completing a full assessment falling short of target levels at 3 organisations.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Organisations completing a Corporate Health Standard full assessment	25	38	38	15
Organisations achieving a Small Workplace Health Award	100	60	78	30
Organisations completing a Corporate Health Standard mock assessment	25	25	30	16
Private sector organisations completing a mock assessment	5	12	15	5
Private sector organisations completing a full assessment	5	39	38	3

Welsh Network of Healthy Schools

The Welsh Network of Healthy Schools encourages the development of local healthy school schemes within a national framework. The World Health Organisation recognises it as playing a key role in promoting the health of children and young people, and the scheme has been rolled out across Wales since 2000. Each local scheme is responsible for supporting the development of health promoting schools within their area.

During 2019/20, 183 schools achieved the level 1-5 award, against a target of 180 schools. However, although the number of schools undertaking the National Quality Award increased from 21 to 25 over the last year, performance remains below the target of 50 schools.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Welsh Network of Healthy Schools - Schools achieving level 1-5 award	180	225	218	183

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Welsh Network of Healthy Schools - Schools undertaking National Quality Award	50	29	21	25

Monitoring arrangements for our health improvement programmes will need to be revised in 2020/21 to take into account the effects of the COVID-19 pandemic. Whilst some programmes are suspended or are continuing in a modified form, work continues to support the return to schools and to workplaces.

Building a Healthier Wales

Public Health Wales has been supporting the implementation of *Building a Healthier Wales*, a multiagency partnership designed to bring about a concerted shift towards prevention, across all sectors. A Building a Healthier Wales *Coordination Group* has been established with the purpose of working together on a number of collective priorities at a local and regional level (the emphasis being through Regional Partnership Boards (RPBs) and Public Services Boards (PSBs). In so doing, it will align the all-Wales mechanisms to ensure the system levers are organised to support their implementation, advise on policy changes that may arise and establish a model that tracks the shift in prevention cross sector.

The initial actions set by the Group, subject to final changes, are to:

- Actively engage and build relationships with RPBs, PSBs and partners.
- Develop and implement a widespread communications and engagement plan (including branding and a core narrative) across sectors and the public for these priorities and the wider prevention agenda.
- Review the resource allocation and spend for prevention and develop an economic model to track the spend on prevention cross sector.
- Reframe the outcomes, measurement and accountability mechanisms to incorporate and embed a shift in focus to prevention cross sector.
- Provide support and guidance for the specific priority areas.

National Health Protection Service

One of our key statutory functions is preparing for, responding to and effectively managing existing and new infectious and environmental threats to health. Alongside colleagues from across the organisation, our health protection and microbiology teams have been central to our enhanced response to the developing COVID-19 pandemic. To ensure that we are able to respond to infectious disease threats to the population of Wales, close working is fundamental to our Health Protection and Microbiology services. This has been evident in the key role played in the development of the Health Protection Response and Implementation Plans, and the [Public Health Wales Rapid COVID-19 surveillance dashboard](#). Collaborative work will also be undertaken with colleagues across the organisation to model potential effects on immunisation

and vaccination uptake and consequent impacts on health and well-being going forward.

Microbiology Services

Our Microbiology Division provides microbiology services from laboratories across Wales. This includes laboratory diagnostic services to hospitals and general practitioners, leadership of hospital infection control programmes, involvement in regional and national surveillance programmes, and assistance to Health Protection Teams in relation to outbreaks and community infection control.

Performance across our key performance indicators remained strong in 2019/20 with only turnaround times (Bacteriology and Virology) falling one per cent below target levels. Alongside our microbiology laboratories achieving UKAS (United Kingdom Accreditation Service) re-accreditation, we continue to provide a 24 hour, 365 days a year service to respond to infectious disease threats to the population of Wales. Other achievements include:

- Developing a demand management tool for enteric molecular testing
- Implementing a range of rapid molecular platforms across all of our sites as part of the COVID-19 response
- Trialling the use of rapid testing to support earlier diagnosis on blood culture samples
- Progressing organisational development for our staff

To provide assurance that we are still providing a quality assured service during the pandemic, we are currently developing a risk assessment which will document all of the temporary deviations from our accredited work, and detail the procedures that we have in place, or have introduced, to mitigate any risks.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Microbiology				
UKAS status of accreditation to ISO 15189:2012 for Microbiology and ISO 17025:2005 for Food, Water and Environmental laboratories for a defined scope	Accredited	Accredited	Accredited	Accredited
EQA Performance – Bacteriology	97%	94%	96%	97%
EQA Performance – Virology	100%	100%	99%	98%
EQA Performance – Specialist & Reference Units	100%	100%	99%	99%
EQA Performance – Food, Water & Environmental	98%	99%	99%	99%
Turnaround Time – Bacteriology	95%	94%	95%	94%
Turnaround Time – Virology	95%	98%	96%	94%

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Turnaround Time – Specialist & Reference Units	95%	96%	98%	98%
Turnaround Time – Food, Water & Environmental	95%	98%	98%	98%

Vaccination and Immunisation

The World Health Organization estimates that 3 million lives are saved every year worldwide through immunisation. It is important that all children and babies are fully immunised to protect them from potentially serious diseases. Adults also benefit from immunisation, including for work and travel purposes. For those at increased risk to complications of influenza, the annual flu vaccine is recommended. NHS Wales offers around 1.5 million doses of routine child and adult vaccines annually covering 16 infectious diseases. Our Vaccine Preventable Disease Programme (VPDP) works to support the wider NHS Wales, through policy development, training and the provision of information, to achieve targets in relation to a number of key vaccination and immunisation indicators.

Since last year, we have seen a generally positive picture across a number of our key performance measures. While uptake remained relatively consistent for children receiving three doses of the '6 in 1' vaccine by age 1 and two doses of MMR vaccine by age 5, improvements were seen across flu vaccine uptake indicators, although the majority remain below target levels.

COVID-19 has significantly impacted delivery of immunisation programmes in Wales, and as a result the incidence of vaccine preventable diseases may increase. Although immunisation continued for infants, pre-school children and pregnant women by following strict guidelines, COVID-19 will result in a fall in uptake of all vaccines which will become evident in 2020/21 figures.

In order to respond to the pandemic, influenza programme planning has been enhanced. Our VPDP team are developing plans that build on collaborative working to reach as many people as possible with the combination of a strong public communications strategy and service delivery support. There will be a focus on young children, health and social care staff and individuals with long term health conditions which also puts them at increased risk of severe COVID-19.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Vaccination and Immunisation				
Percentage of children who received 3 doses of the '6 in 1' vaccine by age 1	95%	95.9%	95.4%	95.8%

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Percentage of children who received two doses of the MMR vaccine by age 5	95%	89.5%	92.2%	92.1%
Influenza vaccination uptake among those aged 65 and over	75%	68.8%	68.3%	69.4%
Influenza vaccination uptake among under 65s in high risk groups	55%	48.5%	44.1%	44.1%
Influenza vaccination uptake among pregnant women	75%	72.7%	74.2%	78.5%
Influenza vaccination uptake among frontline healthcare workers	60%	57.9%	55.5%	58.7%

Healthcare Associated Infections

Healthcare associated infections (HCAI) develop as a direct result of medical or surgical treatment or contact in a healthcare setting. They can occur in hospitals, health or social care settings in the community and can affect both patients and healthcare workers. Common HCAs include Clostridium difficile (C.difficile), Staphylococcus aureus (Staph aureus), and E.coli bacteraemia (E.coli).

