

Report Title: (needs to match agenda)	Public Health Work 6 Month Update (including Targeted Intervention Indicators)		Agenda Item No:		
Meeting:	Quality Committee	Public	X	Meeting Date:	28 July 2026
		Private			
Lead Executive Title:	Executive Director of Public Health				
Report Author/s Title:	Consultant in Public Health Medicine				
Report Focus Summary – AAA Framework: The AAA framework reflects the overall position of the matter being reported. Select one category only and complete the relevant box with a brief summary . A useful guide can be found here: NHS Triple A Guide					
ALERT (Highlights areas of significant concern, such as non-compliance, urgent risks, or major issues that require immediate action or that the Board/Committee must be immediately aware of).					
ADVISE (Any areas of ongoing monitoring where an update has been provided to a sub-Committee/Group AND any new developments that will need to be communicated or included in operational delivery)					
ASSURE (details areas where the Board/Committee will receive evidence of effective control, high-quality performance, or improvements)					
This paper provides assurance on the performance and delivery of public health interventions in Cardiff and the Vale of Glamorgan, highlighting recent performance of note, and actions recently undertaken.					
Our public health programme is set within the context of the Health Board's long-term public health plan, with its priorities for 2024-2028 of immunisation, smoking cessation and healthy weight.					

Board/Committee Response Required (please select only one) To confirm the action Members are being asked to take considering the AAA Framework					
Assurance	X	Approval		Information/Noting	
Recommendations Recommendations should be clear, actionable, and aligned to the AAA summary above.					
The Quality Committee is asked to: Note the context of the Cardiff and Vale long-term public health plan, and the current priorities for public health in Cardiff and the Vale Note current performance and delivery of public health programmes in our area Note this is the first of regular six-monthly updates on our public health programmes					
Governance Route (please list all other Committee/Groups this report has been to)					
Where it's been:	n/a				
When it went:					
What decision was made:					
Main Report Background & Current Situation					

Background

The [Cardiff and Vale UHB long-term public health plan](#) was developed and published in 2024. This gives a summary of the population demographics and health needs of the population of Cardiff and Vale, along with a vision for public health for Cardiff and the Vale, and the rationale for prioritising prevention.

Over 500,000 people live in Cardiff and the Vale, with the number of people living here increasing steadily each year. There are significant inequalities in health within our area, with women in our most deprived areas experiencing on average 17 fewer healthy years of life than those in our least deprived areas, and men living 9 fewer years overall.

Over a fifth of deaths in England and Wales are avoidable due to preventable or treatable conditions, and public health interventions on average return £14 to the public purse for every £1 spent.

The long-term plan sets out three phases of action up to 2035, with priorities for those phases developed in the run up to each starting, to ensure the plan can be flexible and responsive to changing circumstances.

In the first phase of the plan (2024-2028) the priorities for public health in Cardiff and the Vale were agreed as immunisation, smoking cessation, and healthy weight ('the big three'). These priorities were chosen as they would have the biggest impact on reducing inequalities in our population. Throughout the plan period we will continue to develop and maintain a strong health protection system.

Over the next 12 months we will start to review the priorities for the second phase of the plan, from 2028 to 2031.

Alongside the long-term plan we set out an annual public health plan with priorities, milestones and key performance indicators for the year ahead, as part of the Health Board's annual planning cycle.

A number of actions and measures in our priority areas feature in the NHS Wales performance framework and key delivery expectations. As such we regularly report performance for these in the Health Board Integrated Performance Report (IPR), as well as providing updates against the milestones in our annual plan as part of the Health Board's routine reporting. There are also public health measures in the Health Board's agreed Escalation Framework with Welsh Government as part of Targeted Intervention, and we report regularly on those.

This report is the first of a regular six-monthly update to Quality Committee to highlight current public health performance and actions undertaken. This will include a copy of our latest submissions for the Integrated Performance Report and Escalation Framework, with key metrics and actions highlighted below.

