

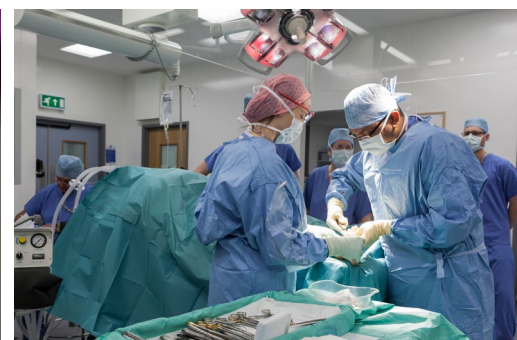
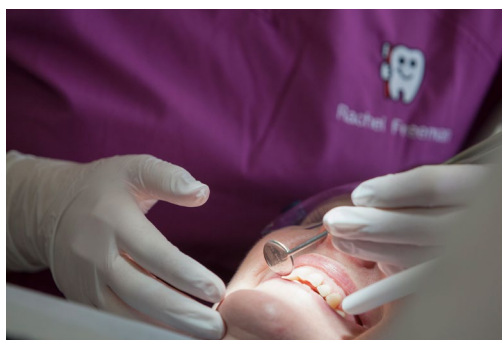


Llywodraeth Cymru
Welsh Government



NHS Wales Performance Framework 2025-2026

January 2025



NHS Wales Performance Framework 2025-2026

Contents

	Page
Introduction	2
Links with the Oversight and Escalation Framework – NHS Wales Organisations	2
NHS Wales Performance Measures 2025-2026	4