The Healthcare Associated Infection, Antimicrobial Resistance & Prescribing Programme (HARP) supports the NHS in Wales to reduce the burden of HCAI associated infections and antibiotic resistance across Wales. This is delivered through feedback of surveillance data and the promotion of appropriate antimicrobial prescribing and interventions to prevent the spread of infections.

During 2019/20, we continued to provide strategic leadership to the NHS in response to the challenges of HCAs. We also monitored the number of key infections on a monthly basis for all Health Boards and NHS Trusts that treat inpatients in Wales. This showed that HCAI levels across Wales had generally been maintained or improved against national reduction expectation targets. In particular, improvements were evident for Staph aureus and E.coli rates across Wales (26.5 and 78.8 per 100,000, respectively), whereas C.difficile rates remained more consistent over the same period (26.9 per 100,000). In line with changes made to the NHS Delivery Framework in 2019/20, data for Klebsiella sp and P. aeruginosa bacteraemia were reported for the first time and will continue to be monitored as part of our ongoing role to provide surveillance.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Healthcare Associated Infections				
Clostridium difficile rate (per 100,000 population) *	≤25	36.7	26.5	26.9
Staph aureus rate (per 100,000 population)	≤20	29.9	29.4	26.5
E.Coli bacteraemia rate (per 100,000 population)	≤67	83.3	79.1	78.8
Klebsiella sp bacteraemia rate (per 100,000 population) **	10% annual reduction	Not reported	Not reported	20.0
P. aeruginosa bacteraemia rate (per 100,000 population) **		Not reported	Not reported	6.3

* Amended reduction expectation in 2019/20

** Indicators reported for the first time in 2019/20 in line with NHS Wales Delivery Framework

Screening

One of our statutory functions is to provide population-based screening programmes. We deliver seven national screening programmes and coordinate the All-Wales managed clinical network for antenatal screening. The population-based screening programmes invite eligible participants at population risk, offering them a screening test to identify individuals who are likely to benefit from further tests or treatment to reduce the risk of disease or its complications. Our programmes are either primary prevention with the aim of reducing incidence of disease (e.g. Cervical Screening) or secondary prevention with the aim of early diagnosis to reduce the impact of the disease (e.g. Breast Screening).

As the COVID-19 pandemic progressed in Wales, careful consideration was given to balancing the benefits and risks of continuing to offer the screening programmes, in line with government advice for the population and measures health boards had taken to prioritise their response to COVID-19. Following the announcement from the UK Government on 16 March, which advised against non-essential social contact and non-essential travel, the Screening Division undertook a risk assessment on the ability and safety of delivering screening programmes. This resulted in all screening programmes being suspended until further notice with the exception of Antenatal Screening Wales, Newborn Bloodspot Screening and Newborn Hearing Screening programmes, as all have short windows of intervention.

A key priority for us over the last few years has been to maintain or improve our performance within each of our programmes. This is set out within our Strategic Plan and is based on a series of performance measures for each programme. At the end of Quarter 3 2019/20, the majority of our reported screening indicators had either shown a level of improvement or consistency. In particular, performance for our Diabetic Eye Screening results letters produced within 3 weeks of screen saw a significant improvement following a low of 4.3% in May

2019, with performance being maintained above standard at over 90% timeliness since July 2019. Newborn Bloodspot Screening avoidable repeat rate also saw continued improvement towards the 2% standard in 2019, falling from 14.5% in April to 4.4% in December 2019. For the programmes that have continued during the pandemic, data at the end of Quarter 4 2019/20 shows that performance has been maintained.

Less progress was made for Breast Test Wales assessment appointments within three weeks of screen up to the end of Quarter 3 2019/20. Medical staffing shortages remained across all regions but was particularly acute in West Wales where mammogram readings took longer due to staff capacity which directly impacted on assessment waiting times. Whilst performance improved for Bowel screening waiting time for colonoscopy compared to the previous year, we continued to experience challenges in achieving standard. Recruitment to fill consultant posts in Health Boards remains challenging, which had an impact on the number of screening colonoscopists available to undertake screening endoscopy lists.

Significant work has been undertaken on a risk based approach for reinstating the population based screening programmes on a phased approach. This has involved careful planning to account for eligible individuals that have not been invited during the pause period, those not assessed further in the pathway, and those who need to be invited routinely in the remaining period of the year. This will result in significant extra activity which will need to be assessed around how it can be recovered safely. It is anticipated that given screening programmes will have been paused for at least three months, it will take at least 12 months for each programme to recover fully, and some will take longer.

Indicator	Standard/ Target	Performance		
		17/18	18/19	Q3 19/20
Screening				
Breast screening: normal results sent within two weeks of screen	90%	91.4%	92.3%	90.7%
Breast screening: assessment appointments within three weeks of screen	90%	65.1%	65.5%	48.9%
Breast screening: per cent women invited within 36 months previous screen	90%	88.6%	86.5%	87.2%
Cervical screening coverage	80%	76.3%	75.5%	73.6%
Cervical screening waits for results: within four weeks	95%	93.3%	93.9%	95.9%
Bowel screening coverage	60%	52.2%	53.6%	56.9%

Bowel screening waiting time for colonoscopy	90%	47.5%	38.5%	54.4%
Abdominal aortic aneurysm surveillance uptake: small	90%	91.0%	91.4%	90.8%
Abdominal aortic aneurysm surveillance uptake: medium	90%	90.9%	94.2%	92.0%
Newborn hearing screening per cent completing the programme within four weeks	90%	98.4%	98.6%	98.2%
Newborn hearing screening per cent completing the assessment procedure by three months of age	85%	89.8%	92.6%	94.5%
Newborn bloodspot screening coverage	95%	94.4%	93.2%	94.5%
Newborn bloodspot screening avoidable repeat rate	≤2%	4.8%	7.3%	6.5%
Diabetic Eye Screening Coverage - Reported result in the last 12 months	80%	Data unavailable	67.5%	66.1%
Diabetic Eye Screening Results letters printed within 3 weeks of screen date	85%	Data unavailable	35.2%	70.2%

Our Staff

Our staff across the breadth of the organisation have had an exceptionally busy yet productive year. This has been especially evident during the final quarter of the year where the response from staff supporting the COVID-19 pandemic continues to be truly remarkable. Our staff have adapted to significant challenges as we have moved through different stages of the response to the pandemic. We have seen individuals and teams step into new roles/functions; IT and data developments fast tracked to a new level; changes to the estate plans to mobilise home working; development of contact centres and 24/7 services; and willingness from everyone to want to play their part in our response.

Protecting and supporting our workforce during the pandemic continues to be an important part of our COVID-19 response. The organisation has provided regular communication to keep staff well informed and a range of supporting tools and additional well-being support and 'keeping in touch' arrangements. Our workforce will be key to the continued delivery of the COVID-19 emergency response throughout 2020/21.

Our key workforce indicators were monitored closely during 2019/20. Whilst there has been a slight increase in the sickness absence figures for this year, the anticipated sharp increase due to COVID-19 did not materialise. Whilst our

statutory and mandatory compliance is below figures seen last year, there has not been a significant fall in training compliance since the start of the enhanced response and compliance remains above the all-Wales target of 85%.

Concerted effort to improve our non-medical appraisal (My Contribution) compliance has yielded increases in compliance rates when compared with previous years, yet remains below the national target of 85%. Understandably end-of-year appraisals may have been delayed following the outbreak, even so a plan has been approved by our Executive Team to address both compliance and the findings of an Internal Audit review. Our compliance for medical staff undertaking revalidation appraisal remained strong at 100% at the end of December 2019. In light of the NHS Wales wide response to the pandemic, the Chief Medical Officer suspended Medical Revalidation Appraisal until further notice.