Current situation

The Escalation Framework contains the following metrics which fall under the responsibility of the Public Health Team:

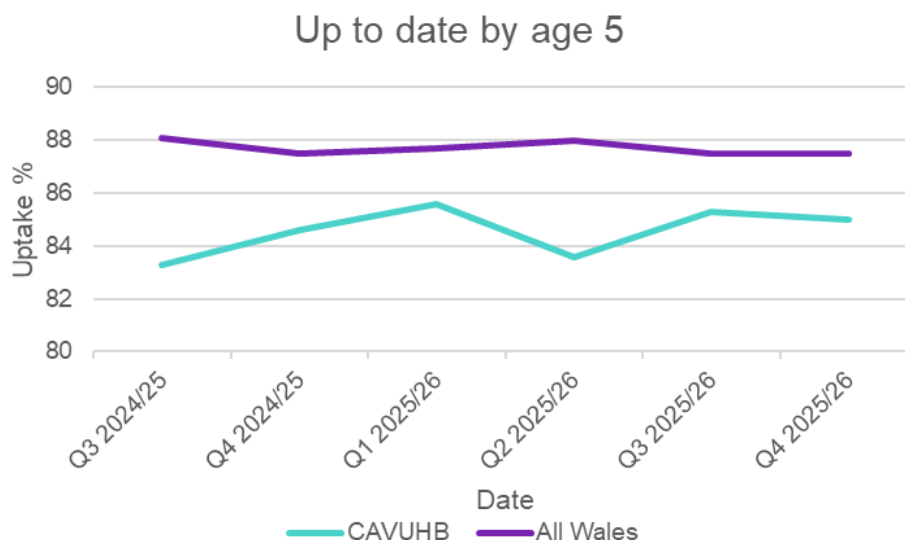
- Percentage of children up to date with scheduled vaccinations by age 5 to be in line with the all-Wales average.
- HPV vaccine uptake rate for children by the age of 15 to be in line with all Wales average.
- Percentage of adult smokers who make a quit attempt via smoking cessation services towards the target compliance over the 12-month period measure.
- Positive action taken in response to the alarm outlier in the National Paediatric Diabetes Audit 2023-24 for adjusted mean HbA1c (30.5%).

Detailed information on our performance is given in the Appendix. (To note the format of the Health Board Integrated Performance Report was being significantly changed for the July 2026 report with the final version

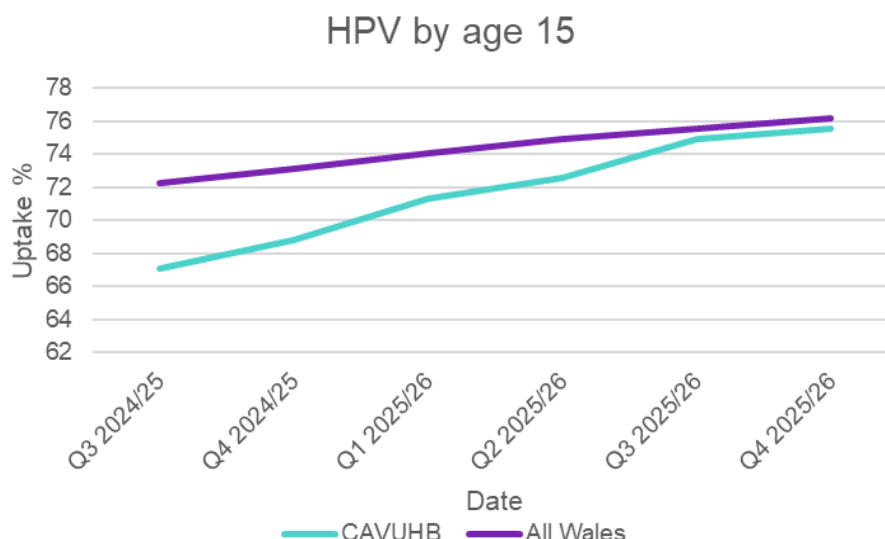
not available at the time of finalising this report, so we have attached a copy of the public health sections in the format of the old report.)

Key areas of performance for awareness include:

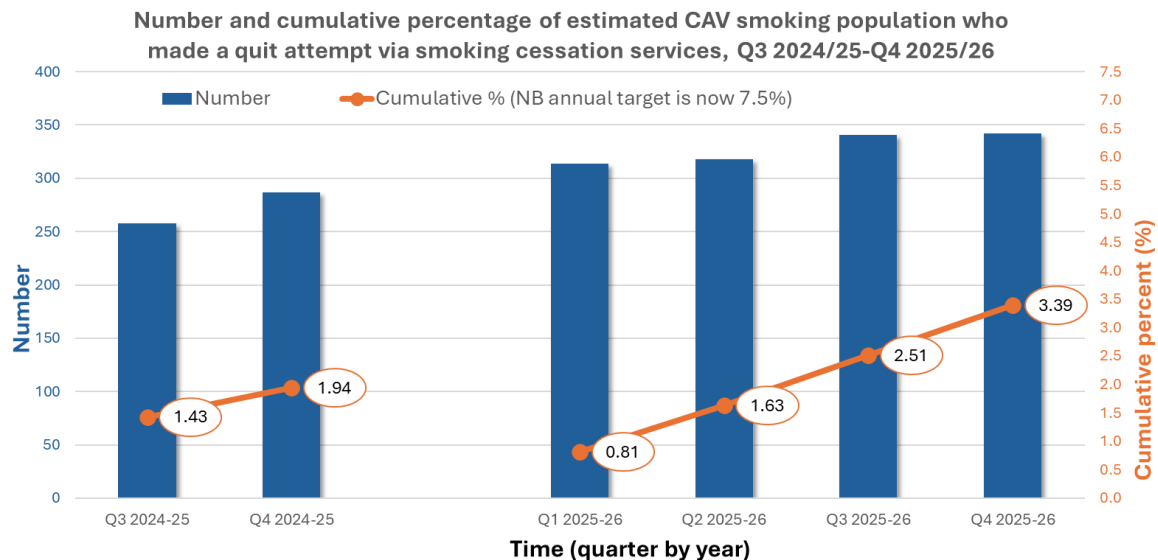
- Immunisation
 - For 1 January to 31 March 2026, **79.9%** of children were up to date with vaccination by age 4, and **85%** of children were up to date by age 5



- For the RSV catch-up programme (resident population aged 75 to 79 as of 1 September 2024), 13,645 out of 18,177 individuals have been vaccinated to date. This is an uptake of **75.1%**, which is above the All-Wales average of 71.8% and the highest uptake across Health Boards in Wales.
- For 1 January to 31 March 2026, uptake of HPV vaccine for children reaching 15 years of age was **75.6%**, an increase on the previous quarter (74.9%) (see graph below)



- Smoking cessation
 - The cumulative percentage of the estimated smoking population who made a quit attempt via smoking cessation services increased from 1.94% in Q4 2024/25 to 3.39% in Q4 2025/26, though this remains below the target of 5% (2025/26) and the new target of 7.5% from April 2026



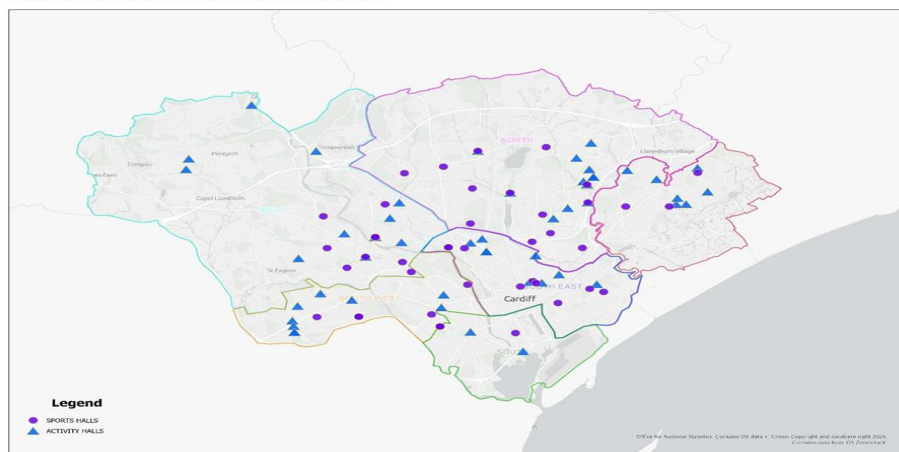
- Healthy weight
 - 2024/25 Child Measurement Programme data demonstrated a slight decrease in healthy weight to 75.3%, from 77.7% the previous year (for Cardiff and Vale UHB). The UHB had the highest level of healthy weight of all Welsh Health Boards for 2024/25.
- Diabetes
 - Most recent data (Q1 26/27) shows a reduction in the gap between highest and lowest uptake rates of all 8 care processes at cluster level compared to baseline (18.7% gap, from 27.2% Dec 25). The Q4 25/26 gap was 25.8%
 - The Health Board Paediatric Diabetes Unit has moved in a positive direction from 'alarm' status to 'alert' status in most recent National Paediatric Diabetes Audit report (2024-25 data)

Recent actions undertaken as part of our public health work include:

- Immunisation
 - The Childhood & Teenage Immunisations Strategic Action Plan is complete, pending approval from the Quality Committee in July 2026. The strategy is for a period of 3 years and the first-year delivery plan has been developed collaboratively across all partners delivering health board vaccination programmes and in consultation with primary care. There is a strong focus on improving uptake of all vaccines by age 5 and uptake of HPV by age 15.
- Smoking cessation
 - Targeted service promotion has resulted in an increase in Help Me Quit activity. In May 2026 the number of smokers treated by the Help Me Quit service increased by 50% compared with the same month last year.
 - The Allen Carr Easy way project provided a stop smoking intervention to 93 smokers between 1.4.26 and 3.07.26
 - The Help Me Quit community smoking cessation team is present in University Hospital Llandough 2 days each week to offer smoking cessation support to in-patients, staff and visitors.
 - The Smoking enforcement officer has approached 1380 individuals found smoking on hospital sites, between 17.11.25 and 17.5.26. An evaluation was completed in June 2026 which will inform the next stage of the project
- Healthy weight
 - The Cardiff Physical Activity and Sport **Facility Audit Report** is complete. It provides a comprehensive assessment of all places that support physical activity, from playgrounds, parks, and grass pitches to community halls, leisure centres, and elite sporting facilities, and more. It establishes a robust evidence base on the availability, quality, accessibility, and distribution of facilities, identifying gaps and inequalities in provision.

- Findings include: Cardiff offers a wide range of sports and recreation facilities, including major venues, community halls, gyms, parks, and informal spaces, but access is uneven, with significant inequalities in provision, quality, and affordability. Inner-city and disadvantaged communities face the greatest challenges due to shortages of open space, overused facilities, high costs, travel barriers, and limited access to school facilities.
- Here is an example of one facilities audit map:

Figure 4: Map of all Sports Halls and Activity Halls



Appendices:

(List any appendices that will accompany this report).

1. Integrated Performance Report – public health elements of cover slides and data slides (please see note about format of the report under ‘Current situation’, above)
2. Targeted intervention slides showing smoking cessation and immunisation performance

Strategic Alignment – Shaping Our Future Wellbeing:

 Putting People First	X	 Providing Outstanding Quality	X
 Delivering in the Right Places	X	 Acting for the Future	X

Impact Assessment

Please ensure each section is completed. (If “Yes” is selected, complete the detail. If “No”, please write “Not applicable”.)

Risk: No

If yes, please include the details of any Risk Assessments undertaken and, where appropriate, the nature of any risks identified. (If this has been addressed in the main body of the report, please say so).

Safety: No

If yes, what are the Staff or Patient safety implications associated with the content/proposals within this report. Have these been fully considered and are plans in place to mitigate them? (If this has been addressed in the main body of the report, please say so).

Financial: Yes

Financial pressures due to ever increasing population healthcare demand require a 'left shift' to investing in prevention, to reduce ill health in our wider population.
Workforce: No
<i>If yes, what are the workforce implications associated with the content/proposals within this report? Have these been fully considered and have plans been put in place to mitigate them? (If this has been addressed in the main body of the report, please say so).</i>
Legal: Yes
Cardiff and Vale UHB has a statutory duty to protect and improve the health of the population, as well as provide healthcare for people who are unwell.
Reputational: No
<i>If yes, what reputational risks are associated with the content/proposals within this report? Have these been fully considered and have plans been put in place to mitigate them? (If this has been addressed in the main body of the report, please say so)</i>
Socio Economic: Yes - https://www.gov.wales/socio-economic-duty-guidance
The long-term Public Health Plan sets out as a cross cutting theme the need to reduce inequalities in health in our population
Equality & Health: No
<i>Equality Health Impact Assessments (EHIA) are typically undertaken when developing or reviewing Health Board strategies, policies, plans, procedures or services. Do the proposals contained within the report necessitate the requirement for an EHIA to be undertaken? If so, please include details of any EHIA undertaken or the plans that are in place. (If this has been addressed in the main body of the report, please say so)</i>
Decarbonisation: Yes
A significant proportion of Health Board carbon emissions are associated with secondary and specialist care for our patients. By supporting our population to be healthier, this will reduce healthcare demand and reduce carbon emissions
Welsh Language: No
<i>Consideration should be given to potential impact on the Welsh language</i> <i>Does the report align with the More than just words strategy, ensuring Welsh-speaking patients can access services in their preferred language?</i> <i>Ensure key information is bilingual and that the report meets the Welsh Language Standards for communication, signage, and patient materials.</i> <i>Does the report address the need for Welsh-speaking staff or bilingual resources to deliver equitable care?</i> <i>Does the subject matter of your paper risk any of the above not being achieved?</i>