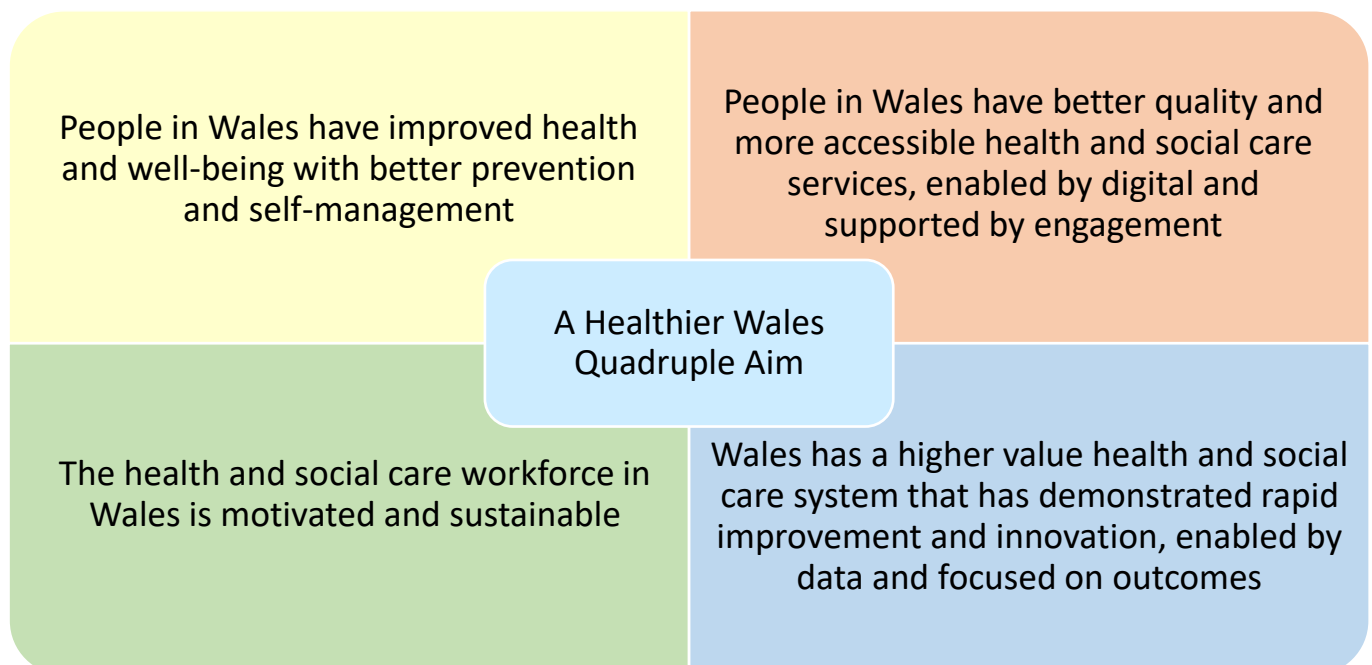
Introduction

The performance measures in the NHS Wales Performance Framework for 2025-2026 reflect the five Key Strategic Priorities as set out in the NHS Wales Planning Framework 2025-2028. These are:

- Population health and prevention
- Building Community Capacity
- Timely access to care and treatment (including cancer care)
- Mental health access
- Women's health

In addition, a small set of measures focusing on enablers, health prevention and the delivery of quality and safe services has been included.

All of the performance measures in the NHS Performance Framework have been mapped to 'A Healthier Wales' quadruple aim:



Oversight and Escalation Framework – NHS Wales Organisations

The Oversight and Escalation Framework, sets out how Welsh Government has oversight of and gains assurance about NHS Wales organisations, as well as describing in more detail what intervention approach will be taken.

There are five levels within the framework: routine arrangements; areas of concern (which is a new level to prevent further escalation); enhanced monitoring; targeted intervention and; the highest rate of escalation - special measures.

NHS Wales Performance Measures 2025-2026

Quadruple Aim 1: People in Wales have improved health and well-being with better prevention and self-management.

People will take responsibility, not only for their own health and well-being, but also for their family and for people they care for, perhaps even for their friends and neighbours.

There will be a whole system approach to health and social care, in which services are only one element of supporting people to have better health and well-being throughout their whole lives. It will be a 'wellness' system, which aims to support and anticipate health needs, to prevent illness, and to reduce the impact of poor health.

Quadruple Aim Theme	Performance Measure
Prevention	<ol style="list-style-type: none">1. Percentage of adult smokers who make a quit attempt via smoking cessation services2. Percentage of adult smokers who make a quit attempt via smoking cessation services who are co-validated as quit at 4 weeks3. Percentage of people who have been referred to health board services who have completed treatment for substance misuse (drugs or alcohol)4. Percentage of children who are up to date with the scheduled vaccinations by age 5 ('4 in 1' preschool booster, the Hib/MenC booster and the second MMR dose)5. Percentage of children receiving the Human Papillomavirus (HPV) vaccination by the age of 156. Percentage uptake of the influenza vaccination amongst adults aged 65 years and over7. Percentage uptake of the COVID-19 vaccination for those eligible8. Percentage of patients offered an index colonoscopy procedure within 4 weeks of booking their Specialist Screening Practitioner assessment appointment9. Percentage of well babies entering the new-born hearing screening programme who complete screening within 4 weeks10. Percentage of eligible new-born babies who have a conclusive bloodspot screening result by day 17 of life

Quadruple Aim 2: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement.

There will be an equitable system, which achieves equal health outcomes for everyone in Wales. It will improve the physical and mental well-being of all throughout their lives, from birth to a dignified end.

Services will be seamless and delivered as close to home as possible. Hospital services will be designed to reduce the time spent in hospital, and to speed up recovery. The shift in resources to the community will mean that when hospital-based care is needed, it can be accessed more quickly.