Work is being undertaken to fully understand the people implications of our recovery. In particular, it is expected this will relate to the resource required to support the ongoing COVID-19 response, delivery of critical services and our statutory responsibilities. To ensure that we are able to continue to effectively respond to the pandemic, deliver our wider public health services and provide the necessary support to our staff, Public Health Wales will need to implement a range of people-focused measures. We will also need to ensure that our organisational infrastructure is designed and operating effectively, and in line with legislation on staff and patient safety.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Workforce				
Sickness absence rate (annual rolling)	≤3.25%	4.01%	3.87%	3.97%
Percentage compliance for all completed Level 1 competencies within the Core Skills & Training Framework	85%	86.4%	91.8%	89.5%
My Contribution appraisal compliance – recorded on ESR	90%	55.8%	55.8%	71.4%
Percentage of medical staff undertaking revalidation appraisal within the last 15 months	100%	100%	100%	100% (as at Quarter 3)

Concerns and complaints

Public Health Wales is committed to listening carefully and responding appropriately to the experience of service users, complaints, incidents and claims. Concerns provide valuable feedback which Public Health Wales is keen to learn from and they are seen as a positive agent for change. The Executive Team and Quality, Safety and Improvement Committee review the quarterly Putting Things

Right report. The purpose of this report is to identify issues and triangulate themes to support learning across the organisation. The Service User Experience and Learning Panel is the forum for ensuring that lessons are shared and scrutinised on an organisation-wide basis.

During 2019/20, Public Health Wales received 113 formal and 'on the spot' complaints. Of the formal complaints received, 36% were responded to within the 30 day target timescales. Although the number of complaints saw an increase from the level seen in the previous year, this figure now represents both formal and 'on the spot' complaints. Six serious incidents were reported to Welsh Government in 2019/20 with 83% of investigations completed within target timescales. Although falling just short of the 90% target, this is due to the complexity of the investigations, including extensive review and quality assurance of our databases, and the need to refer to archived records. This work continues to be taken extremely seriously with Welsh Government kept fully aware of the circumstances surrounding each investigation.

Indicator	Standard/ Target	Performance		
		17/18	18/19	19/20
Concerns and complaints				
Number of written concerns/ complaints received	N/A	52	59	113*
Written concerns/complaints responded to within target timescales	75%	73%	59%	36%**
Number of serious incidents reported	N/A	2	7	6
Serious Incident investigations completed within target timescales	90%	0%	57%	83%

* Includes formal and 'on the spot' complaints

** Only formal complaints are subject to the 30 working day target

Quality and Improvement

Our Quality and Improvement Strategy for 2020-23 supports our vision to become a high performing organisation. Using the Improvement Cymru 90 day Improvement research and innovation approach as a foundation, the plan is underpinned by significant evidence. Our definition of quality incorporates six domains, namely: safe; timely; efficient; effective; equitable; and people/population centred.

By focusing on managing for quality, we seek to identify the needs of our population and people using our services. This will enable us to prioritise the design, redesign and improvement of our work to meet or exceed expectations. We will ensure we reliably meet population and service needs on a daily basis and any gaps in performance are detected early and support improvements within

each Strategic Priority using a standard set of methods that reduce variation in our work.

A continuous improvement approach will be implemented across all areas of the organisation to achieve improved outcomes and impact, which is key to delivering our strategic priorities. We will continue to drive, lead and anchor all Wales safeguarding and equality and human rights pieces of work and support NHS organisations in improving the diversity of the workforce and ways of working which health and social care contribute to safeguarding the public.

Managing risk

Managing risk is fundamental to running a successful and high performing organisation. It should be at the heart of decision-making processes and resource allocation at both an operational and strategic level. It should seek to identify opportunities to innovate and invest, alongside the need to mitigate risks.

We have continued to develop and strengthen our risk management arrangements at both a strategic and operational level. Work continues to be undertaken to embed risk management at all levels of the organisation, which includes the ongoing training of all risk owners. This has enabled the organisation to measure key strategic risk performance, establish its risk profile and instigate thematic analysis through the use of the Strategic Risk Register, Corporate Risk Register and local risk registers.

As part of our response to the pandemic, we have developed a strategic risk framework in relation to COVID-19 and conducted a PESTLE analysis (Political, Economic, Sociological, Technological, Legal, Environmental) as part of our policy advice to Welsh Government. We also recognise that there are significant risks to the public's health and well-being that can result from measures taken to control the spread of COVID-19. Public Health Wales is undertaking a population survey, Health Impact Assessments and examining learning from the international public health community in order to understand such risks and inform an evidence population health approach to tackling COVID-19 across Wales.

Developing our performance management arrangements

We continued to mature our performance management and reporting arrangements during 2019/20 so that we are better equipped to monitor our progress against our strategic priorities and key performance measures. As a result of our ongoing response to COVID-19, we have adapted our performance and assurance arrangements to reflect the priorities and key areas of focus for the organisation, during the remainder of 2020/21. This demonstrates our performance across a range of areas, including: delivering statutory functions and critical services; our ongoing COVID-19 response; and supporting organisational recovery.

Our initial response has shown the value of high-quality, robust data presented in user-friendly, accessible ways. A number of developments are underway to

underpin our recovery plan going forward, including: developing indicators of quality/success for our four public health workstreams in the pandemic response programme; continued improvements to our Integrated Performance Report to highlight COVID-19 and business critical information; and a Performance and Assurance Dashboard to provide timely and robust intelligence to help inform our decision making. Assurance will be provided to the Board, its Committees and the Executive Team through a number of sources, including regular performance reports, service/area specific reports and regular updates produced as part of our response.

How we delivered our Well-being Objectives

When the Well-being of Future Generations (Wales) Act 2015 was first introduced, we recognised it as a 'public health act' and declared our intention to champion the legislation. We created a 'Health and Sustainability Hub' to support the organisation internally and externally to realise this ambition, and we used the Act to guide the development of our long-term strategy and its seven strategic priorities/well-being objectives.



Over the course of 2019/20, we continued to undertake a work programme to embed sustainable development in all that we do, as well as supporting others to do the same. Our work continues to evolve to support the embedding of sustainable development as part of Covid-19 response, so that we consider broader issues such as environmental sustainability and responding to EU exit with an integrated approach to promoting and protecting well-being. Here, we describe examples of what we have done and how we have worked to achieve our ambitions of making the Act 'real' in our day-to-day work through five work streams:

- Leading and informing
- Increasing our reach and impact, with a collaborative approach
- Development and innovation
- Monitoring and reporting
- Working with key stakeholders in Wales and Europe

LEADING AND INFORMING

Raising staff awareness and understanding

We have continued to carry out staff engagement to raise awareness and understanding of the opportunities and challenges of implementing the Act, by working closely with our corporate teams; by presenting at our '*Welcome, Engage, Network, Develop*' events; and through team meetings and working-groups across the organisation.

We value more informal staff-led engagement and support sessions such as 'Dr Bike' cycle maintenance with Cycle Training Wales, and 'Swap-not-Shop' sessions to exchange unwanted items of clothing and accessories for colleagues' 'pre-loved'

items. Sessions such as these have benefited our staff and enabled us to communicate key messages on the well-being of present and future generations.

Image: 'Dr Bike', Cycle Training Wales, in Public Health Wales



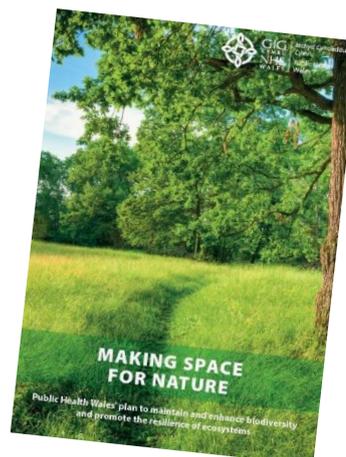
Image: 'Swap-not-Shop' staff engagement session



Our Biodiversity Plan

In April 2019, we published our biodiversity plan ('*Making Space for Nature*') to maintain and enhance biodiversity and promote the resilience of ecosystems. The plan is a statutory requirement in the Environment (Wales) Act 2016; you can read our first progress report [here](#).

Image: Public Health Wales' Biodiversity Plan



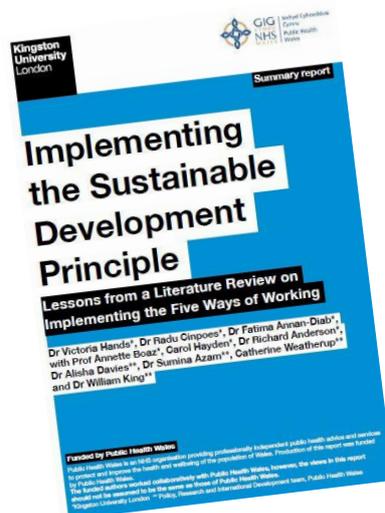
Procurement Champions Group

Public Health Wales' group of 'Procurement Champions' has ensured that sustainability is a key part of its work and is using the resources of Wrap Cymru to inform this work. In November 2019, the group co-ordinated the organisation's response to the Future Generations Commissioner's review of sustainable procurement in public bodies.



Literature Review on Sustainable Development Principle

In September 2019, the Health and Sustainability Hub published a literature review (commissioned from Kingston University, London) on implementing the sustainable development principle. The report provided a summary of the evidence and five key recommendations on how to 'translate' sustainable development to action for individuals, teams, organisations and systems.



We have been disseminating these lessons to all public bodies within Wales, and any organisation internationally, seeking to make the five sustainable ways of working a reality; this has been accompanied by a series of infographics. Early examples of publications covering the literature review comprise:

- World Health Organization's (Europe) Health and Sustainable Development [newsletter](#)
- World Health Organization's (Europe) Regions for Health Network [newsletter](#)

INCREASING REACH AND IMPACT, WITH A COLLABORATIVE APPROACH

Wider NHS Wales Decarbonisation / Climate Change Network

We have been working collaboratively with NHS Wales and Welsh Government colleagues to bring together a network of staff from across the public sector to tackle the issue of decarbonisation and climate change. This work aims to maximise the collective potential of wholesale change through raising the profile of how the health sector responds to the climate change emergency and to share this progress with colleagues.



Participating in wider 'future generations' networks

The Health and Sustainability Hub has participated in a range of networks to identify opportunities for working collaboratively to deliver shared outcomes, including Sustainable Development Co-ordinators' Cymru (SDCC+), National Public Bodies Network, Hub Cymru Africa, and Cynnal Cymru-Sustain Wales.

DEVELOPMENT AND INNOVATION

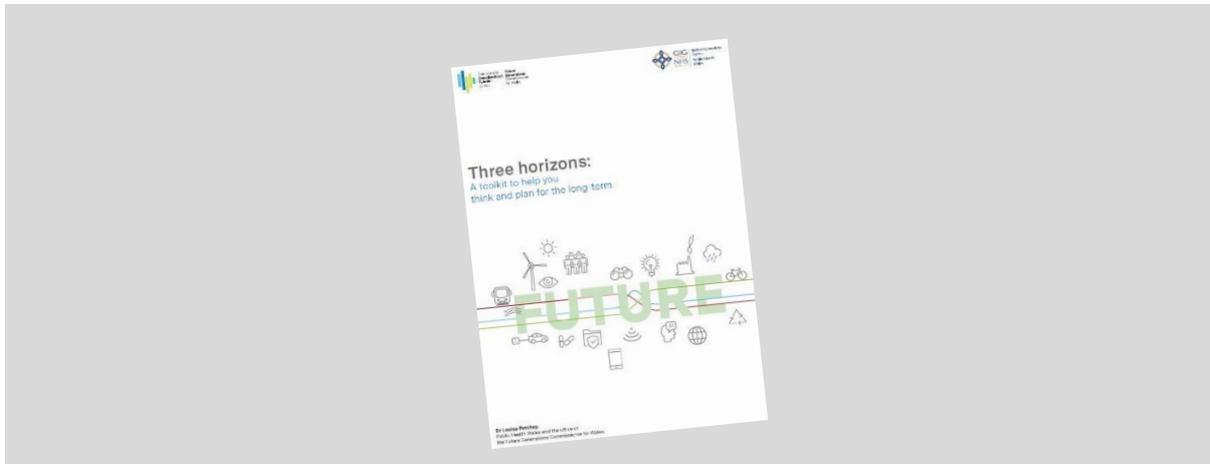
To further raise awareness and understanding of the Act, the organisation has developed additional products to help embed sustainable development. These have been developed collaboratively, with the aim of being used across Wales' public bodies and authorities. For example, a Be the Change 'Helping Nature to Flourish' e-guide was developed with the Wales Biodiversity Partnership for staff in over 200 of Wales' public authorities to support the delivery of their organisations' biodiversity plans (under the Environment (Wales) Act 2016). This approach was welcomed by members of the Wales Biodiversity Partnership as being 'public spirited'.

	<p>'Be the Change' e-guides offer <i>sustainable steps</i> to motivate and challenge staff to maximise positive impacts across the well-being goals. Six resources have been developed on themes supporting the four domains of sustainable development, and include a range of issues of both Welsh and global concern.</p>
	<p>The 'SIFT' tool is designed to motivate and challenge teams to implement sustainable development practice. We have further developed SIFT, following feedback from stakeholders including local government, NHS and the Office of the Future Generations Commissioner, including adding an info-graphic of how to deliver a SIFT workshop.</p>
<p>FUTURE GENERATIONS PROMPTS</p>  <p>for thinking and acting with the well-being of future generations in mind</p>	<p>We have worked with the International Futures Forum to develop a deck of future generations 'prompt cards' (based on research and practical experience) to inspire teams to take a broad, view of our circumstances and think about the 'long term', including when using the SIFT tool. These cards are supported by instructional videos and information sheets to encourage users to try various approaches with the resource.</p>
	<p>We have produced a video on the embedding sustainable development approach in Wales (and in Public Health Wales) to inform audiences in Wales and internationally. Content includes Wales' well-being goals and the five ways of working (the sustainable development principle)</p>
<p>Further information on these resources is available here</p>	

Supporting 'long-term thinking and working'

Following the success of the national conference, '*Shaping Our Future in Wales*' in March 2019, we worked with the Office of the Future Generations Commissioner to co-develop a 'Three Horizons Toolkit' to help public bodies to think and plan

better for the long-term by keeping a clear vision and taking future trends into account. Working with this new easy-to-use guide, we also supported a series of external training sessions and workshops to inform the Commissioner's 'Future Generations 2020' report. You can read more and access the toolkit [here](#).



Contributing to a healthy heritage

Working collaboratively with Arts Wales, we presented five roadshows across Wales for arts and cultural organisations to showcase their 'arts in health' work, and the links to maximising physical and mental health and well-being. The report and case studies by Public Health Network Cymru can be read [here](#); the approach was also profiled through a report in the journal of the WHO Regional Office for Europe 'Public Health Panorama' in its special issue on arts and health and can be accessed [here](#).