Quadruple Aim Theme	Performance Measure
Services Delivered Close to Home	<ol style="list-style-type: none"> 11. Percentage of GP practices that have achieved all standards set out in the National Access Standards for In-hours 12. Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes 13. Percentage of primary care dental services (GDS) contract value delivered (for courses of treatment for new, new urgent and historic patients) 14. Number of consultations delivered through the Pharmacist Independent Prescribing Service (PIPS) 15. Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for people aged under 18 years 16. Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for people aged under 18 years 17. Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over 18. Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for adults aged 18 years and over

Quadruple Aim Theme	Performance Measure
Access Hospital Services Quickly	<ul style="list-style-type: none"> 19. Percentage of emergency responses to red calls arriving within (up to and including) 8 minutes 20. Median emergency response time to amber calls 21. Median time from arrival at an emergency department to triage by a clinician 22. Median time from arrival at an emergency department to assessment by a clinical decision maker 23. Percentage of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge 24. Number of patients who spend 12 hours or more in all hospital major and minor emergency care facilities from arrival until admission, transfer, or discharge 25. Percentage of patients starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route) 26. Number of patients waiting more than 8 weeks for a specified diagnostic 27. Percentage of children (aged under 18 years) waiting 14 weeks or less for a specified Allied Health Professional therapy 28. Number of patients (all ages) waiting more than 14 weeks for a specified therapy 29. Number of adults waiting more than 14 weeks for all audiology pathways (to include new and existing pathways for hearing aids, tinnitus and balance) 30. Number of children waiting more than 6 weeks for all audiology pathways (to include new assessment and intervention pathways) 31. Number of patients waiting more than 52 weeks for a new outpatient appointment 32. Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100% 33. Number of patients waiting more than 104 weeks for referral to treatment 34. Percentage of children and young people waiting less than 26 weeks to start an ADHD or ASD neurodevelopment assessment 35. Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health

Quadruple Aim 3: The health and social care workforce in Wales is motivated and sustainable.

New models of care will involve a broad multi-disciplinary team approach where well-trained people work effectively together to meet the needs and preferences of individuals.

Joint workforce planning will be in place with an emphasis on staff expanding generalist skills and working across professional boundaries. Strategic partnership will support this with education providers and learning academies focused on professional capability and leadership.

Quadruple Aim Theme	Performance Measure
Motivated and Sustainable Workforce	36. Percentage of sickness absence rate of staff 37. Turnover rate for nurse and midwifery registered staff leaving NHS Wales 38. Agency spend as a percentage of the total pay bill
Training and Development	39. Percentage headcount by organisation who have had a Personal Appraisal and Development Review (PADR)/medical appraisal in the previous 12 months (excluding doctors and dentists in training)

Quadruple Aim 4: Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes.

Delivering higher value in health and social care will focus on outcomes that matter to the individual and making our services safe, effective, people-centred, timely, efficient and equitable. This will bring the individual to the fore and consider the relative value of different care and treatment options, in line with Prudent Health.

Research, innovation and improvement activity will be brought together across regions – working with RPBs, universities, industries and other partners. Alignment of funding streams and integrated performance management and accountability across the whole system will be in place to accelerate transformation through a combination of national support, incentives, regulation, benchmarking and transparency.

Quadruple Aim Theme	Performance Measure
Effective Services	40. Percentage of episodes clinically coded within one reporting month post episode discharge end date 41. Percentage of all classifications' coding errors corrected by the next monthly reporting submission following identification
Efficient Services	42. Number of Pathways of Care delayed discharges
People Centred Care	43. Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for people aged under 18 years 44. Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for adults 18 years and over 45. Number of patient experience surveys completed and recorded on CIVICA

Quadruple Aim Theme	Performance Measure
Safe Services	<p>46. Cumulative number of laboratory confirmed bacteraemia cases: Klebsiella sp and; Pseudomonas aeruginosa</p> <p>47. Cumulative rate of laboratory confirmed bacteraemia cases per 100,000 population: E.coli and; S.aureus (MRSA and MSSA)</p> <p>48. Cumulative rate of laboratory confirmed C.difficile cases per 100,000 population</p> <p>49. Percentage of confirmed COVID-19 cases within hospital which had a definite hospital onset (>14 days after admission)</p> <p>50. Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date</p> <p>51. Number of ambulance patient handovers over one hour</p> <p>52. Percentage of ambulance patient handovers within 15 minutes</p> <p>53. Number of National Reportable incidents that remain open 90 days or more</p>