Supporting the 'Healthy Travel Charter'

In April 2019, Public Health Wales signed the newly developed Cardiff Healthy Travel Charter to support and encourage our staff and visitors to travel in a sustainable way to and from our sites. Through our Health and Sustainability Hub, we have been assisting other organisations to promote the Charter within their workplaces through a range of communications resources.



MONITORING AND REPORTING

Working with the Future Generations Commissioner for Wales

In May 2019, our Board members welcomed to their meeting the Future Generations Commissioner, Sophie Howe, to provide feedback on the organisation's self-reflection exercise on the extent to which we met our well-being objectives in 2017–18.

The Commissioner commended the approach which Public Health Wales had taken for this self-reflection and recognised Public Health Wales as having a system leadership role.

In December 2019, the Commissioner published the findings from this self-reflection exercise across public bodies, and from workshops for public bodies organised by the Wales Audit Office (see below). Public Health Wales was referenced within the [report](#):

1. Positively recognising the organisation's work on its culture, delivery and decision-making to apply the Act
2. Highlighting the organisation's 'Our Space' circular economy project, including because it was led by a corporate team
3. Acknowledging the organisation for helping to design the methodology for the Commissioner's monitoring and assessing work

Public Health Wales has also been represented on the Board of the Commissioner's 'Future Generations Leadership Academy', to support young people aged 18-30, and one of our Youth Ambassadors is a member of the Academy.



Working with the Auditor General for Wales

In spring 2019, Public Health Wales participated in the Wales Audit Office's (WAO) work in assessing the extent to which public bodies were acting in accordance with

the sustainable development principle. The WAO examined Public Health Wales' approach to developing its long-term strategy; this was followed by a workshop where improvement actions were developed. The WAO concluded that: *'The Trust [Public Health Wales] has made good progress in applying the sustainable development principle and the five ways of working, but recognises there is more work to do'*.



WORKING WITH KEY STAKEHOLDERS IN WALES AND EUROPE

Joint Action on Health Equity Europe (JAHEE) Programme 2018-21

We have been participating in the 'Health in All Policies' work package for the Joint Action on Health Equity Europe (JAHEE) Programme. As part of this, we presented the findings of the literature review on embedding the sustainable development principle and our products to facilitate sustainable development. These resources were very well-received, with representatives from various countries volunteering to test the resources in their individual country's context.



Working with the Welsh Government

In summer 2019, the Welsh Government published the *'Supplementary Report to the UK Voluntary National Review of progress towards the Sustainable Development Goals 2030'*. The report highlighted work by Public Health Wales around air quality, physical activity and arts and health, and our Health and Sustainability Hub was featured as an 'activity snapshot' through two of its resources ('Be the Change' and 'SIFT Tool') to support the organisation and other public services with Wales' well-being goals and ways of working. You can read the report [here](#).



Our Sustainability Report

1 Introduction

The annual Sustainability Report provides a summary of the organisation's performance for the period 2019/20, including information on our key achievements. This reflects our ongoing commitment to embedding sustainable development and delivering real performance improvements within this area.

2 Policy Context

Public Health Wales have produced this report for 2019/20 to conform to the public sector requirements set out in the Government Financial Reporting Manual (FReM). This requires that entities falling within the scope of reporting under the Greening Government commitments and which are not exempted by de-minimis limit or other exemption under Greening Government (or other successor policies), shall produce a sustainability report to be included within the Management Commentary in accordance with HM Treasury issued Sustainability Reporting in the Public Sector guidance.

3 Background & Profile

Public Health Wales was established as an NHS Trust on 1 October 2009, as an independent NHS body with a clear and specific health focus, and a remit to act across all domains of public health practice.

The Trust is an important service provider with an all-Wales reach. During 2019/20, the Trust had an annual budget of £153 million and is a significant public sector employer with 1802 whole time equivalent employees.

The Public Health Wales estate is located across Wales and currently comprises of 64 properties:

- 22 properties located in South East Wales
- 23 premises located in Mid & West Wales
- 19 premises located in North Wales

These premises are used to support the Trust as:

- 26 Screening Centres
- 8 Laboratories
- 27 Offices
- 1 Records Storage Facility
- 2 Garages

The current portfolio consists of properties that are owned (1), leased (18) or provided by/shared with other NHS Organisations (45). This creates a challenge in relation to the accurate reporting and availability of sustainability data. Because of the current structure, financial and non-financial information is only available across 24 premises. For the 45 properties provided by/shared with other NHS Organisations, utilities and waste is reported by that NHS Organisation and therefore is not recorded in this report.

The Environmental Management Governance is supported by:

- Energy, Waste and Water performance data is collated by the Compliance Officer and reported through the Facilities Management System.
- The Compliance Officer provides regular updates to the Head of Estates & Health and Safety on Environmental Management and Sustainability and manages these areas on a day-to-day basis.
- The Environmental Sustainability Group provides updates to the Senior Leadership Team on its Environmental Sustainability Action Plan to embed environmental sustainability across the organisation.
- The Deputy Chief Executive/Director of Operations & Finance who is the Lead for all Environmental Management matters within Public Health Wales. Any updates and issues are provided to the Board and Executive Team through a quarterly report.

4 Summary of Performance

4.1 Environmental Sustainability Group

During 2019/20, the Environmental Sustainability Group of Public Health Wales has been working to implement the organisation's vision to 'become an organisation where environmental sustainability is truly embedded through knowledge, collaboration, engagement and innovation.'

This is to be achieved through the action plans developed in 2018 by the five work streams that are part of the Environmental Sustainability Group.

4.1.1 Buildings, Energy and Waste

Our Annual Sustainability Report for 2018/19 showed that one of the biggest contributors to our carbon footprint is business travel, making up to 30% of the carbon emissions produced by the organisation at that time. This is a significant proportion of our carbon footprint and the building, energy and waste work stream has been investigating ways in which to reduce these emissions through alternative forms of transport.

In October 2019, a three month trial began of three different Electric Vehicles (BMW i3, Nissan Leaf and Renault Zoe), with the aim of the trial to help us determine the viability of not only having a pool car, but whether electric vehicles are a viable option for journeys undertaken by Public Health Wales staff. The organisation received excellent support from staff, with all three vehicles booked out daily over the length of the trial. Staff were asked to complete feedback forms, and the overall response was very positive, and supported the idea that Electric Vehicles were a viable option for the organisation as long as the infrastructure was in place to support it, such as vehicle charging points and dedicated parking for the vehicles at destinations. Further work on this project was delayed due to COVID-19, but Public Health Wales will look to collaborate with the Welsh Government Energy Service to ensure a plan is put in place to introduce Electric Vehicles into our fleet.

Further to the review undertaken in 2019 to identify premises where existing lighting could be upgraded to LED lighting, Public Health Wales undertook a procurement exercise in February 2020 to award a contract to supply and fit LED lighting at four premises, which could potentially reduce the organisations carbon emissions by 22 tonnes per year. The contract was awarded and work was due to begin at the end of March 2020, but due to COVID-19 the project was put on hold.

4.1.2 Green Travel

In April 2019, Public Health Wales signed up to the Cardiff Public Service Board Healthy Travel Charter; committing to work with 14 other Cardiff-based public sector organisations to both reduce unnecessary travel through investing in teleconference and skype infrastructure and promoting healthy travel.

During June 2019, the Green Travel Group ran a three-month trial of a pool bike to see if staff could be encouraged to use it to get to meetings during working hours. This would enable staff to get to appointments more easily, keep healthy, reduce air pollution and save the NHS money spent on car parking fees or taxis. The trial was a success and the pool bike is now available to all staff working at Number 2 Capital Quarter. Due to this success, the Green Travel Group will be looking to introduce this scheme across our other premises in Wales.

In July 2019, our flexible working policy was strengthened to acknowledge the link between flexible working and active travel. This policy enables employees to submit a flexible working request in order to travel for work at times which are compatible with public transport timetables, and enabling sufficient time for walking and cycling, as well as home-working. A full-time member of staff working from home one day per week will reduce their carbon footprint from travelling to and from work by 20%. It is envisaged that COVID-19 will impact on this further, and will lead to more staff working remotely and we hope that these new ways of working, using new technology and the ability to hold virtual meetings will support this change in working patterns and further contribute to reducing the organisations carbon footprint.

4.1.3 Leadership, Engagement and Learning

Through the work of the Health and Sustainability Hub, the Leadership, Engagement and Learning work-stream is leading on behavioural change in the organisation through developing 'Be the Change' resources.

These resources have been communicated to teams across the organisation, including local public health teams, with an aim to reduce our impact on the environment and lower carbon emissions. 'Be the Change' e-guides and e-posters offer sustainable steps to challenge staff to reduce their negative impacts and maximise positive impacts across the well-being goals, and link to the organisation's supporting services and policies.

4.1.4 Monitoring and Evaluation

The Monitoring and Evaluation work-stream is working to gather information on the sustainability indicators that are measurable at Public Health Wales

organisational level. In the first instance, carbon emission indicators such as energy and water consumption, quantity and sorting of waste, and business miles will be explored. Once each of the factors have been investigated, the group will be looking to establish a baseline figure for each indicator and proceed to monitor change and impact of initiatives over time.

4.1.5 Reducing Plastics

In November 2019, Public Health Wales made a commitment by pledging to go plastic free by 2023, a year earlier than the target set by Welsh Government. The Executive Team have agreed to the following by 2020:

- Not to purchase stationery items with a high plastic content
- Reduce locations with office water coolers by 100%
- Work with outside caterers to ensure that only reusable plastic is used for incoming catering
- Work with NHS Wales Shared Services Procurement to reduce the plastic content of goods and services
- Replace all anti-bacterial wipes with non-plastic variety where possible
- No longer procure promotional items with a high plastic content

It has also been agreed that we would reduce the number of buffets provided across the organisation. Guidance has been issued to staff who arrange catering so they can consider when catering can be provided and to consider the environmental impact when placing orders to help them make better decisions.

4.1.6 Looking Forward

Going forward the Environmental Sustainability Group will continue with the progress being made in each work stream, and work towards its short, medium and long-term objectives, including;

By 2024, we will:

- Have fulfilled our Plastics 'free' Pledge for the organisation
- Increase the number of plugged in, hybrid or pure electrical organisational vehicles
- Increase the proportion of staff cycling weekly to and from work or at work
- Reduce the proportion of car journeys commuting to and from work
- Embed an Environmental Action in the 'My Contribution' process
- Launch a training module on Environmental Sustainability
- Achieve ISO14001 and ISO5001 accreditation
- Reduce organisational printing costs
- Embed the hierarchy principles of 'reduce, reuse, and recycle' in procurement and material use across the organisation
- Include Environmental Sustainability information in our recruitment process, including induction

By 2030, we will:

- Have an Environmental Sustainability Group Dashboard to display environmental data, which is available to all staff
- Be non-essential plastic free across the organisation

- Be Net-Carbon Neutral
- Use ultra-low emission Heavy Goods Vehicles, where required
- Produce zero landfill waste

4.2 Internal Audit

Internal Audit undertook a review of the Sustainability Report in May 2019 based on the report produced for 2018/19. The objective of the audit was to evaluate and determine the adequacy of management arrangements for the production of the Sustainability Report for 2018/19 within the Annual Report and Accounts, in order to provide assurance to the organisation’s Audit Committee that risks material to the achievement of system objectives are managed appropriately.

Substantial assurance was given to the effectiveness of the system of internal control in place to manage the risk associated with the production of the Sustainability Report. One recommendation was made in the report, which is highlighted in Table 1, along with the progress on this action:

Table 1.

Recommendation	Action Taken
Management should ensure that the quality assurance process is consistently applied.	Previously, the quality assurance of the data was undertaken at the end of the year, Following collation of the information. To reduce the potential for errors in the future, quality assurance checks will take place on a quarterly basis by the Compliance Officer on all data collected to date. This will ensure that there are multiple opportunities to identify any errors in the data collection.

5. Greenhouse Gas (GHG) Emissions

The following table outlines the organisation’s performance for emissions, energy usage and financial indicators for energy and business travel for 2019/20:

Table 2.

Greenhouse Gas Emissions		2017-18	Per Cent Change	2018-19	Per Cent Change	2019-20
Non-Financial Indicators (1000 Tonnes CO2e)	Total Gross Emissions	2.424	-56.22%	1.061	4.62%	1.11
	Gross Emissions Scope 1 (direct)	1.218	-69.63%	0.370	-11.54%	0.327

	Gross Emissions Scope 2 & 3 (Indirect)	1.206	-42.67%	0.691	13.27%	0.783
Related Energy Consumption (KWh)	Electricity: Non-renewable	1,426,314	-70.75%	417,201	0.18%	417,951
	Electricity: Renewable	0	N/A	793,931	-5.73%	748,425
	Gas	711,235	-36.47%	451,880	0.77%	455,379
Financial Indicators (£)	Expenditure on Energy	234,767	-0.54%	233,495	-3.39%	225,585
	Expenditure on official business travel	554,525	-4.47%	529,737	48.9%	783,478

5.1 Performance

5.1.1 Greenhouse Gas Emissions

In 2019/20, the organisation has seen an increase in the reported Total Gross Emissions in comparison to 2018/19, seeing a 4.62 per cent increase against the figures reported in that year, as seen in table 2. This is solely down to the increase in Scope 3 emissions reported this year, for which more detail is provided under Scope 3 below. Public Health Wales has pledged to reduce greenhouse gas emissions by 3 per cent year on year, as per the Climate Change Strategy set down by Welsh Government.

Under Scope 1, the organisation has seen an 11.54 per cent reduction in emissions compared to 2018/19. This is primarily due to a significant reduction in the emissions produced (30.72 per cent for passenger vehicles and 17.79 per cent for HGV's) by the organisations fleet of vehicles run by our Abdominal Aortic Aneurysm and Diabetic Eye Screening services. The second biggest contributor to the organisations emissions comes under Scope 1. Fuel, specifically Red Diesel, is used to power the Breast Screening Mobile Units. This alone counts for 13 per cent of the total emissions produced by the organisation. The organisation is currently exploring the possibility of using alternative methods of powering vehicles, such as solar generators for our mobile screening units as well as replacing our fleet with Electric Vehicles.

Under Scope 2, which covers electricity generated for our properties, the organisation has seen a 9.54 per cent reduction in emissions compared to 2018/19. There are currently only five premises across the estate that are not supplied from renewable sources. The electricity emissions from these five premises account for 9.62 per cent of the total emissions across the estate.

Under Scope 3, the organisation has seen 17.97 per cent increase in emissions in comparison to 2018/19. This is primarily due to a significant increase (38.93 per cent) in the emissions produced from business travel in the organisation. Business travel makes up 85.21 per cent of the emissions produced under Scope 3, and is the biggest single contributor to emissions across the organisation. However, it should also be recognised that due to reporting being delayed during 2019/20, the organisation has been able to collect more data from claims made by staff during the final quarter of the year, in comparison to 2018/19. This will account for some of the increase in recorded emissions. The organisation is also reporting emissions from the hire of coaches for the transportation of pupils to support participation in the smoking prevention programme delivered to schools across Wales, which has not been available during previous reports.

Public Health Wales is also reporting an 86.77 per cent reduction in waste disposal emissions. This is primarily down to improvements in estimating the weight of waste produced by the organisation, which Section 6. Waste Management explains further. The organisation is also diverting more of its waste away from landfill; with more waste sent to recycling centres and for energy recovery from incineration during 2018/19. As these methods of waste disposal emit lower emissions, we have seen significant improvements in this area.

Public Health Wales has seen a reduction in water supply (17.58 per cent) and water waste (17.49 per cent) emissions during 2019/20, which also helps offset the increase emissions from business travel.

The baseline for Carbon Emissions produced by the organisation has been reset to 2017/18. This is due to improvements in the data available and reported, over the data available during 2016/17. This has improved our ability to compare the data that is available to the organisation now. This also allows us to compare our achievements against the Welsh Government target of a 40 per cent reduction in greenhouse gas emissions by 2020, as part of the Climate Change Strategy. This will give us a true reflection of our performance against our baseline. This is represented in the below table.

Table 3.

Baseline Direct Comparison Results

Emissions	2017-18 Total	2019-20 Totals	Percentage change on baseline %	Percentage change on baseline %
S1 - Fuels	313026.10	227906.94	-27.19%	-73.13%
S1 - Refrigerant & Other	777007.44	7308.00	-99.06%	
S1 - Passenger Vehicles	112783.12	77770.47	-31.04%	
S1 - Delivery Vehicles	15488.15	14336.54	-7.44%	
S2 - Electricity	501435.12	106828.25	-78.70%	-78.70%
S3 - WTT Fuels	58661.99	43953.63	-25.07%	-4.00%
S3 - T&D	46882.96	25310.37	-46.01%	
S3 - WTT - UK & Overseas Electricity	87418.82	18434.07	-78.91%	
S3 - Water Supply	1335.41	2223.69	66.52%	
S3 - Water Treatment	2618.15	4357.49	66.43%	
S3 - Waste Disposal	48512.72	5699.57	-88.25%	
S3 - Business Travel Land	351706.29	441834.21	25.63%	
S3 - WTT - Passenger Vehicle & Business Travel Land	103434.38	130882.29	26.54%	
S3 - WTT - Delivery vehicles & Freight	3721.24	3445.34	-7.41%	
TOTAL EMISSIONS	2424031.89	1110290.85	-54.20%	

Gross emissions have been calculated using the guidance on measuring and reporting on GHG emissions and the UK Government GHG Conversion Factors for Company Report. As can be seen above, in comparison to our new baseline in 2017/18, we have managed to reduce total emissions by 54.2 per cent. As a result, we have more than achieved our target of reducing carbon emissions by 40 per cent by 2020, as per Welsh Governments Climate Change Strategy.

Public Health Wales recognises that despite hitting our 40 per cent reduction target, there is still significantly more work to do and improvements to be made. Our aim is to improve our collection of Scope 3 Emissions further for future reporting, as well as ensuring we continue to embed sustainability into the culture of the organisation, to help further drive down the emissions generated by our work.

5.1.2 Electricity and Gas Consumption

As shown in table 2 above, we have seen an overall decrease in electricity consumption (3.7 per cent) across the estate. More significantly, 64.17 per cent of the electricity consumed across the estate is supplied through our Renewable Energy for Business contract with British Gas, ensuring we consume green energy where possible. The remaining premises are leased and Public Health Wales have no control over the energy contract in place. The organisation will look to engage in discussions with Landlords as to the possibility of them changing their current energy contracts for those premises to green energy. We have also seen a slight increase in gas consumption (0.77 per cent) across the estate, but these slight fluctuations are expected year on year, and is heavily dependent on the weather during winter months.

For the second year running, we are able to report a decrease in the total expenditure on energy. This is a reflection of the work undertaken by the Energy Price Risk Management Group for NHS Wales, in ensuring NHS Health Boards and Trusts are receiving the best price for the energy they consume.

5.1.3 Business Travel Expenditure

As seen in Table 2, there has been a 48.9% increase in reported expenditure on business travel in the organisation. With this being the first time that this expenditure has increased in 5 years of reporting. Some of this increase in expenditure can be attributed to the organisation reporting our expenditure from coach hire for the first time. In addition, due to delays in the reporting process due to COVID-19, we have been able to collate more data from our grey fleet for the final quarter of 2019/20, which will contribute to some of the reported increase over previous reporting periods. Despite this, the organisation does recognise that an increase of over £200,000 in expenditure on its grey fleet is not acceptable and further work is required to ensure business travel is not undertaken unnecessarily to help not only reduce the organisations carbon footprint, but also its expenditure, so these funds can be diverted to other areas of the organisation.

Going forward, Public Health Wales will continue to engage with staff to reduce business mileage from its grey fleet. Further work to establish the viability of

adding electric vehicles to our fleet is also taking place, whilst also ensuring the correct structure is in place to support this.

5.2 Actions to improve data collection for 2020/21

- Further engagement with Landlords as to the possibility of providing equivalent consumption and energy costs or the installation of sub metering in Public Health Wales occupied areas to provide accurate data.
- Engagement with landlords to assess the possibility of them signing up to a Green Energy Tariff.
- Further reviews of energy providers to allow consistent provision of data whilst ensuring value for money.
- Engagement with energy supplier to improve data collection and introduce SMART Metering where available.
- Ensuring options such as separate or sub metering will be explored in any new leases signed by the organisation where premises may be shared.

6 Waste Management

The following table outlines the organisation's waste management performance for 2019/20:

Table 4.

Waste		2015-16	2016-17	2017-18	2018-19	2019-20
Non-Financial Indicators (tonnes)	Total Waste	652.05	538.55	585.79	629.69	139.98
	Landfill	642.58	445.15	457.54	377.68	35.69
	Re-used/Recycled	9.47	92.46	120.25	224.65	74.08
	Composted	N/A	0.13	4.16	N/A	N/A
	Anaerobic digestion	N/A	N/A	N/A	9.12	8.32
	Incinerated with energy recovery	Data unavailable	0.81	3.83	18.24	22.11
	Incinerated without energy recovery		0	0	0	0
Financial Indicators (£)	Total Disposal Cost	35,078	46,342	48,907	53,597	54,531
	Landfill	13,994	18,395	20,890	17,725	13,999
	Re-used/Recycled	11,649	19,034	17,632	21,811	27,003
	Composted	N/A	N/A	259	N/A	N/A
	Anaerobic digestion	N/A	N/A	N/A	578	480
	Incinerated with energy recovery	9,435	8,913	10,125	13,483	13,050
	Incinerated without energy recovery		0	0	0	0

6.1 Waste Management Analysis

Public Health Wales recognises it has responsibilities concerning effective waste management and have made significant improvements in its data collection. This is reflected in the performance figures for 2019/20. The biggest improvement has been in the estimating of waste weight where no information is available from the waste carrier. During 2019/20 Public Health Wales have been using the Business Waste Weight Calculator produced by WRAP, which provided more accurate density factors of the waste we currently produce. This has contributed to the organisation reporting a decrease of 490 tonnes of waste (77.77 per cent) in comparison to 2018/19.

Only an estimated 25.5 per cent of the total waste produced by the organisation is being sent to landfill in 2019/20, compared to 60 per cent 2018/19. This has been achieved through better waste management practices taking place across our organisation, with staff having more access to alternative disposal methods. As a result, the proportion of waste sent for recycling has increased, with 52.9 per cent of waste disposed of via this method, compared to only 35.7 per cent sent for recycling during 2018/19. Staff are actively encouraged to ensure they are using the correct methods of disposal, with all staff expected to recycle where possible. This approach is also applied to our confidential paper wastage, ensuring as much as possible is sent for recycling whilst ensuring full compliance with applicable legislation and its duty of care.

Public Health Wales will continue to roll out SafeQ Software for all new photocopier contracts, which enables the organisation to monitor printer usage. Usage reports are provided to all Directorates at premises where devices have SafeQ Software, encouraging staff to reduce their paper waste.

Waste disposal through Anaerobic Digestion remains consistent with figures reported during 2018/19. Only two premises (Number 2 Capital Quarter and River House) have a food waste disposal agreement. Public Health Wales fully expects this to increase in future years, as more premises introduce food waste disposal measures in line with their local council's policy.

We are also reporting an increase of 3.87 Tonnes of waste sent for energy recovery from incineration. A total of 22.11 Tonnes of waste (15.8 percent of waste produced) was disposed of via this method, which includes business waste sent to the Energy Recover Facility run by Viridor in Cardiff, clinical waste and sanitary waste. This figure is expected to rise as more waste is sent for energy recovery and more demand is placed on our Screening Services, who are required to dispose of their clinical waste through this method.

We have seen a reduction of £3,726 in the total cost of waste sent to landfill, and will continue to investigate options to drive these costs down further and hope to reflect this during 2020/21. As a direct consequence of this, we have seen an increase in the total cost of waste sent for recycling of £5,192. Across all waste streams the organisation has spent an additional £934 compared to 2018/19, however, this can be attributed to rising costs in line with inflation.

6.2 Actions to improve data collection for 2020/21

- Further engagement with confidential, recycling and landfill waste carriers to ensure the provision of more accurate waste weight information.

7. Use of Finite Resources

The following table outlines the Trust's performance for water consumption for 2019/20:

Table 5.

Finite Resource Consumption			2015-16	2016-17	2017-18	2018-19	2019-20
Non-Financial Indicators (000m ³)	Water Consumption (Office Estate)	Supplied	2.111	2.052	1.675	5.922	4.612
	Water Consumption (Non-Office Estate)	Supplied	2.281	1.791	2.207	1.921	1.852
	Water Consumption (Total Estate)	Supplied	4.392	3.843	3.882	7.843	6.464
Financial Indicators (£)	Water Supply Costs (Office Estate)		8,526	7,453	6,079	9,735	16,364
	Water Supply Costs (Non Office Estate)		6,804	5,699	7,247	5,650	5,318
	Total Water Supply Costs		15,330	13,152	13,326	15,385	21,682

7.1 Use of Resources Analysis

Public Health Wales are reporting a decrease in overall water consumption of 17.58 per cent compared to 2018/19. Where data was not available, specifically leased accommodation where our landlord does not provide usage, we have estimated usage based on the average cubic meter used per staff member at premises where data is available. During 2019/20, Public Health Wales are averaging 5.9 cubic meters per staff member per year. This is a reduction of one cubic meter per staff member per year against the benchmark figure set in 2018/19.

The organisation understands that with a growing workforce it will invariably make it difficult to reduce water usage. As our estate grows, water safety compliance

will also have an effect on usage, as regular flushing regimes across the estate are required for low usage outlets.

The organisation is aware that the current age and condition of the majority of our estate does not make for efficient use of our water supplies. We will actively seek to improve and further reduce our estate through the Our Space programme, as well as working with staff to identify ways to save on water usage through our Environmental Sustainability Group.

The total cost of water supply has increased by £6,297 compared to 2018/19. When analysing the data, this increase can be attributed to charges from the landlord for water usage at Number 2 Capital Quarter, which have increased by £6,076 during 2019/20.

7.2 Actions to improve data collection for 2020/21

- Engage with property owners to explore the possibility of providing estimated water usage based on their invoices and number of staff in occupation or the installation of sub meters for accurate usage.

8. Data Collection Limitations

Public Health Wales faces a number of challenges obtaining accurate data, all of which are highlighted below:

- Sustainability data can only be provided where there is accurate and robust metering for the utilities being supplied
- Where Public Health Wales are hosted within shared buildings, there are no meters (sub-metering) in locations where Public Health Wales Staff reside, which means usage data is unavailable. Some landlords have been unable to provide equivalent consumption and utilities costs to date. Public Health Wales is charged for its gas, electricity, water and waste usage through a service charge, which is not broken down by service, and therefore cannot be recorded.
- Public Health Wales often occupies very small areas of shared premises where consumption is low and installation of additional metering (sub-metering) is not always viable or cost effective
- Some fourth quarter data had to be estimated due to invoices not being available at the time of report submission.
- Where data has been provided for waste to landfill and re-use/recycling the tonnage has been estimated based on containers/bins/sacks being 99 per cent full when emptied, as there are no measures in place to accurately record weight of waste.
- Where weight information for waste was not available, it was estimated using WRAP's Business Waste Weight Calculator.
- Where no data is available, this will be highlighted in Appendix A.

Appendix A

Table 6.

No usage data was available for the sites in the following table:

Address	Electricity Information	Gas Information	Water information	Waste Information
Clwydian House	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE	AVAILABLE
Building 1 St Davids Park	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE	AVAILABLE
St Annes Block St Davids Park	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE	AVAILABLE
River House	AVAILABLE	NOT APPLICABLE	NOT AVAILABLE	AVAILABLE

Table 7.

No expenditure data was available for the sites in the following table:

Address	Electricity cost	Gas cost	Water cost	Waste cost
Clwydian House	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE	AVAILABLE
Building 1 St Davids Park	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE
Breast Test Wales Llandudno	AVAILABLE	NOT APPLICABLE	NOT AVAILABLE	AVAILABLE
St Annes Block St Davids Park	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE	AVAILABLE
Llys Britannia	AVAILABLE	NOT APPLICABLE	NOT AVAILABLE	AVAILABLE
River House	AVAILABLE	NOT APPLICABLE	NOT AVAILABLE	AVAILABLE

Long Term Expenditure Trends

	£000s	£000s	£000s	£000s	£000s	Total %	12 mths %
	2015/16	2016/17	2017/18	2018/19	2019/20	Increase	Increase
Expenditure							
Welsh Government/LHBs/Trust/Local Authorities	18,390	20,717	23,149	22,291	23,404	27.26%	4.99%
Pay Expenditure	65,070	72,370	77,194	82,839	94,165	44.71%	13.67%
Other Non-Pay	22,036	24,641	25,064	27,073	32,377	46.93%	19.59%
Depreciation and Impairments	3,276	3,462	3,528	3,200	3,006	-8.24%	-6.06%
Gross Expenditure	108,772	121,190	128,935	135,403	152,952	40.62%	12.96%
Revenue							
Revenue from Patient Care Activities	-85,975	-92,376	-91,925	-94,334	-105,300	22.48%	11.62%
Other Operating Revenue	-22,836	-28,861	-37,062	-41,047	-47,611	108.49%	15.99%
Gross Income	-108,811	-121,237	-128,987	-135,381	-152,911	40.53%	12.95%
Investment Revenue, Finance Costs and Other Gains and Losses	22	31	24	-48	-83		
Retained (Surplus)/Deficit	-17	-16	-28	-26	-42		
Cumulative (Surplus)/Deficit	-67	-83	-111	-137	-179		